

PREA Facility Audit Report: Final

Name of Facility: Robert L. Perry Juvenile Justice Center

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 04/13/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 04/13/2022

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	03/08/2022
End Date of On-Site Audit:	03/09/2022

FACILITY INFORMATION	
Facility name:	Robert L. Perry Juvenile Justice Center
Facility physical address:	5665 Roger Wilson I Wilson, Columbia, Missouri - 65202
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Tara Eppy
Email Address:	tara.eppy@courts.mo.gov
Telephone Number:	573-886-4450

Superintendent/Director/Administrator	
Name:	Tara Eppy
Email Address:	Tara.Eppy@courts.mo.gov
Telephone Number:	573-886-4450

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

Facility Characteristics	
Designed facility capacity:	45
Current population of facility:	23
Average daily population for the past 12 months:	9
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	11-18
Facility security levels/resident custody levels:	Secure
Number of staff currently employed at the facility who may have contact with residents:	22
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	0
Number of volunteers who have contact with residents, currently authorized to enter the facility:	2

AGENCY INFORMATION	
Name of agency:	13th Judicial Circuit of Missouri
Governing authority or parent agency (if applicable):	
Physical Address:	705 East Walnut Street, Columbia, Missouri - 65201
Mailing Address:	
Telephone number:	5738864060

Agency Chief Executive Officer Information:	
Name:	Cindy Garrett
Email Address:	Cindy.I.Garrett@courts.mo.gov
Telephone Number:	5738864060

Agency-Wide PREA Coordinator Information**Name:** Tara Eppy**Email Address:** tara.eppy@courts.mo.gov**SUMMARY OF AUDIT FINDINGS**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

Number of standards exceeded:

2

- 115.333 - Resident education
- 115.353 - Resident access to outside confidential support services and legal representation

Number of standards met:

41

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-03-08
2. End date of the onsite portion of the audit:	2022-03-09

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	<p>On 2.20.2022 at 5:38 pm, MST, this Auditor phoned the Rainbow House Regional Child Advocacy Center at 1611 Towne Drive, Columbia, MO 65202 at phone number. 573.474.6600. After the Auditor introduced herself and the reason for the call, the operator stated my questions would be better answered by a supervisor. The operator took down contact information and stated I would get a call back during normal business hours.</p>

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	45
15. Average daily population for the past 12 months:	9
16. Number of inmate/resident/detainee housing units:	2
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	14
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	14
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0

39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	1
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	22
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	0

52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	Since COVID-19, the facility has stopped using volunteers and contracted personnel and does not foresee utilizing such any individuals, moving forward.
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INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	8
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The facility provided a roster of all residents, by housing unit, which included demographic information.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Targeted Inmate/Resident/Detainee Interviews

58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	1
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As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	1
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	1
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility provided a roster with specific demographic information, which did not include this category. In addition, the facility had 14 residents, in total and I interviewed 10 of those 14.</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>1</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The facility does not utilize segregated housing.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	

71. Enter the total number of RANDOM STAFF who were interviewed:	8
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input type="radio"/> Yes <input checked="" type="radio"/> No
a. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)	<input type="checkbox"/> Too many staff declined to participate in interviews. <input type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles). <input checked="" type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews. <input type="checkbox"/> Other
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	10
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>78. Were you able to interview the PREA Coordinator?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>79. Were you able to interview the PREA Compliance Manager?</p>	<p><input type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input checked="" type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</p>
<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Agency contract administrator</p> <p><input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment</p> <p><input checked="" type="checkbox"/> Line staff who supervise youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Education and program staff who work with youthful inmates (if applicable)</p> <p><input checked="" type="checkbox"/> Medical staff</p> <p><input type="checkbox"/> Mental health staff</p> <p><input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches</p> <p><input checked="" type="checkbox"/> Administrative (human resources) staff</p> <p><input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff</p> <p><input type="checkbox"/> Investigative staff responsible for conducting administrative investigations</p> <p><input type="checkbox"/> Investigative staff responsible for conducting criminal investigations</p> <p><input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness</p> <p><input type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation</p> <p><input checked="" type="checkbox"/> Staff on the sexual abuse incident review team</p> <p><input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation</p> <p><input checked="" type="checkbox"/> First responders, both security and non-security staff</p> <p><input checked="" type="checkbox"/> Intake staff</p> <p><input type="checkbox"/> Other</p>

81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

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

85. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., intake process, risk screening process, PREA education)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	No text provided.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

0

a. Explain why you were unable to review any sexual abuse investigation files:

The facility has not experienced a sexual abuse allegation since the last audit cycle.

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	0
a. Explain why you were unable to review any sexual harassment investigation files:	The facility has not experienced a sexual abuse allegation since the last audit cycle.

107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The facility has not experienced a sexual abuse allegation since the last audit cycle.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>Non-certified Support Staff</p>	
<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p>AUDITING ARRANGEMENTS AND COMPENSATION</p>	
<p>121. Who paid you to conduct this audit?</p>	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
<p>Identify the name of the third-party auditing entity</p>	<p>CMG Consulting</p>

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1182 398" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Zero Tolerance, not dated 3. Juvenile Justice Organizational Chart, dated 10.13.2021 <p data-bbox="244 434 352 461">Interviews:</p> <ol data-bbox="244 465 718 622" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Shift Supervisor 5. Detention Superintendent/PREA Coordinator <p data-bbox="244 627 1473 721">Through interviews with residents and staff and review of resident and staff files, it was evident that this facility interweaves requirements for this standard in their daily protocol. Both residents and staff could speak to the facility PREA practices and protocols being used as is described in a facility PREA policies.</p> <p data-bbox="244 757 499 784">Site Review Observation:</p> <p data-bbox="244 788 1489 1016">During the tour of the facility, this Auditor noticed Zero Tolerance, Advocate and PREA Audit postings throughout the facility. Camera placement throughout the facility and recreation yard was such no blind spots were noted. The facility has two sides, one side for pre adjudicated youth and one for adjudicated youth. All cells are individual cells. Cells on the pre adjudicated side are wet cells with sinks and toilets. Four separate single use showers are in this unit. Shower rooms have closing doors allowing for complete privacy during showers. The post adjudication side has individual dry cells with a shared bathroom and shower room. Residents are locked down during showers and toilet use to ensure they are not observed by staff or other residents during use.</p> <p data-bbox="244 1048 1489 1106">Cameras in the facility were monitored and all were operable. Cameras cannot view inside sleeping areas and or shower and toileting areas. The facility had ample shower coverage with no apparent blind spots noted throughout the facility.</p> <p data-bbox="244 1137 1398 1196">The Auditor strongly recommends the facility date their PREA policy and subsequent documents to ensure staff and residents are referencing current policy and or subsequent document information.</p> <p data-bbox="244 1227 328 1254">115.311</p> <p data-bbox="244 1258 1453 1321">(a) The Robert L. Perry Juvenile Justice Center PAQ states the PREA Policy mandates zero tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract.</p> <p data-bbox="244 1352 1465 1411">Robert L. Perry Juvenile Justice Center Policies and Procedures, Zero Tolerance, page 1, section I., states, "The Robert L. Perry Juvenile Justice Center has zero tolerance of sexual abuse and sexual harassment."</p> <p data-bbox="244 1442 1358 1469">Page 1, section A. 1-2, "The facility has zero tolerance toward all forms of sexual abuse and sexual harassment.</p> <ol data-bbox="244 1496 1390 1563" style="list-style-type: none"> 1. Staff and volunteers will be provided with training and education regarding sexual abuse and sexual harassment. 2. Residents will be provided with training and education regarding sexual abuse and sexual harassment." <p data-bbox="244 1594 1469 1720">(b) The agency employs an upper-level, agency wide PREA Coordinator. The Detention Superintendent/PREA Coordinator demonstrates she has sufficient time and authority to develop, implement and oversee agency efforts to comply with the PREA standards in all of its facilities. The Detention Superintendent/PREA Coordinator is in the agency organization chart, who reports to the Chief Juvenile Officer.</p> <p data-bbox="244 1756 1477 1854">Robert L. Perry Juvenile Justice Center Policies and Procedures, Zero Tolerance, page 1, section 1. B., states, "The Superintendent will designate a degreed staff member as the PREA Coordinator. The PREA Coordinator will be responsible for developing, implementing, and overseeing the facility's efforts to comply with the PREA standards."</p> <p data-bbox="244 1886 1458 1944">The facility provided a Juvenile Justice Organizational Chart. The organizational chart demonstrates the Superintendent is the Detention Superintendent/PREA Coordinator.</p> <p data-bbox="244 1975 1461 2033">(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility does not have a PREA Manager. The 13th Circuit – Robert L. Per Juvenile Justice Center has only one facility.</p> <p data-bbox="244 2065 882 2092">Through such reviews, the facility meets standard requirements.</p>

115.312	Contracting with other entities for the confinement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Contract for Services, Missouri Department of Social Services, dated 7.1.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Detention Superintendent/PREA Coordinator <p>115.312</p> <p>(a-b) The Robert L. Perry Juvenile Justice Center PAQ states the State of Missouri, Division of Youth Services contracts with the Robert L. Perry Juvenile Justice Center.</p> <p>The facility provided a Contract for Services, Missouri Department of Social Services. The Contract for Services, Missouri Department of Social Services, page 3, section 3.4.1, states, "The contractor shall comply with the Prison Rape Elimination Act of 2003 (34 United States Code 30301, et seq.) and with all applicable PREA National Standards (28 Code of Federal Regulations 115, et seq.), state agency policies related to preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within state agency facilities, programs, or offices owned, operated, or contracted by state agency."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.313	Supervision and monitoring
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1273 497" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Superintendent Reviews, not dated 4. Staffing Pattern 2021 Schedule, Annual Review 5. Robert L. Perry Juvenile Justice Center Staffing Plan, dated 3.2022 6. Unannounced Visits 2018-2021 <p data-bbox="244 533 352 560">Interviews:</p> <ol data-bbox="244 564 716 723" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Shift Supervisor 5. Detention Superintendent/PREA Coordinator <p data-bbox="244 728 1458 790">Residents stated staff complete rounds throughout the day and overnight shifts. Staff interviewed were not made aware of when unannounced rounds occurred.</p> <p data-bbox="244 822 1458 947">The Shift Supervisor and the Detention Superintendent attested to completed unannounced rounds monthly and quarterly throughout the year. The Shift Supervisor did state he was unaware he needed to document rounds and stated moving forward he would ensure each round conducted was documented. The Detention Superintendent had quarterly documentation of her rounds throughout the last 12 months.</p> <p data-bbox="244 978 485 1005">Site review observation:</p> <p data-bbox="244 1010 1439 1173">During the tour and throughout the onsite phase of the audit observation of staff coverage demonstrated the facility met minimum requirements. Staffing patterns during the 8:00 am to 12:00 pm shift is within ratio; however, the facility needs additional staff to ensure proper coverage is available should a day shift staff be unable to work. The Detention Superintendent is currently training administrative staff in order to provide coverage, should a staff during the 8:00 am to 12:00 pm staff be unable to work on a given day.</p> <p data-bbox="244 1205 1477 1330">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. The daily number of residents is eight and the staffing plan was predicated on 7.7 residents.</p> <p data-bbox="244 1361 1481 1624">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 1, section B., states, "Supervision and Monitoring—PREA Standard 115.313—Robert L. Perry Juvenile Justice Center shall ensure that its residential staffing and monitoring plans comply with requirements that the facility shall maintain staff ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances, which shall be fully documented. The facility Staffing Pattern is monitored by the Programs and Services Coordinator. Any instance of non-compliance with the staffing pattern shall be noted on the posted staff schedule and maintained. The Programs and Services Coordinator will submit an annual report to the Superintendent, listing the instances of non-compliance with the schedule, recommendations for staffing patterns, and review of the video monitoring systems."</p> <p data-bbox="244 1655 1474 1718">The facility provided a Robert L. Perry Juvenile Justice Center Staffing Plan. The plan is signed and dated on 3.9.2022. The staffing plan encompasses the following:</p> <ol data-bbox="244 1722 1481 2148" style="list-style-type: none"> 1. Generally accepted juvenile detention and correctional/secure residential practices with minimal staff to resident ratios of 1:8 during waking hours and 1:16 during sleeping hours. 2. Any judicial finding of inadequacy – which of none have been founded. 3. Any findings of inadequacy from federal investigative bodies – which of none have been found. 4. Any findings of inadequacy from internal or external oversight bodies – which of none have been found. 5. All components of the program's physical plant to include a comprehensive table of all camera placement. 6. The composition of the resident population (i.e. gender ratios, risk/need of residents, physical size, Sexual Aggressive Behavior (SAB), Vulnerability to Victimization (VV). 7. The number and placement of supervisory staff: 1-unit housing unit up to 14 residents. 8. Programs occurring on a particular shift: Robert L. Perry has adequate staff to monitor all programming on the unit and 32 cameras for additional monitoring. 9. Any applicable State or local laws, regulations or standards of which requirements mirror PREA ratios. 10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse: in the past 12 months Robert L. Perry

has had 0 allegations of sexual abuse.

11. Any other relevant factors: At this time, there have been no other relevant factors identified to effect adequate supervision and monitoring of residents at Robert L. Perry Juvenile Justice Center.

The facility provided a Direct Care Staffing Pattern. This pattern demonstrates staff to youth ratios to be 1:6 during waking hours and 1:12 during sleeping hours.

(b) The Robert L. Perry Juvenile Justice Center PAQ states each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility did not have any deviations from the required ratios of their staffing plan.

(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility is mandated by regulation to maintain 1:8 waking hour and 1:16 sleeping hour ratios.

(d) The Robert L. Perry Juvenile Justice Center PAQ states the staffing plan is reviewed annually, in collaboration with the Detention Superintendent/PREA Coordinator.

The Detention Superintendent/PREA Coordinator stated annual review of the Staffing Plan will take place each November of each subsequent year.

(e) The Robert L. Perry Juvenile Justice Center PAQ states unannounced rounds are conducted by intermediate or higher level staff to identify and deter staff sexual abuse and sexual harassment.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Superintendent Reviews, page 2, section F., states, "The Superintendent or designee will perform unannounced visits to the facility for both the day shift and overnight shift at least twice a year. The Superintendent will provide an Unannounced Visit report to the Court Administrator with any findings from the unannounced visits. No staff shall alert facility staff of the unannounced visits."

The facility provided Unannounced Program Visit documentation. Each visit appears to occur quarterly from 2.16.2018 - through 8.17.2021. Each round includes observation of:

1. Youth routines are being followed.
2. Groups are in appropriate locations based on the group routine and time of day.
3. Youth interaction with staff is appropriate.
4. Are youth/groups split up on the unit or different areas of the building?
5. Youth hygiene is appropriate.
6. Staff requirements are being followed.
7. Staff positioning within the group is appropriate, and there is visible use of awareness supervision.
8. Check made for blind spots and/or areas outside of security camera.
9. The physical plant is safe, clean, and organized.
10. Appropriate staff/youth relationships and healthy boundaries are evident.
11. Are there sudden changes in youth mood or behavior?
12. Summary of visit.
13. Follow up needed.

Through such reviews, the facility met the standards requirements.

115.315	Limits to cross-gender viewing and searches
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1449 501" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Person and Room Searches, not dated 4. Training Records Example 2021 5. Robert L. Perry Juvenile Justice Center Memorandum, RE: Unannounced Visits, dated 3.17.2022 6. Robert L. Perry Detention Superintendent Email Notification to all Staff: RE: Gender Announcements, dated 3.23.2022 <p data-bbox="244 533 352 560">Interviews:</p> <ol data-bbox="244 564 715 792" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Shift Supervisor 5. Program Assistant (Training Coordinator) 6. Intake staff 7. Detention Superintendent/PREA Coordinator <p data-bbox="244 797 1484 958">This facility did not have any gay, bisexual or transgender residents at the time of the audit; however, one youth reported being unsure of how he identified. Analytics demonstrated the facility has had an average of 13 gay, bisexual, lesbian and or transgender youth over the last 12 months. Each resident interviewed attested to having a respectable search and that search being conducted as a pat search while they had on at least one layer of clothing. One resident attested to staff explaining every step of the pat search before performing the step in the search.</p> <p data-bbox="244 990 1490 1151">Interviews with employees and resident demonstrate cross-gender announcements are not conducted when staff enter areas where residents are likely to be showering, performing bodily functions or changing clothes. During the onsite phase of the audit, the Auditor requested the Detention Superintendent address a training memo to staff, making them aware of the requirement to announce their gender and or provide commentary in order to make residents aware of staff presence when entering an area used for showering, performing bodily functions or changing clothes.</p> <p data-bbox="244 1182 1474 1442">On 3.23.2022, the Detention Superintendent forwarded the following email to all facility staff. "Please remember that while we do not do cross-gender searches, we also limit cross-gender viewing. Cross-gender viewing could occur in the wings where residents could be showering or using the restrooms. There are several ways that this can be accomplished. If a resident request to speak with you, the Pod can inform the resident that staff will respond to their room. This puts the resident on notice that staff will be approaching their room. Staff can also verbally announce their presence upon entering the living areas. ("Mr. James is present." "Female on the Floor." "Male passing meds." "Female making rounds." Etc.) Please also remember that the blue tape on the floors is a reminder to staff of what areas of the wing are in view of the Pod and cameras. You can also review these practices in the Manual of Operations."</p> <p data-bbox="244 1473 1465 1635">The interview with the Shift Supervisor demonstrated he was completing unannounced rounds at random times throughout each month; however, he was not documenting rounds when completed. During the onsite phase of the audit, the Auditor requested the Superintendent provide a formal memorandum addressed to the Shift Supervisor, requesting he record unannounced rounds as it required by standard. The Superintendent provided the Shift Supervisor with the following memorandum on March 17.2022.</p> <p data-bbox="244 1666 1458 1760">"During the PREA Audit on March 8 and March 9, 2022, the PREA Auditor reported that you were unaware of the need for Supervisors to perform Unannounced Visits and to record/report on the findings. The Action Plan for the PREA Audit includes written documentation that you are aware of the requirements.</p> <p data-bbox="244 1792 871 1818">Please reference the emails sent to you on the following dates:</p> <p data-bbox="244 1850 1449 1908">On March 22, 2001, an email regarding supervisors completing at least one unannounced visit per year, with an attached copy of the form to complete.</p> <p data-bbox="244 1939 1161 1966">On October 21, 2001, an email regarding the need to submit completed unannounced visits.</p> <p data-bbox="244 1998 1222 2024">As additional information, the Manual of Operations has information regarding unannounced visits:</p> <p data-bbox="244 2060 1474 2154">The Superintendent or designee will perform unannounced visits to the facility for both the day shift and overnight shift at least twice a year. The Superintendent will provide an Unannounced Visit report to the Court Administrator with any findings from the unannounced visits. No staff shall alert facility staff of the unannounced visits.</p>

Please be aware that I maintain and review the completed unannounced visit forms. They are also used to provide documentation of PREA 115.313."

Staff interviewed reported although each had been trained in cross gender searches, none had conducted those searches. Staff interviewed reported if an intake came in and the facility did not have a male and female staff on shift, they would rely on law enforcement to conduct the pat search or intakes would be kept in the holding cell until a same sex staff could perform the search.

Site Review Observation:

1. Intake area
2. Search area

During the tour of the facility the Auditor observed the Intake and search areas of the facility. Both areas were conducive to ensuring searches were conducted in a private secured area, outside of camera view. Training files revealed 100% of staff had been trained in cross gender strip searches. The Auditor was able to observe intakes during the audit. The intake area consists of a small holding cell where intakes are kept if more than one youth is received at the same time. If one youth is received at time a chair is available outside the Control Desk where intake documentation is completed, to include brief information on PREA to include an introduction of PREA, how to report allegations. Next intakes are placed inside a shower room where the staff stand in the door frame and have the youth disrobe to one layer of clothes before the pat search is conducted. Once the pat search is conducted the intake is allowed to shower and change into clothing provided by the facility. Intakes are then placed in a room for two to four hours and are then brought out to receive comprehensive PREA education known to the facility as the Safety First Packet.

(a) Robert L. Perry Juvenile Justice Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 1, section C., states, "Limits to cross-gender viewing and searches—Robert L. Perry Juvenile Justice Center shall ensure that cross-gender viewing and searches comply with those requirements established in Section 11 which are in accordance with PREA standard 115.315."

Robert L. Perry Juvenile Justice Center Policies and Procedures, Person and Room Searches, page 2, section B. 4-5, state, "Searching Juveniles: The search of a juvenile by staff requires training in the appropriate manner to conduct the search, and a humane attitude on the part of the staff. A juvenile should be informed, quietly and simply, of what is about to take place. The juvenile should not be touched any more than is necessary to conduct a comprehensive search. Staff shall document the search in the log.

7. A strip search shall be conducted by two staff members who are the same sex as the juvenile, and shall take place in the admission area restroom.

5. A body cavity search of the anal or genital area shall only be completed by a licensed medical professional and pursuant to a court order."

(b) Robert L. Perry Juvenile Justice Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches absent exigent circumstances. Policy compliance can be found in provision (a) of this standard.

(c) Robert L. Perry Juvenile Justice Center PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified. Documentation of cross-gender searches will be documented in shift notes as is stated in provision (a) of this standard.

(d) Robert L. Perry Juvenile Justice Center PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policy compliance can be found in provision (a) of this standard.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 3, section 7., states, "Residents shall have the ability to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine room checks."

(e) The Robert L. Perry Juvenile Justice Center PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. There have zero such searches in the last 12 months.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Person and Room Searches, page 2, section B. 6, states, "Staff shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident's genital status. Staff may verbally interview the resident, reviewing medical data, or contact the resident's parent/custodian."

(f) The Robert L. Perry Juvenile Justice Center PAQ states 100% of security staff receive training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner. Policy compliance can be found in provision (a) of this standard.

Staff training records example provided for 2021. Records include:

- PREA Training #1 – Inmates rights to be free from sexual harassment and abuse
- PREA Training #2 – Prevention and detection training
- PREA Training #3 – Response and reporting
- PREA Training #4 – Professional boundaries
- PREA Training #5 – Over and the law and your role
- PREA Training #6 – Effective and professional communication training

All training modules are from the PREA Resource Center.

Through such reviews, the facility meets standard requirements.

115.316	Residents with disabilities and residents who are limited English proficient
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1436 465" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Accommodations for Juveniles with Disabilities, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, not dated 4. Office of State Courts Administrator, Foreign Language Interpreters Contract, dated 6.8.2021 <p data-bbox="244 501 352 528">Interviews:</p> <ol data-bbox="244 533 718 689" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Shift Supervisor 5. Detention Superintendent/PREA Coordinator <p data-bbox="244 698 1481 792">Of the residents interviewed, all were English speaking. During interviews with staff, each stated residents were not used for translation services. Staff interviewed demonstrated each would contact a supervisory staff or contact the number posted for language services.</p> <p data-bbox="244 824 497 851">Site Review Observation:</p> <p data-bbox="244 855 1484 913">The facility has an observation desk in the post adjudication area where the phone number and instructions was taped to the desk for LanguageLine.</p> <p data-bbox="244 945 1430 1039">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has established procedures to provide disabled residents equal opportunities to be provided with and learn about the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment.</p> <p data-bbox="244 1070 1489 1263">Robert L. Perry Juvenile Justice Center Policies and Procedures, Accommodations for Juveniles with Disabilities, page 1, section I., states, "In accordance with the Americans with Disabilities Act of 1990, the Robert L. Perry Juvenile Justice Center shall ensure that communications with individuals with disabilities is as effective as communication with others. This obligation, however, does not require the Robert L. Perry Juvenile Justice Center to take any action that it can demonstrate would result in a fundamental alteration in the nature of its services, programs, or activities or in undue financial and administrative burdens."</p> <p data-bbox="244 1294 1474 1388">Page 2, section A. 1. a., states, "Staff shall immediately notify the Superintendent, or designee, when a hearing impaired juvenile is admitted to the Robert L. Perry Juvenile Justice Center. The Superintendent, or designee, shall then ensure that an interpreting agency that contracts with the State of Missouri shall be contacted."</p> <p data-bbox="244 1420 1469 1612">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 1., section D. 1, states, "Residents with disabilities and residents who are limited English proficient—PREA Standard 115.316: Robert L. Perry Juvenile Justice Center shall take appropriate steps to ensure that youth with disabilities (including, for example, youth who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) and those with limited English proficiency, 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."</p> <p data-bbox="244 1644 1457 1702">The facility provided an Office of State Courts Administrator, Foreign Language Interpreters Contract. This contract is with International Language Center in St. Louis Missouri and is in effect from 8.6.2021 through 7.31.2022.</p> <p data-bbox="244 1733 1490 1827">(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency has established procedures to provide residents with limited English 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. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1859 1466 1930">(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency prohibits the use of resident interpreters. In the last 12 months the facility has had zero instances where residents were used for interpreters.</p> <p data-bbox="244 1962 1481 2056">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 1., section D. 2, states, "Robert L. Perry Juvenile Justice Center shall not rely on youth interpreters, readers, or other types of youth assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the youths' safety."</p> <p data-bbox="244 2087 882 2114">Through such reviews, the facility meets standard requirements.</p>

115.317	Hiring and promotion decisions
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1230 432" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, not dated 3. Job Application Form, 13th Judicial Court, not dated 4. RPJJC Addendum to the Application and Reference Check Form. dated 7.2013 <p data-bbox="244 461 352 490">Interviews:</p> <ol data-bbox="244 495 716 555" style="list-style-type: none"> 1. Program Assistant (Training Coordinator) 2. Detention Superintendent/PREA Coordinator <p data-bbox="244 560 1489 687">Interviews with the Detention Superintendent/PREA Coordinator and Program Assistant demonstrated applicants determined to have been convicted of sexual abuse or sexual harassment charges were screened out during the application review process. Additionally, applicants who were terminated in past institutions for sexual abuse and or sexual harassment were not considered for employment or promotion.</p> <p data-bbox="244 719 499 748">Site Review Observation:</p> <p data-bbox="244 752 1476 846">Review of 20 staff personnel files demonstrated 100% compliance with each area of the PREA Audit – Juvenile Facilities Documentation Review – Employee File/Records. Employees who had not answered Administrative Adjunction Checks and or had Institutional Reference checks were those staff who had been employed at the facility prior to PREA implementation.</p> <p data-bbox="244 878 1479 1005">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency policy prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents who has engaged in or been convicted in or administratively adjudicated in sexual activity described in paragraph (a)(2) of this standard.</p> <p data-bbox="244 1043 1449 1137">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2, section E. 1., a-c, states, “Robert L. Perry Juvenile Justice Center shall not hire or promote anyone who may have contact with youth, and shall not enlist the services of any contractor who may have contact with youth, who:</p> <ol data-bbox="244 1142 1469 1305" style="list-style-type: none"> a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; b. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or c. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (1)(b) of this section.” <p data-bbox="244 1337 1463 1431">(b) The Robert L. Perry Juvenile Justice Center PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and or promote anyone, or to enlist services of any contractor, who may have contact with residents.</p> <p data-bbox="244 1469 1482 1563">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2, section E. 2., states, “Robert L. Perry Juvenile Justice Center shall consider any incidents of sexual harassment in determining to hire or promote anyone, or to enlist the services of any contractor, who may have contact with youth.”</p> <p data-bbox="244 1628 1484 1792">(c) The Robert L. Perry Juvenile Justice Center PAQ states Agency policy requires background checks are conducted with all new hires who have contact with residents, consults child abuse registries and makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months persons hired may have contact with resident who have had criminal background checks was 19.</p> <p data-bbox="244 1821 1469 1948">Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2, section E. 3, states, “Before hiring new employees who may have contact with youth, Robert L. Perry Juvenile Justice Center shall adhere to the pre-employment background check policy as mandated by Circuit policies (these include both a criminal records check and a child abuse registry check).”</p> <p data-bbox="244 1977 1476 2105">Page 3, section 3, states, “Before hiring new employees who may have contact with youth, Robert L. Perry Juvenile Justice Center shall adhere to the pre-employment background check policy as mandated by Circuit policies (these include both a criminal records check and a child abuse registry check). Best efforts will be made to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during an investigation of sexual abuse.”</p> <p data-bbox="244 2134 1436 2163">The facility provided a RPJJC Addendum to the Application and Reference Check Form. Page 5-6, include the following</p>

questions regarding institutional reference check questions.

1. "Have you previously worked at or volunteered in a prison, jail, lockup, community treatment center, halfway house, restitution center, mental health facility, alcohol or drug rehabilitation center, juvenile facility or other correction facility (Public or Private)?
2. While working or volunteering at any facility, were you terminated or otherwise disciplined or counseled for sexual abuse, sexual contact with or sexual harassment or an inmate, detainee, client or resident of the facility?
3. Have you been found by a civil or administrative body to have engaged in sexual activity or attempted sexual activity facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refused? This included any actions taken upon a professional license or a professional registry and any internal Administrative Investigation issues.

(d) The Robert L. Perry Juvenile Justice Center PAQ states the agency policy requires that a criminal background records check be completed and applicable child abuse registries consulted before enlisting the services of any contractor who may have contact with residents. In the past 12 months there were 13 contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2, section E. 4, states, "Robert L. Perry Juvenile Justice Center shall ensure that a criminal records check has been completed, and consult applicable child abuse registries, before enlisting the services of any contractor who may have unsupervised contact with youth."

(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency requires background checks to be completed every five years. Compliance of this standard is substantiated in provision (b) of this standard.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2, section E. 5, states, "Robert L. Perry Juvenile Justice Center shall conduct annual criminal background records checks on current employees, volunteer/student interns, and contractors who may have unsupervised contact with youth."

(f) Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 2-3, section E. 6, states, "Robert L. Perry Juvenile Justice Center shall ask prospective employees and promotional candidates about previous misconduct described in paragraph (1) of this section by requiring them to complete the Application for Employment-Robert L. Perry Juvenile Justice Center Addendum, in addition to the employment application"

Job Application Form, 13th Judicial Court, page 9-10, states,

- a. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution;
- b. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
- c. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (1)(b) of this section."

(g) The Robert L. Perry Juvenile Justice Center PAQ states Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 3, section E. 7, states, "Robert L. Perry Juvenile Justice Center shall also impose upon employees a continuing affirmative duty to disclose any such misconduct. Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."

(h) Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 3, section E. 8, states, "Unless prohibited by law, the agency shall 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."

Through such reviews the facility meets standard requirements.

115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>1. Robert L. Perry Juvenile Justice Center PAQ</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states the facility has not installed electronic surveillance system since the last PREA audit.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.321	Evidence protocol and forensic medical examinations
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1430 568" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, not dated 4. Boone County Child Advocate Listing, not dated 5. Law Enforcement Attempt Letter, dated 10.21.2021 6. PREA Violation Notification Checklist, not dated 7. PREA MOU Attempt, Advocate Letter Attempt, dated 3.7.2022 8. Rainbow House Memorandum of Understanding, dated .8.2022 <p data-bbox="244 595 352 622">Interviews:</p> <ol data-bbox="244 627 716 824" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Nurses 5. Shift Supervisor 6. Detention Superintendent/PREA Coordinator <p data-bbox="244 828 1485 927">Interviews with residents demonstrated each were aware of being able to report to staff or a trusted adult, the hotline number or by utilizing the grievance process. All staff interviewed were able to articulate residents could report verbally to them, call the hotline, the advocate or tell their legal representative.</p> <p data-bbox="244 954 499 981">Site Review Observation:</p> <p data-bbox="244 985 1477 1115">There were no criminal investigations in the past 12 months. The facility did have flyers posted throughout the facility with contact address and phone information. During the pre-audit phase the Auditor did recognize the flyers did not have phone numbers available. During the onsite, the Detention Superintendent revised the flyers with phone numbers and reposted the flyers throughout the facility.</p> <p data-bbox="244 1142 1490 1240">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility is not responsible for conducting Administrative sexual abuse investigations. The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct).</p> <p data-bbox="244 1267 1465 1366">Administrative Investigations are completed by the Court Services Administrator from the Out of Home Placement Investigations Unit which is under the umbrella of the Children's Division through the Department of Social Services for the State of Missouri.</p> <p data-bbox="244 1393 1490 1523">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section A. 1., states, "The Robert L. Perry Juvenile Justice Center shall refer all allegations of sexual abuse and sexual harassment to the appropriate investigative agencies based upon the victim's age. The external investigating agencies are aware of the PREA requirements."</p> <p data-bbox="244 1550 1458 1617">(b) The Robert L. Perry Juvenile Justice Center PAQ states this provision is not applicable as the facility does not conduct criminal and or administrative investigations.</p> <p data-bbox="244 1644 1437 1841">(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. There have been zero medical exams, SAFE/SANE exams performed in the last 12 months. If a juvenile required a forensic exam, the incident would be documented on a critical incident form – Detention Action Report, after all aspects of the facilities coordinated response were followed. (reference coordinated response in standard 115.365.)</p> <p data-bbox="244 1868 1493 2065">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section 2, states, "When outside agencies investigate sexual abuse and sexual harassment, the Robert L. Perry Juvenile Justice Center shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Robert L. Perry Juvenile Justice Center shall offer any resident who experiences sexual abuse access to a forensic medication examination without financial cost. See list of SAFE (and CARE Examination providers. SAFE and CARE exams are offered without financial costs to juvenile victims as noted on the SAFE Payment Program website."</p> <p data-bbox="244 2092 1458 2159">The facility provided a Rainbow House Regional Children's Advocacy Center (CAC) Multidisciplinary (MDT) Protocols and Interagency Agreement. This agreement states the following services are available:</p>

1. Family/Victim Advocates
2. Forensic Interviewers
3. Law Enforcement
4. SAFE-CARE Network (Medical)
5. Mental Health Providers
6. Victim Advocate
7. Co-Investigation
8. Mandated Reporting
9. Sexual Assault Forensic Exams (SAFE) and Child Abuse Resource Education
10. Case Reviews
11. Investigative Collaborative Meetings (Case Specific Meetings)

The facility provided a Boone County Child Advocate Listing. This listing includes address and phone number information for the Rainbow House Regional Children's Advocacy Center.

(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in person or by other means. All efforts are documented. The facility does not have a qualified staff and depends on the Rainbow House for all victim services.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section 3, states, "Robert L. Perry Juvenile Justice Center shall attempt to make available to the victim a Victim Advocate. Robert L. Perry Juvenile Justice Center shall document efforts to secure services from a Victim Advocate."

The facility provided a PREA Violation Notification Checklist. This checklist documents:

1. Victim Resident:
2. Date of Incident:
3. Date Reported:
4. Internal/External Investigation (circle one)
5. Date Parent notified:
6. Legal Guardian/Custodian notified:
7. Attorney notified:
8. Date Investigation Completed:
9. Investigation Outcome: Substantiated or Unsubstantiated or Unfounded

(e) The Robert L. Perry Juvenile Justice Center PAQ states a qualified staff or community member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 2, section 4, states, "As requested by the victim, the victim's parent/guardian and/or a Victim Advocate shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. Such services shall be documented on the Critical Incident Review form."

(f) The Robert L. Perry Juvenile Justice Center PAQ states the agency is not responsible for Administrative investigations and relies on another agency to conduct criminal investigations. The agency does request provision a-e of this standard are considered when conducting all investigations. The facility states, criminal investigations are conducted by Columbia City Police Department and administrative investigations are completed by the of Home Placement Investigations Unit which is under the umbrella of the Children's Division through the Department of Social Services for the State of Missouri.

The facility provided an email from the Detention Superintendent to the Rainbow House. This email states, "I have been provided with your contact information regarding an MOA with Rainbow House to formalize services offered to individuals that may be at our facility. I know in years past I have mailed a letter regarding PREA compliance, however PREA is asking for a formalized MOA." On 3.8.2022 the facility entered into a Memorandum of Understanding with the Rainbow House.

The facility provided a Law Enforcement Attempt Letter. The letter is addressed to the Boone County Sheriff's Department and the Columbia Police Departments Chief. The letter prefaces standard 115.321 a-e, by stating, "As an agency that is responsible for investigating allegations of sexual abuse, or involved in the investigative process, regarding our residents at the Robert L. Perry Juvenile Justice Center, we are mandated to provide you with the following section from the Department of Justice National Standards to Prevent, Detect, and Respond to Prison Rape regarding Responsive Planning requirements through the Prison Rape Elimination Act (PREA)."

(h) Rainbow House employees are qualified community-based staff members for the purposes of this section.

Through such reviews, the facility meets standard requirements.

115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, not dated 4. 13th Robert L. Perry Juvenile Justice Center Manual of Operations, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random staff 2. Shift Supervisor 3. Detention Superintendent/PREA Coordinator <p>Staff interviewed understood the importance of reporting allegations immediately upon receipt of their knowledge of an allegation of harassment or abuse. The Detention Superintendent reported her expectation is that all staff report allegations immediately. All staff interviewed stated they would notify their supervisor and call the hotline to report any allegations.</p> <p>Site Review Observation:</p> <p>The facility had postings of Missouri Child Abuse hotline and advocacy agency address and hotline numbers throughout the facility.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had one allegation of sexual abuse and sexual harassment that was received.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 2, section B., states, "Policies to ensure referrals of allegations for investigations—PREA Standard 115.322--Robert L. Perry Juvenile Justice Center shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency has policy that requires allegations of sexual abuse or harassment to be referred for investigation to an agency with the legal authority to conduct criminal investigations.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section A. 1., "The Robert L. Perry Juvenile Justice Center shall refer all allegations of sexual abuse and sexual harassment to the appropriate investigative agencies based upon the victim's age. The external investigating agencies are aware of the PREA requirements."</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section 3. b., states, "Robert L. Perry Juvenile Justice Center's report shall be approved by the Superintendent and made readily available to the public through its website or, if it does not have one, through other means."</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 2, section A. 4., "As requested by the victim, the victim's parent/guardian and/or a Victim Advocate shall accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals. Such services shall be documented on the Critical Incident Review form."</p> <p>(c) Standard compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.331	Employee training
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1485 600" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Training of New Personnel, not dated 3. National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy, not dated 4. Robert L. Perry Juvenile Justice Center Policies and Procedures, Updated Training and Training of Volunteer and Support Staff, not dated 5. PREA Overview of the Law and Your Role Training, PREA Employee Training Notification of Curriculum Utilization, dated 8.2014 6. Robert L. Perry Juvenile Justice Center Fundamental Practices, not dated 7. Annual Employee Training Record Example for 2021 <p data-bbox="244 629 352 658">Interviews:</p> <ol data-bbox="244 663 716 790" style="list-style-type: none"> 1. Random staff 2. Program Assistant (Training Coordinator) 3. Shift Supervisor 4. Detention Superintendent/PREA Coordinator <p data-bbox="244 795 1477 891">Interviews with staff demonstrated all were aware of and received initial and annual training through two primary videos they watch on PREA and Searches. Staff attested to the PREA video lasting for three hours and the Search video taking one hour.</p> <p data-bbox="244 920 416 949">Site Observation:</p> <p data-bbox="244 954 1453 1050">During review of staff training files, this Auditor noted 100% compliance for all 20 personnel files and one volunteer file reviewed. The Program Assistant was able to demonstrate an excel spreadsheet of completed training for each employee throughout the year, as training is completed.</p> <p data-bbox="244 1079 1433 1140">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency trains all employees who may have contact with residents in all required provisions of this standard.</p> <p data-bbox="244 1169 1474 1332">Robert L. Perry Juvenile Justice Center Policies and Procedures, Training of New Personnel, page 1, section I., states, "To provide all juvenile division personnel, during their first forty hours of employment, orientation/familiarization training which includes elements of orientation to the overall philosophy of the facility, working conditions, responsibilities of employees, admissions and intakes, emergency procedures, crisis intervention, communication skills, juveniles' rights, use of force, first aid and special needs of youth."</p> <p data-bbox="244 1361 1482 1489">Robert L. Perry Juvenile Justice Center Policies and Procedures, Training of New Personnel, page 1-2, section A. 1., k. 1-4., states, "Initial forty hours: New program staff at the Robert L. Perry Juvenile Justice Center shall receive, during their first forty hours of employment, training which includes elements of the items listed below. Additional training in specific areas shall be completed as soon as possible within the first year of employment. The first forty hours of training shall include:</p> <p data-bbox="244 1518 331 1547">k. PREA</p> <ol data-bbox="244 1552 1366 1680" style="list-style-type: none"> 1. Zero tolerance 2. Sexual abuse and sexual harassment prevention, detection, reporting, and responses policies and procedures 3. Residents' rights to be from abuse, harassment, and retaliation for reporting 4. Relevant reporting laws" <p data-bbox="244 1709 1457 1769">The facility provided National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy. This curriculum includes the following topics:</p> <ol data-bbox="244 1774 536 2139" style="list-style-type: none"> 1. Purpose, Scope and Dissemination 2. Authority 3. Definition 4. Nondiscrimination 5. Intake 6. Confidentiality 7. Classification and Housing 8. Communication 9. Clothing and Grooming 10. Showers and Bathrooms 11. Searches

12. Gender-Affirming Medical Care
13. Mental Health Care
14. Reporting
15. Protection from Retaliation
16. Trailing
17. Affirming Resources and Programming
18. Re-Entry and Reintegration Services

The facility provided the following to demonstrate training curriculums for employees:

1. National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy, not dated
2. PREA Overview of the Law and Your Role Training, PREA Employee Training Notification of Curriculum Utilization, dated 8.2014

These curricula include the following topics:

1. Overview of the Law and Your Role
2. Inmates Rights to be Free from Sexual Abuse and Sexual Harassment and Staff and Inmate Rights to be Free from Retaliation for Reporting
3. Prevention and Detection
4. Response and Reporting
5. Professional Boundaries
6. Effective Professional Communication

(b) The Robert L. Perry Juvenile Justice Center PAQ states training is tailored to the unique needs and attributes and gender of residents at the facility. Policy compliance can be found in provision (a) of this standard.

(c) The Robert L. Perry Juvenile Justice Center PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Updated Training and Training of Volunteer and Support Staff, page 1-2, section, A. 1. e., states, "All employees will receive training on PREA standards within one year of employment. All employees will receive refresher training every two years on sexual abuse and sexual harassment policies and procedures. In alternating (non-training years), all employees will receive refresher information on same."

(d) The Robert L. Perry Juvenile Justice Center PAQ states the agency documents that employees who may have contact with residents, understand the training they have received through employee signature or electronic verification.

The facility provided Fundamental Practices Outline and Trainer Acknowledgment. The fundamentals include: Practicing all health and safety expectations, preserving the rights of every youth to live in a physically and emotionally safe environment (free from any abuse or harassment including maltreatment, neglect, physical, emotional, and sexual. The acknowledgment states, "I have read and understand the materials provided." Each includes a printed name, signature, date and supervisor signature.

Annual Employee Training Record Example. This training record example lists each individual facility employee, training topics completed, hours of training – per topic, trainings entered in repository, training needing to be entered, training needing to be completed. PREA training topics and hours of training for each topic include:

1. 13th Circuit Safety Manual – Boone County - 1.0 hour (all PREA policies are in this manual)
2. PREA Unit 1 – 1 hour
3. PREA Reading – 1 hour
4. Sexual Harassment – 1 hour

Through such reviews, the facility meets standard requirements.

115.332	Volunteer and contractor training
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1485 633" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Updated Training and Training of Volunteer and Support Staff, not dated 3. National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy, not dated 4. Robert L. Perry Juvenile Justice Center Policies and Procedures, Updated Training and Training of Volunteer and Support Staff, not dated 5. PREA Overview of the Law and Your Role Training, PREA Employee Training Notification of Curriculum Utilization, dated 8.2014 6. Robert L. Perry Juvenile Justice Center Fundamental Practices, not dated 7. Robert L. Perry Juvenile Justice Center Contractors' Training & Development Documentation, dated 3.23.2022 <p data-bbox="244 663 352 692">Interviews:</p> <ol data-bbox="244 696 718 757" style="list-style-type: none"> 1. Teacher 2. Detention Superintendent/PREA Coordinator <p data-bbox="244 763 1485 925">The Detention Superintendent could demonstrate three volunteers had completed PREA training; however, during the last two years of COVID, those volunteers were not allowed to perform services and were not utilized at the facility. Teaching staff, district educators, could attest to being aware of PREA and receiving training; however, he could not describe the agencies protocols if an allegation had been reported directly to him. The Auditor recommended the educator be retrained on PREA and agency protocols.</p> <p data-bbox="244 931 1458 992">The facility provided Robert L. Perry Juvenile Justice Center Contractors' Training & Development Documentation for both Teachers. Teachers were trained on the following topics:</p> <ol data-bbox="244 996 970 1193" style="list-style-type: none"> 1. PREA Effective and Professional Communication 2. PREA Inmate's Rights to be Free from Sexual Abuse and Harassment 3. PREA Overview of the Law and Your Role 4. PREA Prevention and Detection 5. PREA Professional Boundaries 6. PREA Response and Reporting <p data-bbox="244 1223 1461 1350">(a) The Robert L. Perry Juvenile Justice Center PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and harassment prevention, detection, and response. The program has one psychiatrist, two teachers, three nurses and two interns who have contact with residents.</p> <p data-bbox="244 1379 1469 1476">Robert L. Perry Juvenile Justice Center Policies and Procedures, Updated Training and Training of Volunteer and Support Staff, page 2, section 3, states, "Orientation and updated training for support staff and volunteers will be appropriate to their needs and based on prior experience, frequency of juvenile contact, and program responsibility."</p> <p data-bbox="244 1505 1458 1565">The facility provided National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy. This curriculum includes the following topics:</p> <ol data-bbox="244 1570 671 2136" style="list-style-type: none"> 1. Purpose, Scope and Dissemination 2. Authority Definition 3. Nondiscrimination 4. Intake 5. Confidentiality 6. Classification and Housing 7. Communication 8. Clothing and Grooming 9. Showers and Bathrooms 10. Searches 11. Gender-Affirming Medical Care 12. Mental Health Care 13. Reporting 14. Protection from Retaliation 15. Trailing 16. Affirming Resources and Programming 17. Re-Entry and Reintegration Services

The facility provided the following to demonstrate training curriculums for employees/interns/contractors/volunteer:

1. National PREA Resource Center, Transgender, Gender Nonconforming, and Intersex Model Training Policy
2. PREA Overview of the Law and Your Role Training, PREA Employee Training Notification of Curriculum Utilization

These curricula include the following topics:

1. Overview of the Law and Your Role
2. Inmates Rights to be Free from Sexual Abuse and Sexual Harassment and Staff and Inmate Rights to be Free from Retaliation for Reporting
3. Prevention and Detection
4. Response and Reporting
5. Professional Boundaries
6. Effective Professional Communication

The facility provided Fundamental Practices Outline and Trainer Acknowledgment. The fundamentals include Practicing all health and safety expectations, preserving the rights of every youth to live in a physically and emotionally safe environment (free from any abuse or harassment including maltreatment, neglect, physical, emotional, and sexual. The acknowledgment states, "I have read and understand the materials provided." Each includes a printed name, signature, date and supervisor signature.

(b) The Robert L. Perry Juvenile Justice Center PAQ states the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents. All volunteers and contractors who have contact with residents have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents. The facility states volunteers and contractors receive the same training as employees. Policy and compliance can be found in provision (a) of this standard.

(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency maintains documentation confirming that the volunteers and contractors understand the training they have received.

The facility provided Fundamental Practices Outline and Trainer Acknowledgment. The fundamentals include: Practicing all health and safety expectations, preserving the rights of every youth to live in a physically and emotionally safe environment (free from any abuse or harassment including maltreatment, neglect, physical, emotional, and sexual. The acknowledgment states, "I have read and understand the materials provided." Each includes a printed name, signature, date and supervisor signature.

Through such reviews, the facility meets standard requirements.

115.333	Resident education
	Auditor Overall Determination: Exceeds Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, not dated 3. Robert L. Perry Safety First PREA Manual, not dated 4. Robert L. Perry Juvenile Justice Center Policies and Procedures, Admission Policy, not dated 5. Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, not dated 6. Robert L. Perry Safety First PREA Manual, not dated 7. Office of State Courts Administrator, Foreign Language Interpreters Contract, dated 6.8.2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Shift Supervisor 5. Detention Superintendent/PREA Coordinator <p>Interviews with the 10 targeted and random residents, each reported they were educated on PREA, reporting options to staff, calling the hotline or telling their families. Most understood they were able to report anonymously and or by filling out a grievance.</p> <p>Site Observation:</p> <p>10 resident files reviewed by utilizing the PREA Audit – Juvenile Facilities Documentation Review – Resident Files/Records template, demonstrated all had received PREA education on the day of intake and again within four hours of admission, each completing the Safety First Handbook.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states Residents receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. 207 residents admitted in the past 12 months were given information at intake.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, page 1, section C. 1., states, "During the admission process, youth will receive the PREA Intake form, which explains zero tolerance and reporting practices."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states within the past 12 months, 207 residents received age appropriate PREA education within 10 days of intake.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, page 1, section C. 2., states, "After the admission process and upon being assigned a room, a resident will receive the Safety 1st manual. Residents will be given at least two hours to review the information regarding their rights to be free from sexual abuse and sexual harassment, free from retaliation for reporting, and Robert L. Perry Juvenile Justice Center's policies regarding response and investigation. Residents may request to review PREA information at any reasonable time. Staff will personally review the material with the resident and allow an opportunity for discussion or questions. Staff and juvenile will sign an acknowledgement form. Residents on Detention wing will acknowledge their understanding of the PREA information by signing the Detention Room Review form. Residents on the Program wing will acknowledge their understanding of the PREA information by signing the Safety 1st log."</p> <p>The facility provided a Robert L. Perry Safety First PREA Manual. Page 2 states, "It's important to know! All JJC staff are required to preserve the rights of every youth to live in a physically and emotionally safe environment that is free of any physical, emotional, sexual abuse, harassment, and retaliation." Subsequent pages speak to the following topics:</p> <ol style="list-style-type: none"> 1. If there is a situation that you do not feel like staff(s) is keeping you safe; 2. Your Rights and Responsibilities 3. Safety Also Means: free from abuse including sexual abuse and harassment 4. While there is not physical or sexual contact permitted at JJC, remember" <ol style="list-style-type: none"> a. You have the right to say "NO" if someone wants to touch you in any way that makes you feel uncomfortable, afraid or confused. b. You have the right and the responsibility to take care of yourself. You can set limits for yourself and others, trust your feelings, and not let others pressure you. c. True consent means both partners have equal power. Equal power means equal knowledge and equal freedom to make decisions, without pressure.

- d. Forcing or pressuring someone to have sex is never okay. Force may be physical. It can also be non-physical, as in deception, trickery, threats, and verbal pressure.
- e. Remember if you are sexually harassed or forced into sexual contact let staff know.
- f. You will not be blamed if someone touches you in a way that does not seem right, it is not your fault.
- g. You will not be hurt or blamed if you tell staff or other trusted adults about any abuse you report.
- h. All reports of abuse or harassment will be followed-up on and checked into by staff. Help is always available.

(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility residents have not been transferred to the facility. Agency policy requires that residents who are transferred from one facility to another be educated regarding their rights.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Admission Policy, page 6, section 3., states, "When a juvenile transfers to the program wing from the detention wing, staff conduct a tour of the facility, showing the juvenile the dining area, the multipurpose area, and the wing on which the juvenile's room will be. The juvenile will be provided bedding items and a Program Services Orientation Manual. The staff person will review with the juvenile the policies and procedures of the program wing. Residents will be assigned a locker for storage and two changes of clothing and other non-valuable items.

(d) Robert L. Perry Juvenile Justice Center Standard Operating Procedure 17.5, Residents with Disabilities and/or Limited English Proficient, page 1, section 1.a. states, "Residents with disabilities and residents who are limited English proficient.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Prevention Planning, page 1, section D., states, "Robert L. Perry Juvenile Justice Center shall take appropriate steps to ensure that youth with disabilities (including, for example, youth who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) and those with limited English proficiency, 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."

The facility provided an Office of State Courts Administrator, Foreign Language Interpreters Contract. This contract is with International Language Center in St. Louis Missouri and is in effect from 8.6.2021 through 7.31.2022.

(e) The Robert L. Perry Juvenile Justice Center PAQ states the facility maintains documentation of resident participation in PREA education sessions.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, page 1, section C. 3., states, "Periodically, residents will be offered educational programming regarding sexual abuse and sexual harassment topics. Residents complete a program participation form."

(f) The Robert L. Perry Juvenile Justice Center PAQ states The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, page 1, section C. 4., states, "Robert L. Perry Juvenile Justice Center will display PREA-related posters throughout the facility, as well as making the orientation and Safety 1st manuals available upon requests at reasonable times."

Through such reviews of the facility's multiple education and PREA awareness for youth, the facility exceeds standards requirements.

115.334	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>1. Robert L. Perry Juvenile Justice Center PAQ</p> <p>Interviews:</p> <p>1. Detention Superintendent/PREA Coordinator</p> <p>The Detention Superintendent explained the agency uses the Out of Home Placement Unit for Administrative investigations and local law enforcement for criminal investigations.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states this standard is not applicable as external investigators are used for both criminal and administrative investigations. The facility states, criminal investigations are conducted by Columbia County Police or the Boone County Sheriff's office. Administrative investigations are completed by the Court Services Administrator from the Out of Home Placement Investigations Unit which is under the umbrella of the Children's Division through the Department of Social Services for the State of Missouri.</p> <p>Through such reviews, the facility meets standard.</p>

115.335	Specialized training: Medical and mental health care
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1329 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, PREA Training and Education, not dated 4. Contractor Training Documentation, dated 3.23.2022 <p data-bbox="244 465 352 492">Interviews:</p> <ol data-bbox="244 497 716 557" style="list-style-type: none"> 1. Nursing staff 2. Detention Superintendent/PREA Coordinator <p data-bbox="244 562 1477 728">During interviews the Nursing staff demonstrated they were unaware of the required specialized training for medical and mental health staff. Both were willing to complete the training as soon as possible. The Detention Superintendent stated she has spoken to the agency who provides psychiatric services to the residents and the group has agreed to ensure, moving forward, psychiatrists will complete specialized medical and mental health training before those staff provide services to youth.</p> <p data-bbox="244 754 1481 781">On 3.23.2022 the facility provided training documentation, for teaching staff, demonstrating the following topics were trained.</p> <ul data-bbox="244 786 959 983" style="list-style-type: none"> • PREA Effective and Professional Communication • PREA Inmates' Rights to be Free from Sexual Abuse and Harassment • PREA Overview of the Law and Your Role • PREA Prevention and Detection • PREA Professional Boundaries • PERA Response and Reporting <p data-bbox="244 1014 416 1041">Site Observation:</p> <p data-bbox="244 1046 1099 1072">Medical and mental health services are through contracted services in the community.</p> <p data-bbox="244 1104 1477 1198">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. The number of all medical and mental health care practitioners who work regularly at this facility who received the training required by agency policy is three.</p> <p data-bbox="244 1229 1453 1323">Robert L. Perry Juvenile Justice Center Policies and Procedures, Training and Education, page 1, section III. A., states, "Robert L. Perry Juvenile Justice Center will train and/or educate its residents, employees, and onsite service providers in adherence to PREA Standard -115.333 and 115.335."</p> <p data-bbox="244 1355 1469 1480">Robert L. Perry Juvenile Justice Center Policies and Procedures, PREA Training and Education, page 1, section B., states, "Education—All staff, volunteers, and contract providers will complete a PREA Fundamental Practices pamphlet, including reviewing the information, discussing with the Superintendent or designee, and signing the pamphlet as confirmation that they understand the training and information they have received."</p> <p data-bbox="244 1512 1460 1572">(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency medical staff at this facility do not conduct forensic medical exams.</p> <p data-bbox="244 1603 1469 1697">(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training. Policy compliance and be found in provision (a) of this standard.</p> <p data-bbox="244 1729 837 1756">Through such reviews facility meets standard requirements.</p>

115.341	Obtaining information from residents
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 295">Document Review:</p> <ol data-bbox="244 304 1385 465" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Screening for Risk of Sexual Victimization and Abusiveness, not dated 3. Screening Instructions, Section 115.341, not dated 4. Robert L. Perry Juvenile Justice Center, Sexual Assault Victim/Assailant Checklist, not dated <p data-bbox="244 501 352 524">Interviews:</p> <ol data-bbox="244 533 547 591" style="list-style-type: none"> 1. Educators 2. Shift Supervisor/Intake staff <p data-bbox="244 600 1449 689">Interviews with Shift Supervisor demonstrated that he completes a risk assessment with each resident during the intake process. Risk levels of residents is communicated through the daily Population Offense Report. Teaching staff are made aware of resident risk through daily emails and conversations with direct care staff.</p> <p data-bbox="244 725 419 748">Site Observation:</p> <p data-bbox="244 757 1481 913">During review of 14 resident files, this Auditor noted each resident had received screening on the day of admission. Average length of stay at this facility is 20 days, however, the facility did have two residents who have been in the program more than 12 months. Those two residents had not been reassessed at the time of the onsite phase of the audit. On 1.25.2022, both residents were reassessed, and the facility created a system to ensure residents with a length of stay of more than one year are reassessed before beginning their 13 months in the program.</p> <p data-bbox="244 949 1481 1070">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility has a policy that requires screening, upon admission or transfer, for risk of sexual abuse victimization or sexual abusiveness toward other residents. In the past 12 months 207 of residents whose length of stay was longer than 72 hours, were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility.</p> <p data-bbox="244 1106 1481 1330">Robert L. Perry Juvenile Justice Center Policies and Procedures, Screening for Risk of Sexual Victimization and Abusiveness, page 1, section A. 1., states, "Upon admission to the facility, and no more than 72 hours after admission, the Superintendent, or his designee, shall obtain information for use in reducing the risk of sexual abuse by or upon a youth by interviewing the youth and completing the Sexual Assault Victim/Assailant Checklist. Staff may also review information contained in medical and mental health files, as well as court documentation. The Superintendent will use the Screening Instructions as guidance in completing the checklist. Upon completion, the form shall be forwarded to the Superintendent for review."</p> <p data-bbox="244 1366 1489 1523">Page 1, paragraph four of the Screening Instructions, Section 115.341, states, "Within a set period of time, not to exceed 30 days from the resident's arrival, the resident shall be reassessed for the resident's risk of victimization and abusiveness based upon any additional, relevant information received by the facility since the intake screening. A resident's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness."</p> <p data-bbox="244 1559 1433 1617">(b) The Robert L. Perry Juvenile Justice Center PAQ states the facility conducts risk assessments by using an objective screening instrument.</p> <p data-bbox="244 1653 1433 1711">The facility provided a Robert L. Perry Juvenile Justice Center, Sexual Assault Victim/Assailant Checklist. This checklist addresses the following:</p> <ol data-bbox="244 1742 1185 2157" style="list-style-type: none"> 1. Identifying Data <ol data-bbox="244 1769 539 1966" style="list-style-type: none"> (a) Youth Name (b) Date of Screening (c) Complete by: (d) Admission Date: (e) Number of Prior Referrals (f) JDTA Code 2. Possible victim status: <ol data-bbox="244 2029 1185 2157" style="list-style-type: none"> a) Age 15 or under/comments b) Small physical stature (under 5'5" and or LT 125 lbs.) or lacking physical maturity/comments c) Physical or developmental disability or mental illness/comments d) First secure confinement of any kind/comments

- e) Juvenile is or is perceived to be gay, lesbian, bisexual, transgender, intersex or gender nonconforming/comments
- f) History as victim of sexual abuse or exposure to sexual exploitation or violence (If yes then a meeting with a medical or mental health practitioner must be offered within 14 days) (Information must be reported if not done so previously)/comments
- g) History of facility consensual sex/comments
- h) History of protective custody/comments
- i) Reports concern over ability to define oneself/comments
- j) Lacks facility social support/comments

Possible Predatory Status:

- 1. Pending sexual assault allegation or prior sexual assault referral/comments
- 2. History of Institutional predatory behavior/comments
- 3. History as perpetrator of sexual abuse/comments
- 4. History as perpetrator of physical abuse/comments
- 5. Gang affiliation/comments

The screening includes instructions for scoring both potential victim and predatory factors.

(c) Risk screening compliance can be found in provision (b) of this standard.

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

(e) Robert L. Perry Juvenile Justice Center Policies and Procedures, Screening for Risk of Sexual Victimization and Abusiveness, page 1, section A. 3., states, "Information received during admission shall be disseminated in accordance with Content, Access, Use, Confidentiality, Retention, and Security of Juvenile Records, Logs, and Reports."

Through such reviews, the facility meets standard requirements.

115.342	Placement of residents
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1225 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, not dated <p data-bbox="244 400 352 427">Interviews:</p> <ol data-bbox="244 432 430 555" style="list-style-type: none"> 1. Random staff 2. Shift Supervisor 3. Intake Staff 4. Teacher <p data-bbox="244 566 1444 624">Interviews with intake and facility staff demonstrated resident risk level is communicated to all departmental staff through communications with facility staff and through a roster with risk factors that is made available each day.</p> <p data-bbox="244 660 419 687">Site Observation:</p> <p data-bbox="244 692 1484 750">During review of 14 resident files, this Auditor noted each resident had received screening on the day of admission. Due to a short length of stay, residents do not have work assignments.</p> <p data-bbox="244 786 1474 873">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse.</p> <p data-bbox="244 909 1474 1066">Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, page 1, section A., states, "Robert L. Perry Juvenile Justice Center shall use information obtained during the comprehensive admission process, including the Sexual Assault Victim/Assailant Checklist, to make placement decision with the goal of keeping all youth safe and free from sexual abuse. Placement decisions regarding identified lesbian, gay, bisexual, transgender, or intersex youth shall not be made solely on the basis of such identification or status."</p> <p data-bbox="244 1102 1474 1258">(b) The Robert L. Perry Juvenile Justice Center PAQ states the residents may only be placed in isolation as a last resort to keep them safe from other residents, until other arrangements can be made. The facility requires residents in isolation continue to have access to the same programming offerings as all other residents outside of isolation. In the last 12 months there have zero residents placed in isolation at risk of sexual victimization or who were in need of protection from sexual victimization.</p> <p data-bbox="244 1294 1489 1552">Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, page 1, section B-C., states, "Youth shall only be isolated or separated as a last resort, and upon approval by the Superintendent, when less restrictive measures are inadequate to keep residents safe. Lesbian, gay, bisexual, transgender, or intersex youth shall not be isolated or separated solely on the basis of such identification or status. Residents in isolation shall still be afforded all medical, mental health, education, and programming opportunities available. Youth at risk for sexual victimization, or those who have alleged to have suffered sexual abuse, will only be placed in isolation or separation as a last resort, and upon approval by the Superintendent, and only until less restrictive measures can be found. When a youth is placed in a separate room for these circumstances, minimal standards for conditions in accordance with PREA Standards 115.342 and 115.378 shall apply."</p> <p data-bbox="244 1588 1428 1675">(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility prohibits placing and considering lesbian, gay, bisexual, transgender, or intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1711 1401 1767">(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility makes housing and program assignments for transgender or intersex residents in a facility on a case-by case basis.</p> <p data-bbox="244 1803 1449 1859">During the onsite phase of the audit, the Detention Superintendent stated 30-day detention reviews pursuant to Supreme Court Rule 127.08 and 127.09, where placement in detention is reviewed.</p> <p data-bbox="244 1895 1489 2018">During the onsite phase of the audit, the Auditor observed each cell at the facility is a single bunk. Beds on the detention side of the program each have a toilet and sink and four individual shower rooms with a door that closes and locks, with no window. Sleeping cells on the residential side are single use cells and bathrooms and toilets are in a shared bathroom where access is limited to one resident at a time.</p> <p data-bbox="244 2054 1481 2110">(h) The Robert L. Perry Juvenile Justice Center PAQ states in the last 12 months, there were zero residents at risk of sexual victimization who were held in isolation.</p> <p data-bbox="244 2145 1493 2172">(i) The Robert L. Perry Juvenile Justice Center PAQ states if residents were held in isolation, such resident would be afforded</p>

a review every 30 days to determine whether the continuation for separation was needed.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, page 1, section D., states, "Upon a resident being isolated, the Superintendent or his designee shall document the basis for concern regarding the resident's safety and why no alternative means of separation can be arranged. Robert L. Perry Juvenile Justice Center will review treatment needs, including placement decisions and a youth's risk for sexual victimization and abusiveness. Every 30 days that a resident remains in isolation status, the Superintendent shall review the decision to continue isolation."

Through such reviews, the facility meets standard requirements.

115.351	Resident reporting
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1331 501" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, not dated 4. Robert L. Perry Juvenile Justice Center Safety 1st Manual, not dated 5. Fundamental Practices Outline and Trainer Acknowledgment, not dated 6. If Someone Has Hurt You It's Okay to Tell flyer, not dated <p data-bbox="244 533 352 560">Interviews:</p> <ol data-bbox="244 564 456 658" style="list-style-type: none"> 1. Random staff 2. Random residents 3. Targeted residents <p data-bbox="244 663 1473 891">Residents interviewed were aware family members, friends or legal representatives could make third party reports if they were not comfortable reporting on their own. Each stated telephone procedures for legal and or PREA calls, which could be made in private, without monitoring or recording, as soon as staff can be available. Such phone calls were not noted to as have occurred. Residents interviewed spoke to the outside hotline advocate phone number being posted on the posters in the facility. Most residents interviewed was aware of her/his right to report anonymously. Of the random residents interviewed, each were able and willing to answer questions. The targeted residents interviewed, which had either reported abuse during intake or were cognitively disabled, stated their initial searches being respectful.</p> <p data-bbox="244 922 429 949">Site Observations:</p> <p data-bbox="244 954 1414 981">The 14 resident files reviewed demonstrated each had been educated on reporting requirements at the time of intake.</p> <p data-bbox="244 1012 1477 1106">(a) The Robert L. Perry Juvenile Justice Center PAQ states The agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about sexual harassment, abuse, retaliation and or any type of neglect.</p> <p data-bbox="244 1137 1490 1263">Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1, section A. 1., states, "Robert L. Perry Juvenile Justice Center shall provide multiple internal ways for youth to privately report sexual abuse and sexual harassment, retaliation by other youth or employees for reporting sexual abuse and sexual harassment, and employee neglect or violation of responsibilities that may have contributed to such incidents in accordance with Juvenile Grievance Procedures.</p> <p data-bbox="244 1294 1477 1420">The facility provided a Safety First Manual. Page 3, section Let Staff Know, states, "If there is a situation that you do not feel like staff(s) is keeping you safe due to boundaries being crossed or any inappropriate and/or harmful actions taken by staff that directly affected you, we want there to be a process for you to pass those concerns on. Specifically, harmful or inappropriate actions such as sexual/physical/emotional abuse, or sexual harassment. Here is the process:</p> <ul data-bbox="244 1451 1461 1603" style="list-style-type: none"> • Ask to speak to a staff member that you feel like you can go to. Share with them the concerns that you have that relate to the above. If you feel safer going to their supervisor, then you have that right as well. • You may also complete a written grievance so that you can state your concerns in writing. Please make certain that what you state/write is accurate and honest.: <p data-bbox="244 1635 1453 1697">The facility provided a posting, "If Someone Has Hurt You, It's Okay to Tell" flyer. The flyer includes contact information to the Child Abuse and Neglect Hotline.</p> <p data-bbox="244 1729 1477 1854">(b) The Robert L. Perry Juvenile Justice Center PAQ states facility provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. The agency does not have a policy requiring residents 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.</p> <p data-bbox="244 1886 1490 2145">On 2.13.2022, at 2:48 pm, this Auditor telephoned the hotline number at 1.800.392.3738. The message stated, "Welcome to the State of Missouri child abuse hotline. Press 2 if an adult. Press 1 if mandated reporter. Calling to report type of abuse about emergency issues, press 1, non-emergent situation, press 4. (Online reporting instructions were heard while waiting for an operator.) The holding line offered a call back; however, if the person receiving the call back could not answer the message states the importance of calling back. While on hold, the message continually states hang up and call 911 and then call us back. After waiting on hold for 60 minutes, this Auditor ended the call. Upon the online report being answered as is described in the next paragraph, the Auditor explained being on hold for one hour as the Auditor did not want to press the option for emergency reports. The worker explained calls go into a que and are answered by type of report and the</p>

emergency call would have been answered before non-emergent calls.

On 2.13.2022, at 2:30 pm, this Auditor completed a lengthy child abuse report via <https://apps.dss.mo.gov/OnlineCanReporting/default.aspx>. This reporting form requested the reporter set up an account, provide email, phone and address information in addition to three pages of information for those receiving the report. 4:05 pm Diana Worker #27262 responded to the online report. Upon asking Worker 27262 how she would respond to a juvenile and or third party report, she stated the following:

- This is a State hotline for any report of abuse
- If the child was minor, under 18, she would screen for sexual abuse,
- 18 or older and would verify if they are in CDC custody.
- Ask for reporting concerns for children under 18
- Would gather the names related to the concern
- Would possibly redirect to law enforcement
- Would ask for identifying information
- Ask if the care takers are active members of military
- Screen the concerns of the reporter, what the allegation consisted of
- If the report meets the criteria of a concern, the report would be forwarded to the Out of Home Investigation Unit and or local law enforcement
- This online option is for Mandatory Reporting only
- This website is currently not an option for third party reporters.

On 2.13.2022 at 3:59 pm, the Auditor received the following email from the Child Abuse/Neglect Online Submission Details:

"Thank you for reporting your concern to the Hotline. Based on State of Missouri law and regulations:

The information you provided does not meet the statutory criteria of a child abuse and neglect report or referral, so it will not be sent to field staff. We have documented your information. If you get additional information, please call the Hotline at 1-800-392-3738 or make a new on-line report.

The reference number is 20220440115 for the report submitted through OSCR on 02/13/2022 at 03:39PM"

(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties. The PAQ states staff are required to document verbal reports, immediately. Staff are required to document verbal reports within 24 hours.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1, section A. 2., states, "Robert L. Perry Juvenile Justice Center employees are required to accept all reports of this nature to include those made verbally, in writing, anonymously, and from third parties. Verbal reports shall be documented by receiving staff. The documentation of verbal reports shall be maintained by the Superintendent and/or PREA Compliance Manager."

(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility provides residents with access to tools to make written reports of sexual abuse or sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Additional policy compliance can be found in provision (a) of this standard.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1, section A. 4., states, "Although there is a grievance procedure available for the youth, policy dictates that PREA allegations are not officially utilized by the youth in this capacity."

Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section I., states, "Upon admission, juveniles shall be informed of their right to make a grievance against any behavior or disciplinary action of staff or other juveniles. All grievances shall be handled expeditiously and without threats or reprisals against the individual making the grievance."

(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Staff have been informed of these procedures through initial and annual training as is described in provision 115.331(a) (1-11).

Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1, section A. 3., states, "Staff may privately report, verbally or in writing, sexual abuse and sexual harassment of residents to the Superintendent, supervisory staff, or a member of the Sexual Harassment Prevention team."

The facility provided Fundamental Practices Outline and Trainer Acknowledgment. The fundamentals include: Practicing all health and safety expectations, preserving the rights of every youth to live in a physically and emotionally safe environment (free from any abuse or harassment including maltreatment, neglect, physical, emotional, and sexual. The acknowledgment states, "I have read and understand the materials provided." Each includes a printed name, signature, date and supervisor signature.

Through such reviews, the facility meets standard requirements.

115.352	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Detention Superintendent/PREA Coordinator <p>Residents interviewed were aware of the grievance procedures and understood a trusted adult could assist them, if needed. Residents interviewed had not filed a grievance form. Worthy of being noted, residents had not filed grievances in the last 12 months, and many reported they really liked the facility staff and would be comfortable speaking with them directly.</p> <p>Site Observation:</p> <p>Grievance / PREA boxes, third party postings and third party reporting forms were available in highly trafficked areas by residents and visitors.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency is exempt from this standard as they do not have an administrative procedure for dealing with resident grievances regarding sexual abuse.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section I., states, "Upon admission, juveniles shall be informed of their right to make a grievance against any behavior or disciplinary action of staff or other juveniles. All grievances shall be handled expeditiously and without threats or reprisals against the individual making the grievance."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section A. 1., states, "At the time of admission and upon review of the orientation manual, the juvenile shall be informed of the right to make a grievance against any perceived mistreatment by reporting same in person, or in writing, to any staff member or to the Superintendent."</p> <p>(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure requires that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section A. 2. a-b., states, "Grievances may be made by the juvenile in writing with the Complaint Form or verbally to the staff at the Robert L. Perry Juvenile Justice Center.</p> <ol style="list-style-type: none"> a. A resident who alleges sexual abuse may submit a grievance without giving it to a staff member named in the grievance. b. A grievance of this type may not be referred to a staff member named in the grievance." <p>Residents have access to chrome books during the school day. The web address is an available mean of contact for reporting abuse, for residents and all third-party's.</p> <p>(d) The Robert L. Perry Juvenile Justice Center PAQ states the agency's policy and procedures that require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances that were filed that alleged sexual abuse was zero.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section A. 4-5., "The Superintendent will be notified in writing within a reasonable time of all complaints against staff members. Staff should be notified of all complaints against other juveniles, and unresolved grievances shall be brought to the attention of the Superintendent within 24 working hours. The Superintendent, or designee, will provide the juvenile with a verbal and/or written response, including reason for decision, within 48 hours of receiving the grievance."</p> <p>(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and to file such requests on behalf of residents. Agency</p>

policy and procedure require that if the resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline. Agency policy allows parents or legal guardians of residents to file a grievance alleging sexual abuse, including appeals, on behalf of such resident, regardless of whether or not the resident agrees to having the grievance filed on their behalf. The number of the grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident's decision to decline was zero.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section A. 6., "The juvenile has the ability to appeal the grievance decision to the Court Administrator or his/her designee."

Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1, section B 1-4, states, "

1. Robert L. Perry Juvenile Justice Center shall maintain a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a youth. This information will be displayed on the internet page.
2. A third-party may assist the resident in filing a grievance report.
3. If a third-party report is received, Supervisory staff will discuss with the resident whether or not they wish to proceed with the grievance process. Supervisory staff will record on the Grievance form the juvenile's decision.
4. A juvenile's decision to proceed with grievance process or decline shall be taken into consideration and recorded, however the grievance may still advance through the grievance process.

(f) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. The agency's policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section C., states, "When Robert L. Perry Juvenile Center learns that a youth is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the youth. The Coordinator Response protocols will be followed.

(g) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith? In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was zero.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Juvenile Grievance Procedure, page 1, section III. A. 3., states, "No reprisals shall be taken against anyone using or participating in this process."

Through such reviews, the facility meets standard requirements.

115.353	Resident access to outside confidential support services and legal representation
	<p data-bbox="244 147 766 174">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 295">Document Review:</p> <ol data-bbox="244 304 1382 533" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, not dated 3. Rainbow House Regional Children's Advocacy Center (CAC) Multidisciplinary (MDT) Protocols and Interagency Agreement, dated 5.17.2021 4. Boone County Child Advocacy SAFE Listing, not dated 5. If Someone Has Hurt You It's Okay to Tell flyer, not dated 6. PREA MOU Attempt, Advocate Letter Attempt, dated 3.7.2022 <p data-bbox="244 564 352 586">Interviews:</p> <ol data-bbox="244 595 456 656" style="list-style-type: none"> 1. Random residents 2. Targeted residents <p data-bbox="244 665 1489 757">Residents interviewed demonstrated their reporting knowledge externally to include calling the hotline, or the advocate number posted or telling a trusted adult at the program or in the community. Each resident interviewed stated they felt safe in the program and comfortable reporting sexual harassment or abuse.</p> <p data-bbox="244 788 419 810">Site Observation:</p> <p data-bbox="244 819 1476 913">Reporting numbers were taped to staff desks where juveniles made phone calls. During the pre-audit phase, the Auditor requested staff were made aware that hotline and advocate calls would be done without being monitored. A memo received by the Auditor, was also taped near the phone numbers, near the phone where residents made phone calls.</p> <p data-bbox="244 945 1422 1005">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse by doing the following:</p> <ul data-bbox="244 1014 1489 1207" style="list-style-type: none"> • Gives residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations. • Does not give immigrant residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of immigrant service agencies for persons detained solely for civil immigration purposes. • Enables reasonable communication between residents and these organizations, in as confidential manner as possible. <p data-bbox="244 1238 1481 1364">Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 1-2, section C. 1., states, "Robert L. Perry Juvenile Justice Center shall provide youth with access to an outside victim advocate and/or mental health professional for emotional support services related to sexual abuse. Robert L. Perry Juvenile Justice Center shall allow reasonable communication between youth and these providers, in as confidential a manner as possible."</p> <p data-bbox="244 1395 1453 1456">The facility provided an "If Someone Has Hurt You It's Okay to Tell flyer." The flyer provided phone numbers to the Boone County Juvenile Office Victim Advocate and the Rainbow House address and telephone numbers.</p> <p data-bbox="244 1487 1385 1512">The facility provided a Boone County – Child Advocacy SAFE flyer. This flyer has address and phone numbers for:</p> <ol data-bbox="244 1520 837 1682" style="list-style-type: none"> 1. Prosecuting Attorney 2. Sheriff's Department 3. Compass Health Network 4. Jefferson County Rape and Abuse Crisis Services 5. Rainbow House Regional Child Advocacy Center/Shelter <p data-bbox="244 1713 1466 1872">(b) The Robert L. Perry Juvenile Justice Center PAQ states the facility informs residents, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs residents, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.</p> <p data-bbox="244 1904 1461 1995">Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 2, section C. 2., states, "Robert L. Perry Juvenile Justice Center shall inform youth, prior to giving them access, of the extent to which such communications will be monitored and reported in accordance with mandatory reporting laws."</p> <p data-bbox="244 2027 1430 2087">(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility maintains memoranda of understanding with community service providers that are able to provide residents with emotional support services related to sexual abuse.</p> <p data-bbox="244 2119 1461 2143">Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 2, section C. 3., states, "Robert L. Perry</p>

Juvenile Justice Center shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide youth with confidential emotional support services related to sexual abuse. The PREA Compliance Manager shall maintain copies of agreements or documentation showing attempts to enter into such agreements."

The facility provided a Memorandum of Understanding with the Rainbow House Regional Children's Advocacy Center (CAC) Multidisciplinary (MDT) Protocols and Interagency Agreement. Page one, section Mission, states, "Utilizing best practices which are constantly evolving, the Multi-Disciplinary Team (MDT) approach strives to coordinate the efforts of all agencies involved to administer the most effective, efficient, child friendly, and trauma aware investigative practices available and intends to achieve proper adjudication, prosecution, treatment, and prevention of child abuse. The protocols shall adhere to the Child First doctrine which strives to heal and protect children and families from the devastating effects of trauma and chronic stress fostering the development of strong, nurturing, caregiver-child relationships, promoting adult capacity, and connecting families with needed services."

On 2.20.2022 at 5:38 pm, MST, this Auditor phoned the Rainbow House Regional Child Advocacy Center at 1611 Towne Drive, Columbia, MO 65202 at phone number. 573.474.6600. After the Auditor introduced herself and the reason for the call, the operator stated my questions would be better answered by a supervisor. The operator took down contact information and stated I would get a call back during normal business hours.

(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility provides residents with reasonable and confidential access to their attorneys or other legal representation. The facility provides residents with reasonable access to parents or legal guardians.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, page 2, section C. 4., states, "Robert L. Perry Juvenile Justice Center shall provide youth with reasonable and confidential access to their attorneys or other legal representation and reasonable access to parents or legal guardians."

Through such reviews of the facility providing SANE/SAFE and advocacy services at the same agency, the facility exceeds standard requirements.

115.354	Third-party reporting
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1441 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Reporting, not dated 3. Agency web address for Third Party Reporting: https://www.courts.mo.gov/hosted/circuit13/court/offices/jjcgeneral.htm#JJCMission <p data-bbox="244 465 352 492">Interviews:</p> <ol data-bbox="244 497 456 627" style="list-style-type: none"> 1. Random residents 2. Targeted residents 3. Random staff 4. Supervisory staff <p data-bbox="244 631 1477 692">Residents and staff interviewed demonstrated their reporting knowledge of third-party reporting by telling a Court Counselor, a family member or calling the hotline.</p> <p data-bbox="244 723 1449 815">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents.</p> <p data-bbox="244 846 1484 976">Robert L. Perry Juvenile Justice Center Policies and Procedures, page 1, section B, states, "Robert L. Perry Juvenile Justice Center shall maintain a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a youth. This information will be displayed on the internet page."</p> <p data-bbox="244 1008 1388 1068">The facility provided a Preventing Sexual Assault Brochure. Page 2 of the brochure has a contact: Hotline Number: 1.800.392.3738.</p> <p data-bbox="244 1099 1490 1391">On 2.13.2022, at 2:48 pm, this Auditor telephoned the hotline number at 1.800.392.3738. The message stated, "Welcome to the State of Missouri child abuse hotline. Press 2 if an adult. Press 1 if mandated reporter. Calling to report type of abuse about emergency issues, press 1, non-emergent situation, press 4. (Online reporting instructions were heard while waiting for an operator.) The holding line offered a call back; however, if the person receiving the call back could not answer the message states the importance of calling back. While on hold, the message continually states hang up and call 911 and then call us back. After waiting on hold for 60 minutes, this Auditor ended the call. Upon the online report being answered as is described in the next paragraph, the Auditor explained being on hold for one hour as the Auditor did not want to press the option for emergency reports. The worker explained calls go into a que and are answered by type of report and the emergency call would have been answered before non-emergent calls.</p> <p data-bbox="244 1422 882 1449">Through such reviews, the facility meets standard requirements.</p>

115.361	Staff and agency reporting duties
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Procedures for Delivery and Review of Health Care Services, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Residents 2. Targeted Residents 3. Random Staff 4. Supervisors 5. Detention Superintendent/PREA Coordinator <p>Interviews with staff and residents demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment. The Detention Superintendent/PREA Coordinator explained all reports/allegations are documented in the agency database.</p> <p>Site Observations:</p> <p>This facility has never experienced a sexual harassment or sexual abuse allegation. After touring the facility, witnessing the many visual postings, addressed envelopes, talking with residents and staff and reviewing the impressive documentation uploaded during the pre-audit phase, the Auditor complements the facility for the obvious attention they hold in regard to PREA implementation and upholding standard requirements.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section A., states, "Robert L. Perry Juvenile Justice Center shall require all employees to respond and report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in any residential/detention facility; against youth or employee who reported such an incident; and any employee neglect or violation of responsibilities that may have contributed to an incident or retaliation."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency requires all staff to comply with any applicable mandatory child abuse reporting laws.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section B., states, "Robert L. Perry Juvenile Justice Center shall require all employees and external service providers to comply with mandatory child abuse reporting laws in Section 210.115 RSMo."</p> <p>(c) Robert L. Perry Juvenile Justice Center PAQ states apart from reporting to the designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section A. 1., states, "Staff shall be prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, in order to make treatment, investigation, and other security and management. Staff shall abide by confidentiality pursuant to 211.321 RSMo."</p> <p>(d) Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section E., states, "Robert L. Perry Juvenile Justice Center manuals shall include a written plan to coordinate actions of employee first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse."</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Procedures for Delivery and Review of Health Care Services, page 1, section B. 1., states, "Initial Health/Dental Screening – health care services including physical examination</p>

and general dental screening are provided through the Family Health Care Center. Medical staff inform resident of their duty to report and the limits of their confidentiality."

(e) Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section D., states, "Upon receipt of any allegation of sexual abuse, the Superintendent will report the allegation to the appropriately identified investigative agency. The Superintendent shall also contact the resident's parents, attorney, and/or legal guardians within three working days of receipt of the information."

(f) Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section A. 1., states, "The Robert L. Perry Juvenile Justice Center shall refer all allegations of sexual abuse and sexual harassment (including third-party and anonymous) to the appropriate investigative agencies and facility investigators based upon the victim's age. The external investigating agencies are aware of the PREA requirements."

Through such reviews, the facility meets standard requirements.

115.362	Agency protection duties
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1465 365" style="list-style-type: none"> <li data-bbox="244 304 715 333">1. Robert L. Perry Juvenile Justice Center PAQ <li data-bbox="244 336 1465 365">2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated <p data-bbox="244 398 352 427">Interviews:</p> <ol data-bbox="244 432 715 461" style="list-style-type: none"> <li data-bbox="244 432 715 461">1. Detention Superintendent/PREA Coordinator <p data-bbox="244 465 1422 526">Interviews with the Detention Superintendent/PREA Coordinator demonstrated the facility staff would act promptly and responds properly at the discovery of the incident.</p> <p data-bbox="244 560 416 589">Site Observation:</p> <p data-bbox="244 593 895 622">The facility did not have any investigations in the past 12 months.</p> <p data-bbox="244 656 1485 745">(a) The Robert L. Perry Juvenile Justice Center PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the facility reports zero residents were subject to substantial risk of imminent sexual abuse.</p> <p data-bbox="244 779 1422 869">Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section C., states, "When Robert L. Perry Juvenile Justice Center learns that a youth is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the youth."</p> <p data-bbox="244 902 874 931">Through such reviews the facility meets standard requirements.</p>

115.363	Reporting to other confinement facilities
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1465 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated <p data-bbox="244 398 352 427">Interviews:</p> <ol data-bbox="244 432 528 461" style="list-style-type: none"> 1. Detention Superintendent <p data-bbox="244 465 1465 560">The interview with the Detention Superintendent demonstrated that she was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, she had the responsibility to notify the head of the facility where the allegation occurred. This instance had not occurred in the past 12 months.</p> <p data-bbox="244 593 1477 750">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. In the past 12 months, the facility has received zero allegations that a resident was abused while in confinement at another facility.</p> <p data-bbox="244 784 1465 974">Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section F., states, "If the allegations are involving sexual abuse that occurred while confined at another facility, the PREA Compliance Manager must notify the facility manager or appropriate reporting office where the alleged abuse occurred immediately, but no later than 72 hours from the receipt of the allegation. Documentation of notification shall be maintained by the PREA Compliance Manager. If the allegations of sexual abuse are received from other agencies or facilities, the PREA Compliance Manager will notify appropriate reporting office of the allegations for investigative purposes."</p> <p data-bbox="244 1008 1465 1102">(b) The Robert L. Perry Juvenile Justice Center PAQ states agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1135 1485 1196">(c) The Robert L. Perry Juvenile Justice Center PAQ states the facility documents that it has provided such notification within 72 hours of receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1229 1465 1350">(d) The Robert L. Perry Juvenile Justice Center PAQ states facility policy requires that allegations received from other agencies or facilities are investigated in accordance with the PREA standards. In the last 12 months, there have been zero allegations of sexual abuse the facility received from other facilities. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1384 882 1413">Through such reviews, the facility meets standard requirements.</p>

115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated 3. Coordinated Response – First Responder Protocols for Sexual Abuse, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random staff 2. Supervisors 3. Investigator <p>Interviews with random and supervisory staff demonstrated each were aware of their first responder responsibilities.</p> <p>Site Observation:</p> <p>This facility has not had any reports of sexual harassment or sexual abuse, ever.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate, preserve, protect, collect physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. In the past 12 months, zero allegations occurred where a resident was sexually abused. In the past 12 months, there were zero allegations where staff were not notified within a time period that still allowed or the collection of evidence.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section E., states, "Coordinated response—PREA Standard 115.364 and PREA Standard 115.365. Robert L. Perry Juvenile Justice Center manuals shall include a written plan to coordinate actions of employee first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse."</p> <p>The facility provided a Coordinated Response – First Responder Protocols for Sexual Abuse. The following is the facilities coordinated response.</p> <p>First Responder, Abuse in Progress: Upon discovering abuse of a youth in progress by either another youth or staff, or being alerted to abuse immediately following the incident:</p> <ol style="list-style-type: none"> 1. Separate the victim and abuser 2. Use crisis intervention techniques as necessary to ensure safety 3. Separate witnesses 4. Do not allow the victim or abuser to shower, wash, use the toilet, change clothes, eat or drink, brush his/her teeth, or rinse his or her mouth 5. Attempt to preserve any bedding, clothing, towels or other items that could potentially be used as evidence. 6. Contact law enforcement 7. Contact Child Abuse and Neglect Hotline for youth under age 18 8. Contact immediate supervisor. If the immediate supervisor is the abuser, notify the next level supervisor 9. Provide emergency medical assistance, if necessary. 10. Take victim to a local medical provider for examination. 11. Observe the scene where the abuse was discovered, documenting the following: 12. Is anything out of place? 13. Are there any objects of note such as clothes? 14. Are there suspicious items on the floor? 15. Are there any obviously missing objects? 16. Are there puddles or stains? 17. What time is it? 18. Are the lights on 19. Who is present in the area? 20. Assess and process the incident and situation 21. Document the incident using the Critical Incident Reporting System

First Responder, Recent Abuse: Upon receiving a report from a youth that he/she has been the victim of abuse in the last 72 hours:

1. Separate the alleged victim and the alleged abuser
2. Assess and process the incident and situation
3. If either have not already done so, discourage the alleged victim and the alleged abuser from washing, showering, using the toilet, eating or drinking, brushing his/her teeth or rinsing his/her mouth.
4. Attempt to preserve any bedding, clothing, towels or other items that could potentially be used as evidence.
5. Contact Child Abuse and Neglect Hotline for youth under age 18.
6. Contact immediate supervisor. If the immediate supervisor is the abuser, notify the next level supervisor
7. Take the victim to a local medical provider for examination
8. Document the incident using the Critical Incident Reporting System

(b) The Robert L. Perry Juvenile Justice Center PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. There have been zero allegations that a resident was sexually abused in the past 12 months where a non-security staff was the first responder. Policy compliance can be found in provision (a) of this standard.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section E. a-b., state, "

- a. "Staff are considered non-security first responders and should encourage alleged victim not to take any actions that could destroy physical evident.
- b. Staff should follow the Coordinated Response to contact and notify non-agency security staff."

Through such reviews, the facility meets standard requirements.

115.365	Coordinated response
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1465 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated 3. Coordinated Response – First Responder Protocols for Sexual Abuse, not dated 4. First Responder Protocols for Sexual Abuse, not dated <p data-bbox="244 465 352 492">Interviews:</p> <ol data-bbox="244 497 716 591" style="list-style-type: none"> 1. Random Staff 2. Supervisor 3. Detention Superintendent/PREA Coordinator <p data-bbox="244 595 1485 689">Interviews with the Detention Superintendent/PREA Coordinator, Supervisor and random staff demonstrated the response to allegations of sexual assault is written to coordinate actions taken in response to sexual abuse and sexual harassment incidents.</p> <p data-bbox="244 721 419 748">Site Observation:</p> <p data-bbox="244 752 1350 779">Review of the institutional plan demonstrates clear direction to staff to ensure first responder duties are fulfilled.</p> <p data-bbox="244 810 1449 904">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p data-bbox="244 936 1477 1066">Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section E., states, "Coordinated response—PREA Standard 115.364 and PREA Standard 115.365. Robert L. Perry Juvenile Justice Center manuals shall include a written plan to coordinate actions of employee first responders, medical and mental health practitioners, investigators, and facility leadership in response to an incident of sexual abuse."</p> <p data-bbox="244 1097 1461 1191">The facility provided Coordinated Response to Reports of Sexual Abuse (Institutional Plan). The plan is laid out in three columns. The first column designates responsible staff. The second column designates timeframes for duties and the third column speaks to individual responsibilities for each staff in the first column.</p> <p data-bbox="244 1223 1474 1317">The facility provided a First Responder Protocols for Sexual Abuse flow chart. This flow is a visual for staff to ensure designated instruction is followed depending on when the abuse occurred within the last 72 hours; if the youth is 18 or older and or did the staff intervene when the abuse was occurring.</p> <p data-bbox="244 1348 882 1375">Through such reviews, the facility meets standard requirements.</p>

115.366	Preservation of ability to protect residents from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>1. Robert L. Perry Juvenile Justice Center PAQ</p> <p>Interviews:</p> <p>1. Detention Superintendent/PREA Coordinator</p> <p>Interviews with the Detention Superintendent/PREA Coordinator determined the facility has not entered into collective bargaining agreements.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has not entered into or renewed any collective bargaining agreements since the last PREA audit.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.367	Agency protection against retaliation
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1465 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, not dated <p data-bbox="244 398 352 427">Interviews:</p> <ol data-bbox="244 432 716 524" style="list-style-type: none"> 1. PREA Support Person 2. Human Services Coordinator 3. Detention Superintendent/PREA Coordinator <p data-bbox="244 528 1433 622">Interviews with PREA Support Persons and Compliance Managers demonstrated they would complete all retaliation monitoring and documentation in TROI, the agency database. The Human Services Coordinator stated retaliation notes would be kept in resident mental health case notes.</p> <p data-bbox="244 656 419 685">Site Observation:</p> <p data-bbox="244 689 1054 719">A need for retaliation monitoring had not presented a need in the past 12 months.</p> <p data-bbox="244 745 1445 871">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The facility designates the PREA Compliance Manager to monitor and report any retaliation.</p> <p data-bbox="244 904 1422 999">Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section C., states, "When Robert L. Perry Juvenile Justice Center learns that a youth is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the youth."</p> <p data-bbox="244 1032 1485 1189">Page 2, section G. 1., states, "Robert L. Perry Juvenile Justice Center provides protection to employees against retaliation for reports of sexual abuse or harassment or cooperation with investigations. Allegations of retaliation shall be immediately reported to the Superintendent or designee. In instances where the Superintendent is believed to be involved in the retaliation, the employee shall notify the Court Administrator. Youth shall be protected against retaliation. Prompt action shall be taken to remedy any such retaliation.</p> <p data-bbox="244 1223 1485 1413">(b-e) Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section G. 2., states, "For 90 calendar days, or longer based on continuing need, following a report of sexual abuse, the PREA Compliance Manager shall monitor the conduct or treatment of any individual, youth or employee, who were involved in a reported incident, and shall act promptly to remedy any such retaliation. Monitoring steps include reviewing groups, reviewing log notes, periodic status checks with youth, and performance reviews or reassignments of employees involved in the initial report or investigation."</p> <p data-bbox="244 1447 882 1476">Through such reviews, the facility meets standard requirements.</p>

115.368	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Shift Supervisor 2. Detention Superintendent/PREA Coordinator <p>Interviews with program management staff demonstrated because each cell is a single use cell, cells are not utilized for protective custody.</p> <p>Site Observation:</p> <p>All cells are single cells, each with a toilet and sink.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility has a policy that residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all resident's safe can be arranged. The facility policy requires that residents who are placed in isolation because they allege to have suffered sexual abuse have access to legally required educational programming, special education services, and daily large-muscle exercise." In the last 12 months there have been zero residents who allege to have suffered sexual abuse, who were placed in isolation.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Official Response Following a Youth Report, page 1, section B., states, "Youth shall only be isolated or separated as a last resort, and upon approval by the Superintendent, when less restrictive measures are inadequate to keep residents safe. Lesbian, gay, bisexual, transgender, or intersex youth shall not be isolated or separated solely on the basis of such identification or status. Residents in isolation shall still be afforded all medical, mental health, education, and programming opportunities available."</p> <p>Section D., states, "Upon a resident being isolated, the Superintendent or his designee shall document the basis for concern regarding the resident's safety and why no alternative means of separation can be arranged. Robert L. Perry Juvenile Justice Center will review treatment needs, including placement decisions and a youth's risk for sexual victimization and abusiveness. Every 30 days that a resident remains in isolation status, the Superintendent shall review the decision to continue isolation."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.371	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Investigations, not dated 4. Missouri Department of Social Services Memo, RE: PREA 115.32, dated 2.16.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Detention Superintendent <p>Interviews with the Detention Superintendent demonstrated investigations are completed by the Missouri Children's Division Out of Home Investigation Unit or local law enforcement.</p> <p>Site Observation:</p> <p>The facility did not have any investigations in the past 12 months.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section A.1. a-c., state: "The Robert L. Perry Juvenile Justice Center shall refer all allegations of sexual abuse and sexual harassment to the appropriate investigative agencies based upon the victim's age. The external investigating agencies are aware of the PREA requirements.</p> <ol style="list-style-type: none"> a. Upon staff becoming aware of an incident (receiving either a written or verbal grievance) of either sexual abuse or sexual harassment, they should notify the Superintendent or designee (immediately in cases that involve physical contact). b. The Superintendent or designee shall determine whether the incident shall be investigated internally or referred to an external investigative authority. c. Staff aware of the incident shall document the information on an Incident Report form and provide to the Superintendent or his designee." <p>(b) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>(c) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>(d) The Robert L. Perry Juvenile Justice Center PAQ states the agency does not terminate an investigation solely because the source of the allegation recants the allegation.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Investigations, page 1, section A. 1. States "Staff shall request the agency not terminate an investigation solely because the victim recants the allegation."</p> <p>(e) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>(f) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>(g) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>Missouri Department of Social Services Memo, RE: PREA 115.32, from the Statewide PREA Coordinator, states, "Missouri Division of Youth Services (DYS) Contracted Detention Centers do not conduct their own investigations of sexual abuse and harassment. These are referred to the Missouri Children's Division Out of Home Investigation Unit (CD-OHI). CD-OHI contacts appropriate local law enforcement to co-investigate and arranges for the necessary SAFE/SANE exams and victim advocacy services. As there was a recent change in the individual who supervises the CD-OHI, a meeting was held with the new supervisor to discuss PREA."</p> <p>(h) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.</p> <p>(I) The Robert L. Perry Juvenile Justice Center PAQ states law enforcement would refer for criminal investigation there has been zero sustained allegation of conduct that appears to be criminal that was referred for prosecution, since the last audit date.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 2, section B., states, "Policies to ensure referrals of allegations for investigations—PREA Standard--Robert L. Perry Juvenile Justice Center shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual</p>

harassment.”

(j) The Robert L. Perry Juvenile Justice Center PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Investigations, page 1, section 3., states, “Robert L. Perry Juvenile Justice Center will retain all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is employed by the agency, plus five years.”

(k) This standard is not applicable as the facility or agency do not conduct administrative or criminal investigations.

(m) Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section 2., states, “When outside agencies investigate sexual abuse and sexual harassment, the Robert L. Perry Juvenile Justice Center shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation. Robert L. Perry Juvenile Justice Center shall offer any resident who experiences sexual abuse access to a forensic medication examination without financial cost. See list of SAFE (and CARE Examination providers. SAFE and CARE exams are offered without financial costs to juvenile victims as noted on the SAFE Payment Program website.”

Through such reviews, the facility meets standard requirements.

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <p>1. Robert L. Perry Juvenile Justice Center PAQ</p> <p>Interviews:</p> <p>1. Detention Superintendent/PREA Coordinator</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency does not conduct investigations.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.373	Reporting to residents
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1430 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, not dated <p data-bbox="244 398 352 427">Interviews:</p> <ol data-bbox="244 432 716 492" style="list-style-type: none"> 1. Investigator 2. Detention Superintendent/PREA Coordinator <p data-bbox="244 497 1374 557">Interviews with the Detention Superintendent/PREA Coordinator and facility investigator demonstrated notification requirements to victims was given verbally and would be documented in TROI, the agency data base.</p> <p data-bbox="244 591 1481 748">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. In the last 12 months there have been zero criminal and or administrative investigations and zero residents were notified of outcomes.</p> <p data-bbox="244 781 1493 907">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section 3., states, "Robert L. Perry Juvenile Justice Center will retain all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is employed by the agency, plus five years."</p> <p data-bbox="244 940 1437 1032">(b) The Robert L. Perry Juvenile Justice Center PAQ states if an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident as to the outcome of the investigation. In the past 12 months, there has been zero investigations of alleged resident sexual abuse.</p> <p data-bbox="244 1066 1493 1158">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section 2., states, "When outside agencies investigate sexual abuse and sexual harassment, Robert L. Perry Juvenile Justice Center shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation."</p> <p data-bbox="244 1191 1461 1283">(c) The Robert L. Perry Juvenile Justice Center PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever:</p> <ul data-bbox="244 1288 1414 1415" style="list-style-type: none"> • The staff member is no longer posted within the resident's unit; • The staff member is no longer employed at the facility; • The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or • The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. <p data-bbox="244 1449 1493 1541">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section B. 2., states, "Following a youth's allegation that an employee member has committed sexual abuse against the youth, the Superintendent shall subsequently inform the youth (unless the allegation was determined to be unfounded) whenever:</p> <ol data-bbox="244 1545 1485 1740" style="list-style-type: none"> a. The employee is no longer assigned to supervise the youth; b. The employee is no longer employed at the facility; c. Robert L. Perry Juvenile Justice Center learns that the employee has been charged with a law violation related to a sexual abuse incident within the facility; d. Robert L. Perry Juvenile Justice Center learns that the employee has been convicted of a law violation related to a sexual abuse incident within the facility." <p data-bbox="244 1774 1485 1899">(d) The Robert L. Perry Juvenile Justice Center PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.</p> <p data-bbox="244 1933 1477 2089">Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section B. 1., states, "Following an investigation into a youth's allegation of sexual abuse suffered in detention, the Superintendent shall inform the youth as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. If the investigation was completed by an outside agency, Robert L. Perry Juvenile Justice Center staff shall request information in order to inform the resident."</p> <p data-bbox="244 2123 1398 2152">(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency has a policy that all notifications to residents</p>

described under this standard are documented. In the past 12 months, there has been zero notifications to a resident, pursuant to this standard.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Responsive Planning and Investigations, page 1, section B. 4., states, "The Superintendent will complete the PREA Violation Notification Checklist at the conclusion of the investigation. The PREA Compliance Manager will ensure all notifications or attempted notifications shall be documented and maintained for auditing purposes."

Through such reviews, the facility meets standard requirements.

115.376	Disciplinary sanctions for staff
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1270 398" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Personnel Management, not dated <p data-bbox="244 434 352 461">Interviews:</p> <ol data-bbox="244 465 718 492" style="list-style-type: none"> 1. Detention Superintendent/PREA Coordinator <p data-bbox="244 497 1493 560">Interviews demonstrated in the last 12 months, the facility had zero staff who was disciplined for violation of an agency sexual abuse or sexual harassment policy.</p> <p data-bbox="244 595 1425 658">(a) The Robert L. Perry Juvenile Justice Center PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.</p> <p data-bbox="244 685 1434 810">Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, page 1, section A., states, "Robert L. Perry Juvenile Justice Center employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies as defined in this policy. These actions may be reported to law enforcement agencies, unless the activity was clearly not criminal."</p> <p data-bbox="244 837 1469 900">(b) The Robert L. Perry Juvenile Justice Center PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies.</p> <p data-bbox="244 927 1477 1088">(c) The Robert L. Perry Juvenile Justice Center PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment.</p> <p data-bbox="244 1124 1490 1317">Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, page 1, section I. A., states, "Robert L. Perry Juvenile Justice Center employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies as defined in this policy. These actions may be reported to law enforcement agencies, unless the activity was clearly not criminal. The disciplinary sanctions shall be commensurate with the nature and circumstance of the acts committed, the staff's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories."</p> <p data-bbox="244 1344 1474 1469">(d) The Robert L. Perry Juvenile Justice Center PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment.</p> <p data-bbox="244 1505 1469 1599">Robert L. Perry Juvenile Justice Center Policies and Procedures, Personnel Management, page 2, section 3., states, "Staff members who have engaged in inappropriate contact with any juvenile shall be reported to appropriate authorities and any relevant licensing bodies and shall be subject to disciplinary action up to and including dismissal."</p> <p data-bbox="244 1626 882 1653">Through such reviews, the facility meets standard requirements.</p>

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Detention Superintendent/PREA Coordinator <p>Interviews demonstrated during the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of residents.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, page 1, section B. 1., states, "Robert L. Perry Juvenile Justice Center shall take appropriate remedial measures and shall consider whether to prohibit further contact with youth, in the case of any allegation of sexual abuse or sexual harassment by a contractor or volunteer."</p> <p>Section B. 2, states, "Any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with youth and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states the facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. The Robert L. Perry Juvenile Justice Center has not experienced an incident where a volunteer or contractor has engaged in sexual abuse or harassment; however, removal from facility premises and restricting access and possible termination of access would be the remedial measures. Contractors and or Volunteers would be terminated. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.378	Interventions and disciplinary sanctions for residents
	<p data-bbox="244 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 208 451 237">Auditor Discussion</p> <p data-bbox="244 271 435 300">Document Review:</p> <ol data-bbox="244 304 1225 398" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, not dated 3. Robert L. Perry Juvenile Justice Center Policies and Procedures, Placement of Youth, not dated <p data-bbox="244 432 352 461">Interviews:</p> <ol data-bbox="244 465 911 495" style="list-style-type: none"> 1. Sexual Abuse Incident Team member/Detention Superintendent <p data-bbox="244 499 1382 560">Interviews with Detention Superintendent demonstrated residents who falsely reported PREA allegations would be disciplined if the opportunity presented.</p> <p data-bbox="244 589 1481 784">(a/c) The Robert L. Perry Juvenile Justice Center PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months there have been zero administrative findings of resident-on-resident sexual abuse have occurred at the facility. In the past 12 months there have no criminal findings of guilt for resident-on-resident sexual abuse, occurring at the facility.</p> <p data-bbox="244 813 1466 940">Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, page 1, section A. 1-7, states, "Youth found to have sexually harmed others shall be offered counseling or other interventions designed to address and correct the underlining reasons for their conduct. A resident may be subject to disciplinary sanctions as determined by the Superintendent. Superintendent may refer resident to Juvenile Office for formal Court action.</p> <ol data-bbox="244 945 1484 1377" style="list-style-type: none"> 1. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. 2. In the event a disciplinary sanction results in isolation of the resident, the resident will continue to have daily access to large muscle exercise, educational programming (including special education services), medical visits, and mental health visits. 3. Residents may participate in other programming to the extent possible. 4. Resident mental health records will be reviewed when determining discipline or sanctions. 5. Resident shall only be disciplined for sexual contact with staff upon a finding that staff member did not consent to such contact. 6. Residents shall not be disciplined if there is a finding that a report of sexual abuse was made in good faith and upon a reasonable belief, even if an investigation does not establish sufficient evidence to make a finding. 7. All sexual activity between residents is prohibited. As such, residents may be disciplined for a finding that sexual activity occurred. " <p data-bbox="244 1406 1489 1668">(b) The Robert L. Perry Juvenile Justice Center PAQ states in the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, the facility policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation have access to other programs and work opportunities to the extent possible. In the past 12 months, zero residents were placed in isolation as a disciplinary sanction for resident-on-resident sexual abuse.</p> <p data-bbox="244 1709 1431 1904">(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. Although the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility does not mandate whether to require the offending resident to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives. Access to general programming or education is not conditional on participation in such interventions.</p> <p data-bbox="244 1933 1477 2029">Robert L. Perry Juvenile Justice Center Policies and Procedures, Discipline, page 1, section C., states "Youth found to have sexually harmed others shall be offered counseling or other interventions designed to address and correct the underlining reasons for their conduct. A resident may be subject to disciplinary sanctions as determined by the Superintendent."</p> <p data-bbox="244 2058 1485 2119">(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency disciplines residents for sexual contact with staff only upon finding that the staff member did not consent to such contact.</p>

(f) The Robert L. Perry Juvenile Justice Center PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

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

(g) The Robert L. Perry Juvenile Justice Center PAQ states the agency prohibits all sexual activity between residents.

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

Through such reviews, the facility meets standard requirements.

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, not dated 3. Missouri Department of Social Services, Division of Medical Services Healthy Children and Youth Screening Guide, not dated 4. Medical Staff Training Document, dated 5. Robert L. Perry Juvenile Justice Center 14 Day Mental Health Tracker, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Mental Health Contractors <p>Interviews with the Mental Health Contractor demonstrated disclosure reports are reported to the mental health staff and follow up medical and or mental health appointments are scheduled for every intake, regardless of disclosure. Mental Health Contractor stated they had been told by a couple of clients that they have been sexually abused in their home or in the community. The mental health staff informed the client that they were a mandated reporter and that they would be notifying DSS. The mental health staff informed the supervisor on duty of the abuse and informed them that they would be notifying the local DSS. The DSS number is posted in the medical room. The mental health staff made the notification to DSS and followed up with an in-person interview when the social worker arrived at the facility.</p> <p>Site Observation:</p> <p>Resident file review demonstrated 14-day mental health disclosure referrals and follow up appointments are not being documented. During the onsite phase of the audit the Auditor requested the Detention Superintendent implement a tracking system to track referrals and follow up mental health appointments.</p> <p>Post audit, the facility implemented a Robert L. Perry Juvenile Justice Center 14-day Mental Health Tracking form. The tracking form documents the resident name, date of disclosure, date mental health is notified and date the mental health visit is conducted.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states all residents at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 are offered a follow-up meeting with a medical or mental health practitioner. Follow up meetings are offered within 14 days of the intake screening. In the past 12 months a 25% residents who disclosed prior victimization during the intake screening. Medical and mental health staff maintain secondary materials, documenting compliance with the above required services.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 1., states, "If the screening completed at admission indicates that a youth has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, Robert L. Perry Juvenile Justice Center employees shall ensure that the youth is offered a follow-up meeting with a medical (nursing staff) or mental health practitioner (BBH or psychiatric fellow) within 14 days of the admission process."</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 2., states, "If the screening completed at admission indicated that a youth has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, Robert L. Perry Juvenile Justice Center employees shall ensure that the youth is offered a follow-up meeting with a mental health practitioner (BBH or psychiatric fellow) within 14 days of the admission process."</p> <p>The facility provided Missouri Department of Social Services, Division of Medical Services Healthy Children and Youth Screening Guides. Individual guides are specific to age groups 10-11, 12-13, 14-15, and 16-17. Guides are used to document referrals for medical and or mental health purposes.</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states all residents who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.341, are offered a follow-up meeting with a mental health practitioner. All residents are allowed a follow-up meeting offered within 14 days of the intake screening. In the past 12 months a 100% residents disclosed previously perpetrated sexual abuse, as indicated during the screening process. Policy compliance can be found in provision (a) of this standard.</p> <p>The facility provided a Robert L. Perry Juvenile Justice Center 14 Day Mental Health Tracker. This document tracks the following:</p> <ul style="list-style-type: none"> • Resident Name • SAVAC Score

- Disclosure
- Date of Referral
- Date of Appointment
- Professional's Name Agency
- Hotline Call

(c) The Robert L. Perry Juvenile Justice Center PAQ states the information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 3., states, "Any information related to sexual victimization or abusiveness that occurred in a residential setting shall be strictly limited to medical and mental health practitioners and other employees, as necessary, to inform treatment plans and safety decisions, or as otherwise required by Federal, State, or local law."

(d) The Robert L. Perry Juvenile Justice Center PAQ states, medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 4., states, "Medical and mental health practitioners shall obtain informed consent from youth before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18."

Through such reviews, the facility meets standard requirements.

115.382	Access to emergency medical and mental health services
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1458 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, not dated 3. Missouri Department of Social Services, Division of Medical Services Healthy Children and Youth Screening Guide, not dated <p data-bbox="244 465 352 492">Interviews:</p> <ol data-bbox="244 497 459 591" style="list-style-type: none"> 1. Random residents 2. Random staff 3. Medical Contractor <p data-bbox="244 595 1469 689">Medical staff state resident victims of sexual abuse would receive timely and unimpeded access to emergency medical treatment and crisis intervention services if a client were victimized at the facility. The contractor went on to state, fortunate, this detention center has not had an incident reported or occurred on-site.</p> <p data-bbox="244 721 1469 846">(a) The Robert L. Perry Juvenile Justice Center PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials used in such occurrences.</p> <p data-bbox="244 878 1437 972">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section B. 1, states, "Victims of sexual abuse shall receive timely, unimpeded access to emergency medical and crisis intervention services, including information about and access to emergency contraception and sexually transmitted infection prophylaxis."</p> <p data-bbox="244 1003 1497 1097">The facility provided Missouri Department of Social Services, Division of Medical Services Healthy Children and Youth Screening Guides. Individual guides are specific to age groups 10-11, 12-13, 14-15, and 16-17. Guides are used to document medical and or mental health notes.</p> <p data-bbox="244 1128 1485 1223">(b) If qualified medical or mental health staff are not on duty, staff would follow the coordinated response checklist directives, which includes instruction to contact mental health practitioners. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1254 1477 1379">(c) The Robert L. Perry Juvenile Justice Center PAQ states resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1411 1497 1536">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section B. 2, states, "The scope and nature of emergency services shall be determined by medical and mental health practitioners. If no qualified medical or mental health practitioner is available at the time that the report of abuse is made, staff shall take preliminary steps to protect the victim and immediately notify the appropriate medical or mental health practitioners and the Superintendent."</p> <p data-bbox="244 1568 1474 1626">(d) The Robert L. Perry Juvenile Justice Center PAQ states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p data-bbox="244 1657 1437 1751">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section B. 3, states, "Treatment services will be provided to all victims of abuse, regardless of the victim's willingness to name the abuser or cooperate in any subsequent investigation."</p> <p data-bbox="244 1783 1477 1877">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section B. 4, states, "Forensic medical exams and treatment services will be offered without financial cost to the victim. Services will be provided whether the victim names the abuser or cooperates with any subsequent investigation arising out of the incident."</p> <p data-bbox="244 1908 882 1935">Through such reviews, the facility meets standard requirements.</p>

115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1281 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, not dated <p data-bbox="244 400 352 427">Interviews:</p> <ol data-bbox="244 432 408 524" style="list-style-type: none"> 1. Residents 2. Random staff 3. Mental Health <p data-bbox="244 528 1476 589">Interviews with medical and mental health staff demonstrated that residents are aware of access to emergency medical and mental health services. In the past of 12 months' residents have not reported sexual abuse.</p> <p data-bbox="244 624 416 651">Site Observation:</p> <p data-bbox="244 656 1409 716">Throughout the facility, there is a multitude of sexual abuse community providers, pamphlets for students available to residents in the multipurpose room.</p> <p data-bbox="244 752 1476 840">(a-f) The Robert L. Perry Juvenile Justice Center PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p data-bbox="244 875 1485 963">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 2, section C. 1. a-e, states, "The facility shall offer medical and mental health evaluations and appropriate treatment to all residents that have been victimized by sexual abuse in a facility.</p> <ol data-bbox="244 967 1476 1265" style="list-style-type: none"> a. The treatment shall include follow-up services and referrals. b. The treatment provided shall be consistent with community level of care. c. Female victims of vaginal penetration shall be offered pregnancy tests. If pregnancy results from abuse, resident shall receive timely access to pregnancy-related medical services. d. Resident victims of sexual abuse in a facility shall be offered tests for sexually transmitted diseases. e. Residents will receive such services without cost and regardless of whether they name the abuser or cooperate with investigation. f. Facility staff shall attempt to conduct a mental health evaluation on resident-on-resident abusers within 60 days of incident being reported. Treatment shall be offered as appropriate <p data-bbox="244 1301 1461 1361">(g) Robert L. Perry Juvenile Justice Center PAQ states, 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.</p> <p data-bbox="244 1397 1476 1485">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section B. 4, states, "Forensic medical exams and treatment services will be offered without financial cost to the victim. Services will be provided whether the victim names the abuser or cooperates with any subsequent investigation arising out of the incident."</p> <p data-bbox="244 1520 1476 1608">(h) The Robert L. Perry Juvenile Justice Center PAQ states the facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.</p> <p data-bbox="244 1644 1476 1731">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 2, section C. 1. f, states, "Facility staff shall attempt to conduct a mental health evaluation on resident-on-resident abusers within 60 days of incident being reported. Treatment shall be offered as appropriate."</p> <p data-bbox="244 1767 882 1794">Through such reviews, the facility meets standard requirements.</p>

115.386	Sexual abuse incident reviews
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1305 365" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, not dated <p data-bbox="244 400 352 427">Interviews:</p> <ol data-bbox="244 432 844 459" style="list-style-type: none"> 1. Incident Review Team Member/Detention Superintendent <p data-bbox="244 463 1377 524">An interview with the Detention Superintendent demonstrated sexual abuse incident reviews take place after each Administrative Investigation.</p> <p data-bbox="244 560 1485 680">(a) The Robert L. Perry Juvenile Justice Center PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been zero criminal and zero administrative investigation of alleged sexual abuse completed at the facility.</p> <p data-bbox="244 716 1485 907">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 1., states, "At the conclusion of a sexual abuse investigation, the PREA Compliance Manager shall ensure a review is conducted using the Critical Incident Review form, including when the allegation has not been substantiated, unless the allegation has been determined to be unfounded. Such review shall ordinarily occur within 30 days of the conclusion of the investigation. The review team shall include the Superintendent, Programs and Services Coordinator, and Intake and Evaluations Coordinator, with input from investigators, and medical and mental health providers."</p> <p data-bbox="244 943 1485 1064">(b) The Robert L. Perry Juvenile Justice Center PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, there were zero criminal and one administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1099 1449 1189">(c) The Robert L. Perry Juvenile Justice Center PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1225 1449 1346">(d) The Robert L. Perry Juvenile Justice Center PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager.</p> <p data-bbox="244 1382 1485 1442">Robert L. Perry Juvenile Justice Center Policies and Procedures, Medical and Mental Care, page 1, section A. 2. a-g, states, "The review team shall:</p> <ol data-bbox="244 1447 1485 1816" style="list-style-type: none"> a. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; b. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; c. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; d. Assess the adequacy of staffing levels in that area during different shifts; e. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; f. Prepare a report of its finding using the Critical Incident Review form; and g. Implement the recommendations for improvement, or shall document its reasons for not doing so. <p data-bbox="244 1852 1485 1912">(e) The Robert L. Perry Juvenile Justice Center PAQ states the facility implements the recommendations for improvement or documents its reasons for not doing so. Policy compliance can be found in provision (d) of this standard.</p> <p data-bbox="244 1939 882 1966">Through such reviews, the facility meets standard requirements.</p>

115.387	Data collection
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1305 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, not dated 3. Missouri Department of Social Services Data Collection Instrument, not dated 4. Data Collection – OSCA – PREA Data, dated 9.2021 <p data-bbox="244 465 1477 595">(a)/(c)-1,2 The Robert L. Perry Juvenile Justice Center PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.</p> <p data-bbox="244 622 1477 685">The facility provided a Missouri Department of Social Services Data Collection Instrument. This instrument requires “all state agencies to collect data for every allegation of sexual abuse at facilities under its direct control.</p> <p data-bbox="244 712 1493 775">(b) The Robert L. Perry Juvenile Justice Center PAQ states the agency aggregates incident-based sexual abuse data at least annually.</p> <p data-bbox="244 801 1477 900">Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section B. 1., states, “Robert L. Perry Juvenile Justice Center shall collect and aggregate incident-based sexual abuse data from Robert L. Perry Juvenile Justice Center at least annually.”</p> <p data-bbox="244 927 1489 990">(d) The Robert L. Perry Juvenile Justice Center PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.</p> <p data-bbox="244 1016 1473 1146">Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section B. 3., states, “Robert L. Perry Juvenile Justice Center shall review data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training to include identifying problem areas and taking corrective action as necessary.”</p> <p data-bbox="244 1173 1477 1236">The facility provided a Data Collection – OSCA – PREA Data for September of 2021. The data answers questions regarding the following:</p> <ol data-bbox="244 1240 1182 1406" style="list-style-type: none"> 1. Facility Information 2. Youth on Youth Incidents Section 3. Staff Incidents Section 4. Total allegations, for Substantiated, Unsubstantiated, Unfounded, and Investigative ongoing 5. Total incidents for 2021 was zero <p data-bbox="244 1433 1457 1460">(e) The Robert L. Perry Juvenile Justice Center PAQ states the agency does not contract for the confinement of residents.</p> <p data-bbox="244 1487 1493 1550">(f) The Robert L. Perry Juvenile Justice Center PAQ states the Department of Justice has requested agency data for the year 2021.</p> <p data-bbox="244 1576 882 1603">Through such reviews, the facility meets standard requirements.</p>

115.388	Data review for corrective action
	<p data-bbox="244 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="244 210 451 237">Auditor Discussion</p> <p data-bbox="244 273 435 300">Document Review:</p> <ol data-bbox="244 304 1305 434" style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, not dated 3. OSCA – PREA Data for Calendar Year 2020 4. The Annual Report can be found at: https://dss.mo.gov/reports/prison-rape-elimination-act-reports/ <p data-bbox="244 461 515 488">Interview/Site Observation:</p> <ol data-bbox="244 492 718 519" style="list-style-type: none"> 1. Detention Superintendent/PREA Coordinator <p data-bbox="244 524 1484 591">An interview conducted with the Detention Superintendent/PREA Coordinator and review of the 2020 Agency Annual Report demonstrated the report is developed annually with a comparison of annual numbers from previous years.</p> <p data-bbox="244 618 1473 712">(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency reviews data collected and aggregated pursuant to §115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including:</p> <ul data-bbox="244 716 1441 846" style="list-style-type: none"> • Identifying problem areas. • Taking corrective action on an ongoing basis; and • Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. <p data-bbox="244 873 1484 940">Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section 3. a-c, states, “Robert L. Perry Juvenile Justice Center will prepare an annual report of its findings and corrective actions.</p> <ol data-bbox="244 945 1492 1137" style="list-style-type: none"> a. Such report shall include a comparison of the current year's data and corrective actions with those from prior years, and shall provide an assessment of the facility's progress in addressing sexual abuse. b. Robert L. Perry Juvenile Justice Center's report shall be approved by the Superintendent and made readily available to the public through its website or, if it does not have one, through other means. c. Robert L. Perry Juvenile Justice Center may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility, but must indicate the nature of the material redacted. <p data-bbox="244 1164 1481 1258">(b) The Robert L. Perry Juvenile Justice Center PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1285 1449 1352">The facility provided the OSCA – PREA Data for Calendar Year 2020 for the Missouri Secure Detention DYS Contractual Sites CY20. This data reports:</p> <ol data-bbox="244 1357 1388 1487" style="list-style-type: none"> 2. The number OSCA PREA Data – aggregate data for all facilities 3. Facility individual information 4. Staff Incidents Section 5. Facility comparison data for years 2018, 2019, and 2020 (this grid is on a separate chart from the annual report.) <p data-bbox="244 1514 1492 1608">(c) The Robert L. Perry Juvenile Justice Center PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. The Annual Report can be found at: https://dss.mo.gov/reports/prison-rape-elimination-act-reports/</p> <p data-bbox="244 1635 1476 1729">(d) The Robert L. Perry Juvenile Justice Center PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. Policy compliance can be found in provision (a) of this standard.</p> <p data-bbox="244 1756 882 1783">Through such reviews, the facility meets standard requirements.</p>

115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Robert L. Perry Juvenile Justice Center PAQ 2. Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Detention Superintendent/PREA Coordinator <p>Through interviews with the Detention Superintendent/PREA Coordinator she demonstrated the data is secured on the Agency's secure intranet with limited access to Department Supervisory staff. Aggregate, redacted data is available on the agency website.</p> <p>(a) The Robert L. Perry Juvenile Justice Center PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section 4., states, "Robert L. Perry Juvenile Justice Center shall ensure that data collected are securely retained."</p> <p>(b) The Robert L. Perry Juvenile Justice Center PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section 5., states, "Robert L. Perry Juvenile Justice Center shall make all aggregated sexual abuse data readily available to the public through the webpage at least annually."</p> <p>(c) The Robert L. Perry Juvenile Justice Center PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.387 for at least 10 years after the date of initial collection, unless Federal, State or local law requires otherwise.</p> <p>Robert L. Perry Juvenile Justice Center Policies and Procedures, Data Collection and Review, page 2, section 6., states, "Robert L. Perry Juvenile Justice Center shall maintain sexual abuse data for at least 10 years after the date of its initial collection."</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p>(b) This is the third audit cycle for Robert L. Perry Juvenile Justice Center and the third year of the third audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Through such reviews, the facility meets standard requirements.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(b) The agency has posted the current 2021 PREA audit report, on their website.</p> <p>Through such reviews, the facility meets standard requirements.</p>

Appendix: Provision Findings		
115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	na
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	na
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	yes
115.312 (b)	Contracting with other entities for the confinement of residents	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.312(a)-1 is "NO".)	yes

115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes

115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? (N/A for non-secure facilities)	yes
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes

115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	yes
115.315 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.315 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents?	yes
115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry maintained by the State or locality in which the employee would work?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes

115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.317 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.318 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.321 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	na

115.321 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	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.)	na
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	yes

115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes

115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes

115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na

115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	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 115.321(a).)	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 115.321(a).)	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 115.321(a).)	na
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	na
115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes

115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes

115.342 (c)	Placement of residents	
	Does the agency always refrain from placing: Lesbian, gay, and bisexual residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Transgender residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from placing: Intersex residents in particular housing, bed, or other assignments solely on the basis of such identification or status?	yes
	Does the agency always refrain from considering lesbian, gay, bisexual, transgender, or intersex identification or status as an indicator or likelihood of being sexually abusive?	yes
115.342 (d)	Placement of residents	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
115.342 (e)	Placement of residents	
	Are placement and programming assignments for each transgender or intersex resident reassessed at least twice each year to review any threats to safety experienced by the resident?	yes
115.342 (f)	Placement of residents	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.342 (g)	Placement of residents	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	yes
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	yes
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.351 (a)	Resident reporting	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes

115.352 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

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

115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes

115.367 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	
	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes
115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	na

115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	no
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	no
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	no
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	no
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	no

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

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

115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378 (c)	Interventions and disciplinary sanctions for residents	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	no
115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	yes
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes

115.381 (c)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	yes
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	yes

115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.387 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
115.387 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.388 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.388 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes