PREA Facility Audit Report: Final

Name of Facility: Community Corrections Center Lincoln
Facility Type: Community Confinement
Date Interim Report Submitted: NA
Date Final Report Submitted: 11/06/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	☑
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	☑
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☑
Auditor Full Name as Signed: Karen d. Murray	**Date of Signature:** 11/06/2026

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	09/28/2025
End Date of On-Site Audit:	09/29/2026

FACILITY INFORMATION	
Facility name:	Community Corrections Center Lincoln
Facility physical address:	2720 West Van Dorn Street, Lincoln, Nebraska - 68522
Facility mailing address:	

Primary Contact

Name:	Jericho Johnson
Email Address:	jericho.johnson@nebraska.gov
Telephone Number:	402-471-6686

Facility Director	
Name:	Doug Diltz
Email Address:	doug.diltz@nebraska.gov
Telephone Number:	402-326-3118

Facility PREA Compliance Manager	
Name:	Jericho Johnson
Email Address:	jericho.johnson@nebraska.gov
Telephone Number:	402-471-6686

Facility Characteristics	
Designed facility capacity:	660
Current population of facility:	613
Average daily population for the past 12 months:	608
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
Age range of population:	19-75
Facility security levels/resident custody levels:	Community A/B
Number of staff currently employed at the	109

facility who may have contact with residents:	
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	1
Number of volunteers who have contact with residents, currently authorized to enter the facility:	192

AGENCY INFORMATION	
Name of agency:	Nebraska Department of Correctional Services
Governing authority or parent agency (if applicable):	
Physical Address:	801 West Prospector Place, PO Box 94661, Lincoln, Nebraska - 68522
Mailing Address:	PO Box 94661, Lincoln, Nebraska - 68509
Telephone number:	4024712654

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

Agency-Wide PREA Coordinator Information			
Name:	Danielle Reynolds	**Email Address:**	danielle.reynolds@nebraska.gov

Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:	
5	• 115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.213 - Supervision and monitoring • 115.231 - Employee training • 115.233 - Resident education • 115.271 - Criminal and administrative agency investigations
Number of standards met:	
36	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-09-28
2. End date of the onsite portion of the audit:	2026-09-29

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The PREA hotline was tested using an Incarcerated Individual telephone located in a housing wing. The call connected directly to the PREA Coordinator's cell phone voicemail, where a recorded message informed callers that reports could be made anonymously and provided instructions regarding the information callers could leave. The PREA Coordinator subsequently confirmed receipt of the test call and shared the recorded message. The Ombudsman reporting mechanism was tested using an Incarcerated Individual telephone. Following introductions and an explanation of the purpose of the call, the individual answering confirmed that information received through the Ombudsman's office is forwarded to the facility Warden

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	660

15. Average daily population for the past 12 months:	618
16. Number of inmate/resident/detainee housing units:	6
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	○ Yes ◉ No ○ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

23. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	611
25. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	199
26. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	2
27. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	10

28. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	10
29. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	12
30. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	34
31. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2
32. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
33. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	421
34. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0

35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	109
37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	192
38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	16

41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☑ Housing assignment ☑ Gender ☐ Other ☐ None
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The facility provided incarcerated individual rosters organized by targeted categories and housing units. Once the Auditor selected individuals from the targeted categories, random individuals were selected by housing unit and gender to ensure a diverse and representative sample.
43. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	◉ Yes ○ No
44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	16

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".

47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	3
49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	1
50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	1
51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2

52. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
53. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
54. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	Individuals who reported sexual abuse occurring at the facility within the past 12 months were no longer housed at the facility at the time of the onsite review.
55. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	4

56. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	The agency as a whole does not utilize segregated housing for their vulnerable populations.
57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12

59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	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.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	13
63. Were you able to interview the Agency Head?	◉ Yes ○ No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	◉ Yes ○ No

65. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
66. Were you able to interview the PREA Compliance Manager?	(●) Yes ( ) No ( ) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

	☐ Other
68. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☑ Other
69. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☑ Medical/dental ☐ Food service ☐ Maintenance/construction ☐ Other
70. 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: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

71. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	(●) Yes ( ) No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	(●) Yes ( ) No
74. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
75. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No

76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	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.

77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No
78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	2	0	2	0
Staff-on-inmate sexual abuse	2	2	2	2
Total	4	2	4	2

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	4

86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

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

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

Non-certified Support Staff	
103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	○ Yes ◉ No

AUDITING ARRANGEMENTS AND COMPENSATION	
108. Who paid you to conduct this audit?	◉ The audited facility or its parent agency ○ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ○ A third-party auditing entity (e.g., accreditation body, consulting firm) ○ Other

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

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services Organizational Chart, dated 12.2025 Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals

3. Correctional Corporals and Case Workers

4. Captain / Security Administrator / PREA Compliance Manager

5. Captain / PREA Coordinator

6. Warden

7. Deputy Director of Prisons Operations

Interviews with Incarcerated Individuals and staff demonstrated that the requirements of this standard are integrated into the facility's daily operations and practices. Both Incarcerated Individuals and staff were knowledgeable regarding facility PREA practices and protocols and consistently described practices that aligned with the agency's established PREA policies and procedures.

Interviews with Incarcerated Individuals demonstrated an overall positive perception of the facility's efforts to provide a safe and respectful environment. Incarcerated Individuals consistently reported feeling safe and supported by staff, with several describing staff as responsive, fair, and attentive to their needs. One Incarcerated Individual who had been incarcerated for approximately 20 years described the facility staff as the best staff they had encountered during their incarceration. Another reported that staff listen to their concerns and provide opportunities for them to be heard. An Incarcerated Individual who had previously been housed at the facility approximately seven years ago reported significant improvement in facility practices and the overall environment. Additional comments reflected appreciation for the opportunities and support provided by the program, including an Incarcerated Individual who reported that the program provided an opportunity to reset their life and another who described experiencing significant personal healing while incarcerated.

Staff interviews demonstrated an organizational culture focused on maintaining professional boundaries, promoting the safety of Incarcerated Individuals, and supporting effective communication among staff. Staff consistently discussed the importance of maintaining professional relationships and appropriate boundaries with Incarcerated Individuals, including avoiding situations that could compromise safety or professional conduct. Staff described remaining attentive to changes in behavior, communicating concerns with colleagues, and identifying trusted staff members who may be able to provide additional support to an Incarcerated Individual.

Staff further described collaboration among security, medical, and other facility personnel, including consistent information sharing and communication regarding identified concerns. Staff reported being mindful of their interactions with

	vulnerable populations and described practices intended to promote accountability and professional conduct, including maintaining visibility, utilizing body-worn cameras when applicable, keeping conversations professional, and maintaining appropriate confidentiality. Staff also demonstrated an understanding of their responsibility to report information or behaviors that may raise concerns regarding the safety of Incarcerated Individuals or staff. The interview with the Captain/PREA Coordinator demonstrated that oversight and support of PREA Compliance Managers are provided through informational emails, scheduled meetings, informational memorandums, FAQ updates, mock audits, and onsite visits conducted by PREA and Regional personnel. Site Observations: During the facility tour, standardized bulletin boards located throughout Incarcerated Individual living units and common areas were observed to contain agency PREA information and green PREA audit notices. PREA information and audit notices were also observed throughout program buildings and administrative areas, demonstrating that PREA information is visibly and consistently incorporated throughout the facility. Recommendation: It is recommended that administrative staff remain mindful of the PREA Compliance Manager’s overall workload and periodically assess competing responsibilities to ensure sufficient time is consistently available to perform PREA-related duties and responsibilities. Facility response: The facility administration is mindful of the workload. Previously the PCM was the only investigator at CCCL since then the facility has obtained additional investigators to help with the investigation process, as well as finding a staff person to assist in notifications and possible retaliation monitoring to alleviate some of the workload. (a) The Community Corrections Center Lincoln PAQ states the agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract. The facility has a written policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 1, section Purpose states, “To establish guidelines for detecting, preventing and handling occurrences, threats and allegations of sexual assault, sexual abuse and sexual harassment perpetrated against incarcerated individuals by incarcerated individuals, team members, contractors, official visitors or volunteers within the Nebraska Department of Correctional Services (NDCS) and to ensure compliance with federal Prison Rape Elimination Act (PREA) standards.

NDCS expressly prohibits sexual contact or sexual acts between incarcerated individuals and between incarcerated individuals and team members, volunteers, official visitors or contractors. NDCS will cooperate with the Bureau of Justice Statistics (BJS) in providing required access to team members and incarcerated individuals, statistical information and data collection with regard to sexual assault, sexual abuse and sexual harassment of incarcerated individuals. In order to ensure compliance with PREA standards, NDCS shall conduct audits pursuant to the process outlined by the Department of Justice (DOJ). This policy applies to all persons, programs and institutions within the jurisdiction of NDCS.

(b) The Community Corrections Center Lincoln PAQ states the agency employs or designates an upper-level, agency-wide PREA Coordinator. The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities.

The facility provided a Nebraska Department of Correctional Services Organizational Chart. The organization chart demonstrates the PREA Coordinator is in the agency organizational structure and reports directly to the Agency Security Administrator who reports directly to the Deputy Assistant Director.

Interviews with Incarcerated Individuals and staff demonstrated that the agency’s zero-tolerance approach to sexual abuse and sexual harassment is consistently integrated into the daily operation of the facility. Incarcerated Individuals demonstrated awareness of PREA practices and consistently described an environment in which they feel safe, supported, heard, and treated respectfully. Staff across disciplines demonstrated knowledge of PREA requirements and described practices that extend beyond basic policy awareness, including maintaining professional boundaries, monitoring changes in behavior, communicating identified concerns, supporting vulnerable Incarcerated Individuals, maintaining appropriate visibility, and promptly reporting information that may affect the safety of Incarcerated Individuals or staff.

	The Captain/PREA Coordinator further demonstrated an established system of ongoing support and oversight through scheduled meetings, informational communications and memorandums, FAQ updates, mock audits, and onsite visits by PREA and Regional personnel. Site observations were consistent with interview information and demonstrated that PREA information is prominently and consistently maintained throughout Incarcerated Individual living areas, program buildings, and administrative areas. Collectively, interviews, documentation, and observations demonstrated that PREA requirements and the agency's zero-tolerance approach are embedded within the facility's operational culture and routinely reinforced through staff practices, communication, oversight, and visible PREA information. Based on interviews, documentation, and observations, the facility exceeds compliance with this standard.

115.212	**Contracting with other entities for the confinement of residents**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. State of Nebraska Service Contract Aware, Scotts Bluff County, dated 3.1.2023 – 2.28.2024 Interviews: 1. Captain / PREA Coordinator The interview with the PREA Coordinator demonstrated the agency does not currently contract with outside entities for the confinement or housing of inmates. As such, there are no current contracts for the confinement of inmates that require monitoring for compliance with PREA standards. (a) The Community Corrections Center Lincoln PAQ states agency has zero contracts with private agencies for confinement services of their inmates.

	(c) The Community Corrections Center Lincoln PAQ states since August 20, 2012, the agency has not entered into one or more contracts with a private agency or other entity that failed to comply with the PREA standards. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.213	**Supervision and monitoring**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Community Corrections Center – Lincoln Annual Review of Staffing Assignment and Video Monitoring Plan, dated 1.2026 3. Staffing Deviation Documentation Interviews: 1. Correctional Corporals and Case Worker 2. Captain / Security Administrator / PREA Compliance Manager 3. Captain / PREA Coordinator Interviews with Correctional Corporals and Case Workers demonstrated that supervision and monitoring practices are incorporated into daily operations. Staff described maintaining visibility and professional accountability by keeping doors open when appropriate, remaining aware of areas where Incarcerated Individuals may be isolated, continuously utilizing body-worn cameras, and routinely checking in with one another. Staff also described remaining attentive to changes in Incarcerated Individual behavior and communicating identified safety concerns with other staff to ensure appropriate follow-up. The interview with the PREA Compliance Manager demonstrated that facility rounds are conducted and documented during each of the facility’s three shifts. This

practice was further evidenced through facility round logs maintained in locked boxes located at the end of each living unit hallway.

The interview with the PREA Coordinator demonstrated that she meets annually in February with each Warden and PREA Compliance Manager to review and complete the facility's annual Staffing Assignment and Video Monitoring Plan.

Site Observations:

During the facility tour, cross-gender announcements were consistently observed each time staff entered an Incarcerated Individual living unit. Unannounced rounds were also observed being conducted jointly by male and female staff. Staff documented completion of the rounds in logbooks maintained in locked boxes located at the end of each housing unit.

Recommendation:

It is recommended that the facility place a camera or mirror in the property room to enhance visibility and supervision. Ensure blinds in the Intel office are positioned to allow staff to visually clear the room when necessary while maintaining appropriate privacy. Facility response: Facility administration is reviewing the property room to identify the best placement for a mirror to provide visibility. The intel office has been instructed to allow visibility into the office by opening the blinds for better supervision. Central Control will be designated to review all cameras upon resuming post to ensure operational this will be logged in the logbook. If cameras are found to not be working the shift supervisor will be notified immediately. Meeting minutes uploaded to OAS.

(a) The Community Corrections Center Lincoln PAQ states for each facility, the agency develops and documents a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect residents against sexual abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents is 592. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents on which the staffing plan was predicated is 592.

The facility provided a Community Corrections Center – Lincoln Annual Review of Staffing Assignment and Video Monitoring plan. The document documents the following components.

1. Generally accepted adult correctional institution practice.

2. Any judicial findings of inadequacy.

3. Any findings of inadequacy from federal investigative bodies.

4. Any findings of inadequacy from internal or external oversight bodies.

5. All components of the facility's physical plant, including blind spots or areas where team members or inmates may be isolated.

6. The composition of the resident population (i.e.-gender rations, risk/need of residents, physical size, Sexual Aggressive Behavior (SAB), Vulnerability to Victimization (VV).

7. The number and placement of supervisory staff.

8. Institutional programs occurring on shifts.

9. Any applicable state or local laws, regulations or standards.

10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.

11. Any other relevant factors.

The plan is signed and dated by the CCCL PREA Compliance Manager, facility Warden and the NDCS PREA Coordinator.

(b) The Community Corrections Center Lincoln PAQ states each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan. The PAQ states, "The six most common reasons for deviating from the staffing plan in the last 12 months was due to sick calls, approved vacation, military leave, limited duty. temporary duty, FMLA. The PAQ states, "Below Minimum Staffing and Below Critical Staffing reports are submitted via NICaMS each time a shift utilizes overtime or drops below minimum staffing requirements."

The facility provided deviation documentation demonstrating the facility has documented one incident of deviation from the staffing plan in the past 12 months.

(c) The Community Corrections Center Lincoln PAQ states at least once every year the facility, reviews the staffing plan to see whether adjustments are needed in (1) the staffing plan, (2) prevailing staffing patterns, (3) the deployment of video monitoring systems and other monitoring technologies, or (4) the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing plan. The facility completes a staffing plan annually to ensure continued

	compliance with each required element of the staffing plan. In addition to maintaining and annually reviewing a Staffing Assignment and Video Monitoring Plan, documenting deviations from the staffing plan, and implementing monitoring practices consistent with the requirements of this standard, the facility has established additional supervisory practices intended to enhance the safety of Incarcerated Individuals. Although unannounced rounds are not required under the Community Confinement PREA Standards, the facility conducts and documents rounds during each of its three shifts. During the onsite review, unannounced rounds were observed being conducted jointly by male and female staff, with completion of the rounds documented in logbooks maintained in locked boxes at the end of each housing unit. Cross-gender announcements were also consistently observed each time staff entered an Incarcerated Individual living unit. The facility's implementation of documented unannounced rounds across all three shifts represents an additional supervision and monitoring practice beyond the requirements of the Community Confinement standard and provides an additional mechanism for identifying and addressing conditions that could affect the sexual safety of Incarcerated Individuals. Based on interviews, documentation, and observations, the facility exceeds compliance with this standard.

115.215	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services Field Training Officer Module Performance Checklist, dated 2.2021

4. Nebraska Department of Correctional Services Staff Training Academy Course Outline: Searches (Pre-Service), dated 11.24.2021

Interviews:

1. Random Incarcerated Individuals
2. Targeted Incarcerated Individuals
3. Captain / Security Administrator / PREA Compliance Manager
4. Captain / PREA Coordinator

Interviews with Incarcerated Individuals demonstrated that searches and urinalysis procedures are conducted by same-gender staff. All interviewed individuals reported that these procedures are conducted respectfully and in areas where cameras are not present. One Incarcerated Individual specifically expressed appreciation for the search procedure in which staff search the upper body before proceeding to the lower body, further demonstrating the respectful manner in which searches are conducted.

The interview with the PREA Compliance Manager demonstrated that cross-gender searches are not conducted unless a transgender Incarcerated Individual has received agency approval and requests that a staff member of the opposite gender conduct the search. She further explained that routine pat searches are conducted under camera surveillance. However, when a metal detector is activated, a thorough safety search is conducted in a designated cell within the Wing.

The interview with the PREA Coordinator demonstrated that the agency's current practice for searching transgender Incarcerated Individuals is to assign staff of the same gender as indicated on the individual's driver's license and birth certificate.

Site Observations:

During the facility tour, the designated safety search area was observed within a cell in the West Wing. Although the cell was equipped with a camera, a red line identified the designated area where staff conduct searches of Incarcerated Individuals. Review of the camera feed on the facility's monitoring system demonstrated that a privacy mask, displayed as a black box, obstructed visibility of the designated search area, preventing searches conducted within that area from being viewed on camera.

	(a) Community Corrections Center Lincoln PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents were zero. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 8-9, section E. 1., states, “Team members shall not conduct cross-gender safety searches or cross-gender visual body cavity searches (meaning a search of the anal or genital opening) except in exigent circumstances or when performed by medical practitioners. All cross-gender safety searches and cross-gender visual body cavity searches will be documented in an Incident Report. The report shall be maintained by the facility PREA compliance manager.” (b) Community Corrections Center Lincoln PAQ states the facility policy does require that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified as cross-gender strip searches and body cavity searches are not allowed. The number of pat-down searches of female residents that were conducted by male staff was zero. (a) Community Corrections Center Lincoln PAQ states the facility policy requires that all cross-gender strip searches and cross-gender visual body cavity searches be documented. Policy compliance can be found in provision (a) of this standard. (d) Community Corrections Center Lincoln PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 9, section E. 3., states, “In order to enable incarcerated individuals to shower, perform bodily functions and change clothing without nonmedical team members of the opposite gender viewing their breasts, buttocks or genitalia, except in exigent

	circumstances or when such viewing is incidental to routine cell checks, all team members of the opposite gender will announce their presence when entering an incarcerated individual housing unit. Written notice to incarcerated individuals shall be posted prominently in all units indicating team members of the opposite gender may be present at any time. It is also necessary to make a verbal announcement when a team member of the opposite gender is assigned to work on an incarcerated individual housing unit or when a team member of the opposite gender enters an incarcerated individual housing unit where incarcerated individual sleeping/showering quarters are located. For example, if a female team member is assigned to a male housing unit for the duration of a shift, an announcement at the beginning of the shift is required regarding to that person's presence. When the female leaves the unit and returns an announcement of a female present must be made upon return to the unit. In addition, any time an opposite gender team member who is not assigned to that unit enters an area of the housing unit where incarcerated individual sleeping/ showering quarters are located, a verbal announcement of their presence must be made. The announcement shall be made in such a manner that is most likely to be heard, such as the intercom system, and shall make it clear that a team member of the opposite gender has entered the unit (appropriate language includes but is not limited to "A male/female team member is on the floor/unit."). In the event of exigent circumstances (i.e., a medical emergency, incarcerated individual altercation, incarcerated individual/team member assault, etc.) the announcement of cross gender team members is not necessary.” The facility provided a Nebraska Department of Correctional Services Staff Training Academy Course Outline: Searches (Pre-Service). The course description states, “An introduction to the contraband found in a correctional facility and the utilization of various searches to control it. The key elements of the pat, safety, room, and area will be discussed and practical exercises will be conducted on pat and room searches. Professional conduct during searches will be emphasized throughout the course.” Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.216	**Residents with disabilities and residents who are limited English proficient**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Language Line Services Inc Service Contract Amendment, dated 1.1.2025 – 8.16.2027 4. Nebraska Department of Correctional Services Sexual Assault Awareness Brochure in English and Spanish, dated 7.2025 5. Hotline Postings in English and Spanish Interviews: 1. Targeted Incarcerated Individuals 2. Unit Case Manager 3. Deputy Director of Prison Operations Interviews with two transgender, two LGB, two cognitively delayed, one visually impaired, two limited English proficient (LEP), and three vulnerable Incarcerated Individuals demonstrated that all were aware of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and were able to articulate internal and external reporting options. Interviewed Incarcerated Individuals reported that disability-related or language needs did not prevent them from accessing PREA information or available reporting mechanisms. The LEP Incarcerated Individuals confirmed receiving PREA education in their native languages. The interview with the Unit Case Manager demonstrated that interpreters are provided for LEP and deaf Incarcerated Individuals, while individuals with cognitive disabilities receive written educational materials and individualized instruction appropriate to their comprehension levels. She further explained that she asks clarifying questions to assess understanding and ensure Incarcerated Individuals comprehend the information presented. The interview with the Deputy Director of Prisons Operations demonstrated that agency procedures include access to Language Line services and accommodations designed to ensure Incarcerated Individuals with cognitive, disability-related, or language needs understand PREA requirements and available reporting

	mechanisms. The Deputy Director described the use of audio, video, and written materials, as appropriate, to support comprehension of procedures for reporting sexual abuse, sexual harassment, and retaliation. Site Observations: During the facility tour, agency PREA informational postings were observed throughout the facility in both English and Spanish. Recommendation: It is recommended that the facility ensure staff are knowledgeable regarding procedures for accessing approved interpreter services, including Language Line services, and understand that only qualified or otherwise approved interpreters should be utilized when interpreting assistance is necessary. Facility response: Staff have been addressed given the Language Line instructions during the housing meeting. Meeting minutes uploaded to OAS. (a) The Community Corrections Center Lincoln PAQ states the agency has established procedures to provide disabled residents equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section F. 1., states, “Information will be provided in formats accessible to all incarcerated individuals, including those who are deaf or hard of hearing, visually impaired or otherwise disabled; those who have intellectual, psychiatric or speech disabilities; as well as to incarcerated individuals who have limited reading skills and who are limited English proficient.” The facility provided a Language Line Services Inc Service Contract Amendment. Contract language states termination is when mutually agreeable to the vendor/ contractor and the state of Nebraska. The facility provided a Nebraska Department of Correctional Services Sexual Assault Awareness Brochure in English and Spanish. The brochure includes the following information. · Nebraska Department of Correctional Services Zero Tolerance Policy

	· Incarcerated individual on Incarcerated individual or Team member on Incarcerated individual Sexual Behavior · If you are sexually assaulted · Self Protection · Nebraska State Statute The facility provided Hotline Postings in English and Spanish providing the following information. · Reports can be made anonymously. · Report to any staff, volunteer, contractor, medical or mental health staff. · Report to the PREA coordinator or PREA compliance manager. · Call the Ombudsman’s office 01# · You can tell a Family member, friend, legal counsel, or anyone else outside the facility, and they can report on your behalf by calling (855) 623-7360. · You can call the PREA hotline PIN:0-111-111-111 speed dial 08# (b) The Community Corrections Center Lincoln PAQ states the agency has established procedures to provide residents with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Policy compliance can be found in provision (a) of this standard. (c) The Community Corrections Center Lincoln PAQ states the agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations. If YES, the agency or facility documents the limited circumstances in individual cases where resident interpreters, readers, or other types of resident assistants are used. In the past 12 months, the number of instances where resident interpreters, readers, or other types of resident assistants have been used and it was not the case that an extended delay in obtaining another interpreter could compromise the resident’s safety, the performance of first-response duties under § 115.264, or the investigation of the resident’s allegations was zero.

	Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 10, section F. 2., states, “Reasonable steps will be taken to ensure meaningful access to information is provided to incarcerated individuals who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. Reliance will not be placed on incarcerated individual interpreters, incarcerated individual readers or other types of incarcerated individual assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the incarcerated individual's safety.” Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.217	**Hiring and promotion decisions**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services, Teletype Operations Policy 010.06, dated 7.31.2025 4. Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, dated 6.30.2023 5. Nebraska Department of Correctional Services Personal Information for Security Check, dated 4.2023 6. Reference Check Form, dated 11.2013 Interviews: 1. Human Resource Specialist The interview with the Human Resource Specialist demonstrated that criminal background checks and administrative adjudication questions are completed for applicants and contractors prior to hire and as applicable during promotion

	processes. The Human Resource Specialist explained that the Central Office provides quarterly employee reports to assist in monitoring compliance with the requirement to conduct criminal background checks at least every five years. She further stated that she conducts institutional reference checks for all applicable applicants, while the PREA Coordinator responds to institutional reference check requests concerning former employees. Site Observations: Utilizing the PREA Community Confinement Documentation Review Employee File/ Records template, a review of 21 employee files and one contractor file demonstrated that criminal background checks were completed upon hire and at least every five years thereafter, as applicable. File review further demonstrated that administrative adjudication questions and institutional reference checks were completed and documented for applicable employees and contractors. (a) The Community Corrections Center Lincoln PAQ states agency policy prohibits hiring or promoting anyone who may have contact with residents and prohibits enlisting the services of any contractor who may have contact with residents who: (1) Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 11, section G., states, “NDCS shall not hire, promote or enlist the services of any contractor who may have contact with incarcerated individuals who has engaged in sexual/assault in a prison, jail, lockup, community confinement facility, juvenile facility or other institution; 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, coercion or if the victim did not consent or was unable to consent; and/or who has been civilly or administratively adjudicated to have engaged in such activity. Any incidents of sexual harassment will be taken into consideration. Refer to Policy 112.03 Team Member Selection Policy, for additional details regarding the hiring and promoting processes.” (b) The Community Corrections Center Lincoln PAQ states agency policy requires the consideration of any incidents of sexual harassment in determining whether to

	hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents. Policy compliance can be found in provision (a) of this standard. (c/f/h) The Community Corrections Center Lincoln PAQ states the agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of people hired who may have contact with residents who have had criminal background record checks was 15. Nebraska Department of Correctional Services, Teletype Operations Policy 010.06, page 7, section XX Background Checks, states, “All persons entering NDCS facilities, including any team member/volunteer/contractor or visitor are subject to a background investigation including but not limited to Criminal History Check Log (Attachment D), driving record, and wanted person files. In addition, inquiries may include checking intelligence files, NCJIS, incarcerated individual telephone and visiting records, and conducting follow-up interviews. All teletype inquiries related to team members, contractors, volunteers and incarcerated individual visitors will be divided as follows: The Special Services Unit will conduct background checks for all team members, contractors, interns, and volunteers for NDCS. OCC will conduct background checks for incarcerated individual visitors for OCC, Community Corrections Center Omaha (CCC-O), and the Nebraska Correctional Youth Facility (NCYF). RTC will conduct background checks for incarcerated individual visitors for RTC. NSP will conduct background checks for incarcerated individual visitors for NSP, Community Corrections Center-Lincoln (CCCL), and Nebraska Correctional Center for Women (NCCW). TSCI will conduct background checks for incarcerated individual visitors at TSCI. McCook Police Department will conduct background checks for incarcerated individual visitors for the Work Ethic Camp (WEC).” The facility provided a Nebraska Department of Correctional Services, Reference Check Form. Page 2 of the form includes the following questions: 1. Has the candidate engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility or other institutions? 2. Has the candidate ever been convicted of engaging or attempting to engage in sexual activity in the community facility by force, overt, or implied threats of force,

	or coercion, or if the victim did not consent or was unable to consent or refuse? 3. Has the candidate ever been civilly or administratively adjudicated to have engaged in the activity described in question 14 or 15? 4. Has the candidate ever had substantiated allegations of sexual harassment made against him/her in a prison, jail, lockup, community confinement facility, juvenile facility or other institution? 5. Has the candidate ever had substantiated allegations of sexual harassment made against him/her in the community? (d) The Community Corrections Center Lincoln PAQ states the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents was two. Policy compliance can be found in provision (a) of this standard. (e) The Community Corrections Center Lincoln PAQ states agency policy requires that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees. Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 14, section II, 4., states, “NDCS will conduct security checks of current team members every five years.” (g) The Community Corrections Center Lincoln PAQ agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 14, section 3. d., states, “Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.” Based on the review of documentation, observations, and interviews, the facility

	meets the standard requirements.

115.218	Upgrades to facilities and technology
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ Interviews: 1. Warden The interview with the Warden demonstrated that the facility transitioned from a Bosch to a Panasonic camera surveillance system since the previous audit cycle. The Warden further explained that when cameras become nonfunctional, facility personnel conduct continuous checks of the affected areas until repairs are completed. Additional staff interviews demonstrated an emphasis on maintaining visibility throughout the facility, including keeping window coverings raised, utilizing body-worn cameras, and remaining attentive to areas where visibility may be limited. These practices further support the facility's efforts to maintain effective supervision and promote the safety of Incarcerated Individuals. Site Observations: During the facility tour, camera surveillance coverage was reviewed in the Intel Office. Cameras reviewed included those monitoring the designated search area, dayrooms, hallways, dormitories, visitation areas, and exterior locations, including the bus stop, parking lot, and communal recreation areas. Camera images were clear, and many cameras were equipped with 360-degree viewing and pan-tilt-zoom (PTZ) capabilities. Three cameras were identified as not functioning properly during the tour. Upon notification, the Corporal initiated work orders to address the identified deficiencies. Recommendation: Establish a formalized process for promptly identifying, reporting, and tracking nonfunctional cameras to ensure surveillance outages are communicated to

	appropriate personnel and corrective actions are completed in a timely manner. (a) The Community Corrections Center Lincoln PAQ states the agency has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit. (a) The Community Corrections Center Lincoln PAQ states the 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. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.221	**Evidence protocol and forensic medical examinations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Facility checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, dated 3.2025 4. Nebraska Sexual Assault Protocol, dated 2019 5. Nebraska Statute 81-1429.03. 6. Advocacy Attempt Memorandum, dated 7.8.2026 7. Nebraska Department of Correctional Services, Correctional Investigators' Duties and Reporting of Criminal Activities Policy 215.01, dated 12.31.2025 Interviews: 1. Nurse Administrator

	The interview with the Nurse Administrator demonstrated that Incarcerated Individuals who report allegations of sexual abuse are transported to Bryan Medical Center for forensic medical examinations. Site Observations: During the past 12 months, one Incarcerated Individual received a forensic medical examination following an allegation of sexual abuse. The alleged incident occurred in the community while the individual was returning from employment, rather than within the facility. (a) The Community Corrections Center Lincoln PAQ states the agency/facility is responsible for conducting administrative sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including resident-on-resident sexual abuse or staff sexual misconduct). The Nebraska State Patrol and or the Lincoln Police Department would conduct sexual abuse investigations. When conducting a sexual abuse investigation, the agency investigators follow a uniform evidence protocol. The facility provided a Facility Checklist for incidents of sexual assault, sexual abuse, and sexual harassment. The checklist documents the following information. · Date and time reported · Date and time of incident · Allegation Category · Alleged Victim-Name / Number · Alleged Perpetrator-Name/Number · Witnesses of the Incident – Name and Number · First Team Member(s) on Scene (with title) · Means of Discovery/Reporting Section A: Steps to ensure a coordinated response for sexual assault/abuse Section B: If incident is Sexual Assault Section C: Before the end of shift, Shift Supervisors must also ensure the following is

	complete · Form completed by: Name/title/signature · Compliance Manager Reviewed: Signature / Date / Time (b) The Community Corrections Center Lincoln PAQ states the protocol being developmentally appropriate for youth is not applicable as the facility does not house youthful offenders. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011. The facility provided a Nebraska Medical Sexual Assault Protocol, Nebraska Attorney General's Office. The protocol speaks to the following information. · Definitions · Nebraska Statutes Relating to Sexual Assault · Statute of Limitations · Trauma Informed Care · Nebraska Sexual Assault Kit and Reimbursement · Evidence Collection Steps (c) The Community Corrections Center Lincoln PAQ states the facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations. The facility documents efforts to provide SANEs or SAFEs. The number of forensic medical exams conducted during the past 12 months is one. The number of exams performed by SANEs/SAFEs during the past 12 months was one. The PAQ states the case remains open with the Lincoln Police Department. The facility provided the Nebraska Statute 81-1429.03, which states, "The full out-of-pocket cost or expense that may be charged to a sexual assault victim in connection with a forensic medical examination shall be paid from the Sexual

	Assault Payment Program Cash Fund. A report of a forensic medical examination shall not be remitted to the patient or his or her insurance for payment.” (d) The Community Corrections Center Lincoln PAQ states the facility attempts to make available to the victim a victim advocate from a rape crisis center, either in person or by other means. The efforts are documented. If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 11, section I., states, “A forensic examination shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. This person shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. The facility will document efforts to provide SAFEs or SANEs on the Facility Checklist for Incidents of Sexual Assault/Abuse(Attachment E). In the event that an incarcerated individual is sent to the community hospital for a SANE examination, the facility shift supervisor will ask the incarcerated individual if they would like a victim advocate present at the hospital for support through the SANE examination. If the incarcerated individual indicates that they would like a victim advocate present, the facility shift supervisor will notify the hospital that a victim advocate was requested and will document on the Facility Checklist for Incidents of Sexual Assault/Abuse (Attachment E). The hospital will contact an advocate from a rape crisis center to be present. If an advocate is not available to provide victim advocate services, the facility shall make available a qualified individual from a community-based organization or qualified agency team member. This person shall be an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual abuse/assault and forensic examination issues in general. As requested by the victim, the victim advocate, qualified agency team member or qualified community-based organization staff member shall accompany and support the victim through the forensic examination process and investigatory interviews and shall provide emotional support, crisis intervention information and referrals. If requested by the victim, he or she will be allowed to contact his or her emergency

	contact or an immediate family member via a team member assisted telephone call. The team member assisted call shall be no longer than 15 minutes in duration. Team members will document the call, or attempted call, on an Incident Report." The facility provided documentation of advocacy outreach efforts demonstrating the agency has made ongoing attempts to establish advocacy services through Advocacy and Government Affairs. These efforts demonstrate the agency's continued attempt to secure access to outside advocacy services for inmates. (e) The Community Corrections Center Lincoln PAQ states if requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals. (f) The Community Corrections Center Lincoln PAQ states if the agency is not responsible for investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.221 (a) through (e) of the standards. Nebraska Department of Correctional Services, Correctional Investigators' Duties and Reporting of Criminal Activities Policy 215.01, page 2, section I. D., states, "Criminal investigators have authority to conduct investigations into alleged acts by or involving an incarcerated individual, staff member or contractors and volunteers of the Nebraska Department of Correctional Services, potentially constituting misdemeanors or felonies if the alleged act occurred in an NDCS facility/building site/property." Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.222	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Unit Manager / Investigator The interview with the Investigator demonstrated that allegations of sexual abuse involving potential criminal conduct are referred to the Nebraska State Patrol or Lincoln Police Department for criminal investigation. The Investigator identified these agencies as the external law enforcement authorities responsible for investigating allegations that may constitute criminal offenses. Site Observations: During the review period, the facility documented four allegations of sexual abuse and one allegation of sexual harassment. Review of investigative records demonstrated that two allegations were referred to external law enforcement agencies for criminal investigation. (a) The Community Corrections Center Lincoln 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 seven allegations of sexual abuse and sexual harassment that were received. In the past 12 months, the number of allegations resulting in an administrative investigation was five. In the past 12 months, the number of allegations referred for criminal investigation was two. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 12, states, “NDCS shall ensure that an administrative or criminal investigation is completed for all allegations of sexual assault/abuse and sexual harassment, including third party and anonymous reports, in a prompt, thorough and objective manner. Any outside entities responsible for conducting administrative or criminal investigations of sexual assault/abuse and sexual harassment shall have in place a policy governing the conduct of such investigations that complies with PREA standards and shall provide training pertaining to the investigation of sexual assault/abuse and sexual harassment in confinement settings to the NDCS criminal investigators and administrative investigators who conduct such investigations. When outside agencies investigate sexual assault/abuse and sexual harassment,

	NDCS shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation. (This provision is also listed in PREA Standard 115.71) Upon receipt of an allegation for sexual assault, sexual abuse or sexual harassment, the captain/PREA coordinator will review the report(s) of the allegation and discuss the incident with the facility warden to determine if an investigation is warranted. If it is determined to open an investigation, the captain/PREA coordinator will assign the investigation a case number in the Investigator's Case Management database and forward the case log and initial reports to the PREA compliance manager at the respective facility to be assigned to a PREA investigator.” (b/c) The Community Corrections Center Lincoln PAQ states the agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. The agency policy is available on the agency website at: Prison Rape Elimination Act | Nebraska Department of Correctional Services (NDCS) Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.231	**Employee training**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services Sexual Assault/Abuse PREA PowerPoint Course Overview, dated 2025 4. Monthly PREA Refresher Trainings, dated 2023

5. PREA of 2003: Information For Those With Direct And Indirect Contact With Inmates, Training Acknowledgment, not dated

Interviews:

1. Correctional Corporals

2. Case Workers

Interviews with Correctional Corporals and Case Workers demonstrated that staff were aware of and had received initial and annual PREA training. Staff reported that PREA information is further reinforced through monthly staff meetings, monthly email refreshers, and annual in-service training. Staff demonstrated that training concepts are incorporated into their daily responsibilities and were able to articulate specific practices used to prevent sexual abuse and sexual harassment.

Staff consistently discussed the importance of maintaining professional boundaries and avoiding situations that could compromise professional conduct or the safety of an Incarcerated Individual. Staff described remaining attentive to changes in behavior and speaking privately with Incarcerated Individuals when concerns are identified to determine whether the individual may be experiencing sexual abuse, sexual harassment, or other safety concerns. Staff further described maintaining professional communication, limiting the sharing of personal information, following established search procedures, making cross-gender announcements, and ensuring Incarcerated Individuals are aware of multiple internal and external reporting options. Staff emphasized their responsibility to report information or behaviors that raise concerns and demonstrated an understanding that maintaining consistent professional boundaries is an important component of preventing sexual abuse and sexual harassment.

Site Observations:

Review utilizing the PREA Audit Community Confinement Documentation Review Employee File/Records Review template, in conjunction with the facility training spreadsheet, demonstrated that 21 of 21 employee training records reviewed documented completion of annual PREA training in 2025 and 2026 or demonstrated that the employee’s annual training was scheduled in accordance with the facility’s training cycle.

(a) The Community Corrections Center Lincoln PAQ states the agency trains all employees who may have contact with residents on the agency's zero-tolerance policy for sexual abuse and sexual harassment.

	Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13, section 2., states, Pre-service and in-service team member training will consist of the following and will include gender specific approaches to working with male and female incarcerated individuals: a. Zero-tolerance for sexual abuse/assault and sexual harassment. b. Fulfilling responsibilities with regard to prevention, detection, reporting and response policies and procedures for sexual abuse/assault and sexual harassment. c. Incarcerated individuals' right to be free from sexual abuse/assault and sexual harassment. d. Incarcerated individuals' and staffs' rights to be free from retaliation for reporting sexual abuse/assault and sexual harassment. e. Dynamics of sexual abuse/assault and sexual harassment in confinement. f. Common reactions of sexual abuse/assault and sexual harassment victims. g. Detecting and responding to signs of threatened and actual sexual abuse/ assault and sexual harassment. h. Avoiding inappropriate relationships with incarcerated individuals including sexual abuse/assault and sexual harassment. i. Communicating effectively and professionally with incarcerated individuals, including lesbian, gay, bisexual, transgender, intersex, and gender nonconforming incarcerated individuals about sexual abuse/assault and sexual harassment. j. Complying with relevant laws related to mandatory reporting of sexual abuse/assault to outside authorities. k. Conducting cross-gender pat searches (male staff will only pat search female incarcerated individuals in exigent circumstances) and searches of transgender and intersex incarcerated individuals in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs (Pre-service and as needed). The facility provided a Nebraska Department of Correctional Services Sexual Assault/Abuse In-Service PowerPoint. The course overview includes the following. · PREA · What is the Prison Rape Elimination Act · Who the Standards Apply To

	· Functions of the Law · Eighth Amendment · Prison Rape Elimination Act Enacted · Impact to the Job · Nebraska Statutes · Facility Audits · Zero Tolerance · Organizational Culture · PREA and Organizational Culture · Sexual Assault, Abuse, and Harassment · Individual Rights · Sexual Abuse – Inability to Consent · Sexual Abuse in Confinement · PREA vs Rule Violation · Correct Language · When an incarcerated individual wants to report · When writing an incident report · Consequences of not respecting rights · What does policy state regarding inmates' rights to be free from sexual harassment and sexual abuse · How do staff fulfill the requirement of an inmates rights to be free from sexual harassment and sexual abuse · Retaliation · Code of silence · Reporting Culture · Sexual abuse · Sexual Harassment · Dynamics of Sexual Abuse and Harassment

	· Detecting signs · Red Flags · Staff Sexual Misconduct Continuum · Sexual Abuse and the impact of trauma · Prevent and Detect (b) The Community Corrections Center Lincoln PAQ states training is tailored to the gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. The facility has both gender inmates, all staff are trained to work with each gender. Policy compliance can be found in provision (a) of this standard. (c) The Community Corrections Center Lincoln PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements annually. The facility provided monthly PREA refresher training for each month of the year, January through December. Training includes the following topics. · January: PREA Basics – Dynamics of Sexual Abuse in Detention – Detecting Signs of Sexual Abuse · February: Handling Disclosures of Abuse – Responding to Victimized Incarcerated Individuals · March: Professional Communication and Boundaries – Appropriate Interactions – Compromised Professionalism · April: Inmate Privacy – Pat and Safety Searches · May: Ways Incarcerated Individuals Can Report · June: Helping Inmates Who Primarily Speak Another Language · July: Duty to Report: Knowledge, Suspicion, or Information · August: First Responder Duties · September: Encouraging Inmates to Report Sexual Abuse · November: Investigations

	· December: Zero Tolerance Policy (d) The Community Corrections Center Lincoln 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 PREA of 2003: Information for those with Direct and Indirect Contact with Inmates, which states, “I acknowledge that I have been trained on and understand the Prison Rape Elimination Act, NDCS policy and procedures and the Department's zero tolerance standard for all forms of sexual abuse. I also acknowledge that I will report any findings of sexual abuse immediately.” In addition to providing initial and annual PREA training, the facility has established ongoing methods for reinforcing PREA requirements throughout the year. Staff reported receiving PREA information through monthly staff meetings, monthly email refreshers, and annual in-service training, providing repeated opportunities to reinforce prevention, detection, reporting, professional boundaries, and other PREA-related responsibilities. Interviews demonstrated that staff not only receive the training but consistently incorporate PREA principles into their daily responsibilities. Staff were able to articulate specific preventative practices, including maintaining professional boundaries, remaining attentive to changes in Incarcerated Individual behavior, privately addressing identified concerns, maintaining professional communication, following established search procedures, making cross-gender announcements, and reinforcing available internal and external reporting options. Staff further demonstrated an understanding of their responsibility to report information or behaviors that may indicate sexual abuse or sexual harassment. Documentation was consistent with interview information. Review of 21 employee training records demonstrated completion of annual PREA training in 2025 and 2026 or that annual training was scheduled in accordance with the facility’s established training cycle. The facility’s use of recurring monthly PREA reinforcement, combined with staff’s demonstrated ability to articulate and apply PREA prevention and reporting practices during their daily responsibilities, demonstrates an ongoing training approach that extends beyond periodic completion of required training.

	Based on interviews, documentation, and observations, the facility exceeds compliance with this standard.

115.232	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services, Community Partner Orientation Training PowerPoint, 7.2026 4. Nebraska Department of Correctional Services, Volunteer Orientation Handbook, dated 6.2024 5. PREA of 2003: Information For Those With Direct And Indirect Contact With Inmates, Training Acknowledgment, not dated Interviews: 1. Education Navigator – Volunteer 2. Alcoholics Anonymous – Volunteer 3. Facility Medical Care - Contractor Interviews with two volunteers and one contractor demonstrated that each received training on the agency's zero-tolerance policy regarding sexual abuse and sexual harassment prior to having contact with Incarcerated Individuals. All three individuals demonstrated an understanding of their responsibility to report known or suspected sexual abuse or sexual harassment, including information disclosed to them by an Incarcerated Individual. Interviewees identified the Volunteer Coordinator or any facility staff member as appropriate reporting contacts. Site Observation: Utilizing the PREA Community Confinement Documentation Review Employee File/ Records template, a review of training records for two volunteers and one medical

	contractor demonstrated that each had completed training on the agency's zero-tolerance policy and procedures for reporting sexual abuse and sexual harassment. (a) The Community Corrections Center Lincoln PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response. The number of volunteers and contractors, who may have contact with residents, who have been trained in agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response is 204. The facility provided a Nebraska Department of Correctional Services, Community Partner Orientation Training PowerPoint with the following training components. Chapter 15 · Federal PREA Standard 115.232 volunteer training · Sexual Assault on Incarcerated people · Prohibited Behaviors · Your Responsibilities The facility provided a Nebraska Department of Correctional Services, Volunteer Orientation Handbook. Chapter 14 provides information regarding Sexual Assault on Incarcerated Individuals. (b) The Community Corrections Center Lincoln 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. (c) The Community Corrections Center Lincoln PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received. The facility provided an Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors. Through printed name and signature, community partners attest to the

	following: “I acknowledge that I have read the Inmate Sexual Assault/Abuse information for Volunteers and Contractors and have been trained on and understand the Department’s zero-tolerance standard for sexual abuse, harassment and retaliation. I agree that I will report any findings of such incidents immediately.” Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.233	**Resident education**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Prison Rape Elimination Act (PREA) Inmate Orientation, dated 7.2025 Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals 3. Unit Case Manager 4. Warden Interviews with Incarcerated Individuals demonstrated knowledge of PREA and multiple available reporting options, including utilizing the PREA hotline, reporting through a family member, contacting the Ombudsman, submitting a grievance through their tablets, reporting directly to a staff member, or completing an Inmate Incident Report. All Incarcerated Individuals interviewed reported receiving education regarding the agency’s zero-tolerance policy, their rights, and available reporting options on the first or second day of their arrival at the facility. One Incarcerated Individual specifically described the intake process as very thorough and reported that PREA information contained within the PowerPoint presentation was clearly explained.

	The interview with the Unit Case Manager demonstrated that she completes the orientation process with Incarcerated Individuals on the day of arrival when arrival time permits. She stated that Incarcerated Individuals are presented with the agency policy and initial each section as it is explained to them. She further described presenting a PREA PowerPoint presentation and reading and reviewing each page with the individual to promote understanding. Each Incarcerated Individual is also provided a brochure to retain that addresses the agency's zero-tolerance policy, their rights, and multiple internal and external reporting options. The interview with the Warden demonstrated that he personally attends each orientation and/or meets with each newly admitted Incarcerated Individual. During these interactions, he welcomes the individual to the program and discusses the agency and facility mission and philosophy, as well as the agency's zero-tolerance policy and PREA procedures. Site Observation: Resident file review was completed utilizing the PREA Audit – Community Confinement Facilities Documentation Review – Resident Files/Records template. All 30 Incarcerated Individuals whose records were reviewed had been admitted to the program within the previous 12 months. Documentation demonstrated that 28 of 30 received PREA education on the day of admission and the remaining two received PREA education within 48 hours of arrival. (a) The Community Corrections Center Lincoln PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The number of residents admitted during the past 12 months who were given this information at intake was 1352. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section M. 1-4 states, 1. "During the intake process at all NDCS facilities, incarcerated individuals shall receive information explaining NDCS' zero tolerance policy regarding sexual abuse/ assault, sexual harassment, and retaliation for reporting such incidents; how to report incidents or suspicions of sexual abuse/assault, sexual harassment, and retaliation for reporting such incidents; and informed of the designated facility PREA compliance manager. See Inmate Orientation Information Regarding Sexual Assault Awareness (Attachment B). (ACI-3O-09)

	2. Within 30 days of intake, incarcerated individuals newly assigned to NDCS shall receive comprehensive education through use of a PowerPoint/video presentation, with staff available to answer questions, regarding their right to be free from sexual assault/abuse and sexual harassment, their right to be free from retaliation for reporting such incidents and agency policies and procedures for responding to and reporting such incidents. 3. Information will be provided in formats accessible to all incarcerated individuals, including those who are deaf or hard of hearing, visually impaired or otherwise disabled; those who have intellectual, psychiatric or speech disabilities; as well as to incarcerated individuals who have limited reading skills and who are limited English proficient. (ACl-3O-09) 4. Upon transfer to any facility, information specific to that facility's procedures, to the extent that they differ from the previous facility, shall be provided to the incarcerated individual. 5. Receipt of information at intake and comprehensive education within 30 days and upon transfer to any facility shall be documented through incarcerated individual signature and maintained in the inmate file. 6. In addition to providing such education, NDCS shall ensure key information is continuously and readily available or visible to incarcerated individuals through posters, inmate handbooks or other written formats.” (b) The Community Corrections Center Lincoln PAQ states the facility provides residents who are transferred from a different community confinement facility with refresher information referenced in 115.233(a)-1. The number of residents transferred from a different community confinement facility during the past 12 months was 24. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was 224. (c) The Community Corrections Center Lincoln PAQ states Resident PREA education is available in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled and those who have limited reading skills. (d) The Community Corrections Center Lincoln PAQ states the agency maintains documentation of resident participation in PREA education sessions. The facility provided a PREA Inmate Orientation acknowledgements in English and

	Spanish. Inmates attest to the following through their signature and date. “I acknowledge that I have received information regarding my rights to be free from sexual assault, sexual abuse, sexual harassment and to be from retaliation for reporting such incidents. I have also been informed of the Nebraska Department of Correctional Services policy and procedures for responding to such incidents.” (e) The Community Corrections Center Lincoln 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. The facility has implemented a PREA education process that provides comprehensive information to Incarcerated Individuals substantially earlier than the timeframe established by agency policy. While agency policy requires comprehensive PREA education within 30 days of intake, review of 30 Incarcerated Individual records demonstrated that 28 received PREA education on the day of admission and the remaining two received the education within 48 hours of arrival. The education process further includes individualized review of the agency’s PREA policy and a comprehensive PowerPoint presentation, with each page read and reviewed by the Unit Case Manager to promote understanding. Incarcerated Individuals are provided written PREA information to retain, and the Warden personally participates in the orientation process and/or meets with newly admitted Incarcerated Individuals to reinforce the agency’s zero-tolerance policy and PREA procedures. Interviews demonstrated that these practices result in meaningful retention of PREA information. Incarcerated Individuals consistently demonstrated knowledge of the agency’s zero-tolerance policy, their rights, and multiple internal and external reporting options. One Incarcerated Individual specifically described the intake process as very thorough and reported that the PREA PowerPoint information was clearly explained. The facility’s practice of providing comprehensive PREA education at or shortly after admission, combined with individualized review, direct reinforcement by facility leadership, written information for continued reference, and demonstrated retention by Incarcerated Individuals, reflects an education process that extends beyond the minimum requirements of the standard and agency policy. Based on interviews, documentation, and observations, the facility exceeds compliance with this standard.

115.234	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting, PowerPoint Presentation, not dated 4. Nebraska Department of Correctional Services, Certificates of Completion, PREA Investigator Training Report Interviews: 1. Investigator The interview with the Investigator demonstrated that initial specialized training in conducting sexual abuse investigations in confinement settings was completed at the Academy, with subsequent refresher training provided through agency training at Central Office. Site Observation: During the pre-audit phase, specialized investigator training records were uploaded to the Online Audit System. Review of the documentation demonstrated completion of the required specialized training. (a) The Community Corrections Center Lincoln PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 15, section N. 1., states, “In addition to the general training provided to all team members, NDCS criminal and administrative investigators will receive training in conducting investigations in confinement settings, to include: a. Techniques for interviewing victims of sexual assault/abuse.

	b. Proper use of Miranda and Garrity warnings. c. Sexual assault/abuse evidence collection in confinement settings. d. Criteria and evidence required to substantiate a case for administrative action or prosecution referral.” The facility provided Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting. The course overview includes the following. · Background of PREA · Investigation basics · Working with victims · Trauma informed approach · Interviewing · False Reports · Culture · Practical exercise (b) Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Training is conducted through the Nebraska Department of Correctional Services. (b) The Community Corrections Center Lincoln PAQ states the agency maintains documentation showing that investigators have completed the required training. Documentation is maintained by the PREA Coordinator. The number of investigators currently employed who have completed the required training is six. The facility provided a Nebraska Department of Correctional Services PREA Investigator Training Report, demonstrating each of the facility’s investigators completed specialized training for investigators. Through such reviews the facility meets standard requirements.

115.235	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. National PREA Resource Center Specialized Training: PREA Medical and Mental Care Standards Notification of Curriculum Utilization, dated 12.2013 4. National PREA Resource Center, Specialized Medical and Mental Health Training Report Interviews: 1. Nurse Administrator 2. Behavioral Health Practitioner Interviews with medical and mental health practitioners demonstrated that each completed specialized training through the State of Nebraska's established training curriculum addressing the responsibilities of medical and mental health professionals in responding to sexual abuse in confinement settings. Site Observation: During the pre-audit phase, specialized medical and mental health training records were uploaded to the Online Audit System. Review of the documentation demonstrated completion of the required specialized training. (a) The Community Corrections Center Lincoln 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 and have received the training required by agency policy is five. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section O. 1., states, “All full and part-time medical and mental health care

	practitioners to include contracted staff will receive training in the following: a. Detecting and assessing signs of sexual assault/abuse and sexual harassment. b. Preserving physical evidence of sexual assault/abuse. c. Responding effectively and professionally to victims of sexual assault/abuse and sexual harassment. d. Reporting allegations or suspicions of sexual assault/abuse and sexual harassment.” The facility provided the National PREA Resource Center Specialized Training: PREA Medical and Mental Care Standards Notification of Curriculum Utilization curriculum. The curriculum demonstrates the following modules are trained to facility practioners. · Module 1: Detecting and Assessing Signs of Sexual Abuse and Harassment · Module 2: Reporting and the PREA Standards · Module 3: Effective and Professional Responses · Module 4: The Medical Forensic Examination and Forensic Evidence Preservation (b) The Community Corrections Center Lincoln PAQ states agency medical staff at this facility do not conduct forensic medical exams. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section O. 1-2 state, 1. All full and part-time medical and mental health care practitioners to include contracted staff will receive training in the following: a. Detecting and assessing signs of sexual assault/abuse and sexual harassment. b. Preserving physical evidence of sexual assault/abuse. c. Responding effectively and professionally to victims of sexual assault/abuse and sexual harassment. d. Reporting allegations or suspicions of sexual assault/abuse and sexual harassment. 2. NDCS shall maintain documentation confirming medical and mental health staff have received specialized training, either through NDCS or an outside entity.

	This training is required to be completed as soon as practicable.” (c) The Community Corrections Center Lincoln PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training. The facility provided a National PREA Resource Center, Specialized Medical and Mental Health Training report demonstrating each of the facility’s medical and mental health staff have completed the required specialized training. Through such reviews the facility meets the standard requirements.

115.241	**Screening for risk of victimization and abusiveness**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors Policy 201.03, dated 7.31.2025 3. Nebraska Inmate Case Management System PREA Assessment Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals 3. Unit Case Worker Interviews with Incarcerated Individuals demonstrated that risk screening questions were asked during intake, including questions regarding criminal history, prior incarcerations, previous sexual abuse, mental health needs, sexual orientation and gender identity, and any concerns regarding their safety upon entering the facility.

	The interview with the Unit Case Worker demonstrated that all Incarcerated Individuals entering the facility are screened for risk of sexual victimization and abusiveness, typically within 72 hours of arrival, with reassessments conducted within 30 days. She explained that screenings are conducted privately in the conference room, where she assesses each individual's body language, fidgeting, and responses to screening questions in conjunction with collateral information. She further demonstrated an individualized approach by allowing sufficient time to explain questions and ensure Incarcerated Individuals understand what is being asked. Additional screenings are conducted when warranted, including following involvement in a sexual abuse allegation and when an Incarcerated Individual reaches age 65. Site Observations: Through utilization of the PREA Community Confinement Documentation Review Resident File / Records Review template, a review of 30 Incarcerated Individual files demonstrated that all 30 individuals had entered the facility within the preceding 12 months and that all initial risk screenings were completed within the required 72-hour timeframe. Additionally, 28 of 30 risk reassessments were completed within the required 30-day timeframe. (a) The Community Corrections Center Lincoln PAQ states the agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors, Policy 201.3, page 2, section I., states, “All incarcerated individuals shall be assessed during an intake screening at reception facilities and upon each transfer to another facility for their risk of being sexually assaulted, sexually abused or sexually harassed by other incarcerated individuals and/or their potential to be sexually abusive or sexually harassing toward other incarcerated individuals. This screening shall take place within 72 hours of arrival at the facility and be conducted using an objective screening instrument. NDCS shall implement appropriate controls on the dissemination of this information within facilities in order to ensure sensitive information is not exploited to an incarcerated individual's detriment by staff or other incarcerated individuals.” Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors, Policy 201.3, page 3-4, section C., states, “The intake PREA screening assessment shall consider, at a minimum, the following criteria to assess incarcerated individuals for risk of sexual victimization: (PREA standard Secured

	facilities 115.41d/ Community facilities 115.241d) 1. No previous incarceration 2. A previous or current conviction for sexual assault or sexual abuse against a child included on the criminal history check. 3. States they identify as a transgender male, transgender female, intersex, or gender non-conforming. 4. States their sexual orientation is gay, lesbian, bisexual. 5. States they have been sexually assaulted, sexually abuse or sexually harassed while being incarcerated. 6. States they are fearful of being sexually assaulted, sexually abused and sexually harassed while being incarcerated. Other factors that collectively may increase the potential for being a victim /survivor of sexual assault, sexual abuse or sexual harassment include: 1. Criminal history is of a non-violent nature. 2. Is under the age of 21 or over the age of 65 3. Is small in stature (Male is shorter than 5’ 6”, female is shorter than 5’ 2”) 4. Is small in weight (Male weighs less than 140 pounds, female weighs less than 115 pounds) 5. Has a thin build 6. Was a victim/survivor of sexual assault or sexual abuse in the community 7. Has fears for their sexual safety while being incarcerated 8. Stated sexual orientation is other 9. Stated their gender identity is other 10. How do others perceive your sexual orientation 11. Self-reports a medical, developmental, or mental health condition. 12. Self-reports a medical, developmental, or mental health condition affects their daily activity.

	The initial intake PREA screening assessment shall consider prior acts of sexual assault/abuse sexual harassment and prior convictions for violent offenses, and history of prior institutional violence of sexual assault/abuse and sexual harassment as known NDCS, in assessing inmates for risk of being sexually abusive." (b) The Community Corrections Center Lincoln PAQ states the agency policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake. The number of residents entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their entry into the facility was 1339. Policy compliance can be found in provision (a) of this standard. (c-e) The Community Corrections Center Lincoln PAQ states the risk assessment is conducted using an objective screening instrument. The facility provided computer screen prints of the agency PREA risk assessment. Vulnerable OPO Factors · Committed Name · Legal Name · Rcvd Dt · TRD · Rec Cter · Loc · Prev ID · VW Notifiers · DOB · PED · Date of Parole · Admission Status · Violation Description

	· Committed Cnty · Sentence Begin Dt · Min Sentence · Max Sentence · Man Min Sentence Add PREA Assessment: · FAC · Date & Time Received at FAC · Date and Time Screened · Reason for Assessment Criminal History Check: · Who completed the Criminal History check: Name/Date? · Has the individual been previously incarcerated? · How many times · Is the criminal history nonviolent only? · Number of convictions that are of a violent nature to include sexual violence. · How many convictions of sexual violence? · Is the current conviction sexual violence? · How many convictions of sexual violence? · Is there a conviction for sexual violence against a child? · Is there a conviction for sexual violence against an adult · NDCS history of perpetrated violence for sexual assault/abuse and or harassment (Misconduct reports) explain Inmate questions: · Have you been previously incarcerated?

	· How many times? · Number of convictions that are of a violent nature include sexual violence. · How many convictions for sexual violence? · How many convictions for sexual violence against a child? · How many convictions for sexual violence against an adult? Gender/Sexuality Questions · What is your gender Identity? · What are your preferred pronouns? · Do you want a separate shower time? · What is your sexual orientation? · How do others perceive your sexual orientation? Physical Characteristics · Age of individual · Height of individual · Weight of Individual · Build of Individual Sexual Abuse Survival · Are you willing to tell me if you've ever been a survivor/victim of sexual assault or abuse? · Are you survivor of sex assault abuse? · Can you tell me if the sexual assault/abuse happened in: an institution/ the community? Mental health referral completed? Personal Fears

	· Do you have any fears for your safety while incarcerated? · What are those fears · Inmate fears include sexual assault Medical, Developmental or Mental Health · Do you believe you have any medical, developmental, or mental health conditions? · What are your medical, developmental, or mental health condition? · Does this health problem, or condition limit your daily activities? · Do you want to talk to a medical/mental health staff member regarding PREA and your safety? · Medical/mental health referral completed NICaMS provides final scores for the risk assessment to include the following. · Victimization Total · High Priority Victimization Total · Aggressor Total · High Priority Aggressor Total (e) The Community Corrections Center Lincoln PAQ states the policy requires that the facility reassess each resident's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the resident's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 1223. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors, Policy 201.3, page 5, section II., states, "After 14 days and within 30 days from the inmate's arrival at the intake/reception facility, designated facility staff will reassess the inmate's risk of victimization or abusiveness based

	upon any additional relevant information received since the inmate's arrival. Designated facility staff shall also complete a reassessment within 72 hours of arrival when returns from an outside hospital after an admission of 24 hours or more without direct supervision (i.e., medical furlough), returns from remand, parole or abscond status, upon request or after a significant incident. After 14 days and within 30 days of this reassessment event, a follow-up assessment shall also be completed by designated facility staff." (f) The Community Corrections Center Lincoln PAQ states the policy requires that a resident's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors, Policy 201.3, page 6, section V., states, "The PREA screening assessment should be reviewed and a new PREA screening assessment must be completed as necessary by designated unit management team members when warranted due to a request, bi-annual transgender review and after a significant incident of sexual assault/abuse or sexual harassment or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. Each PREA screening assessment will be posted to NICaMS Data Entry and Inquiry. For tracking purposes, a new entry shall be made rather than editing a previous entry." (g) The Community Corrections Center Lincoln PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the resident own perception of vulnerability. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors Policy 201.03, page 5, second paragraph, states, "Inmates may not be disciplined for refusing to answer or not disclosing complete information in response to the aforementioned questions." (h) Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors, Policy 201.3, page 7, first paragraph, states," NDCS shall implement appropriate controls on the dissemination within the facility

	of responses to questions asked to ensure that sensitive information is not exploited by staff or other inmates to the inmate's detriment." Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.242	**Use of screening information**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Targeted Incarcerated Individuals 2. Captain / Security Administrator / PREA Compliance Manager 3. Captain / PREA Coordinator Interviews with two transgender, two lesbian, gay, or bisexual (LGB), two cognitively delayed, one visually impaired, two limited English proficient (LEP), and three vulnerable Incarcerated Individuals demonstrated that none reported experiencing disrespect based on how they identified or their individual circumstances. All reported feeling sexually safe within the facility, expressed comfort with their current housing assignments, and indicated that case managers routinely checked on their well-being to ensure they continued to feel safe. The interview with the PREA Compliance Manager demonstrated that housing assignments are informed by risk screening results, with efforts made to avoid placing known aggressors and known victims in the same room. She explained that individuals are evaluated prior to entering the facility and that those identified as vulnerable are generally assigned housing toward the front of the wing. This practice was supported through observations and interviews with random and targeted Incarcerated Individuals.

The interview with the PREA Coordinator demonstrated that quarterly gender dysphoria meetings are conducted with facility personnel to discuss the individual needs of transgender and intersex Incarcerated Individuals entering or transferring between facilities. These meetings are intended to ensure appropriate consideration of individual housing and programming needs. The PREA Coordinator further explained that she reviews all six-month reassessments following their completion by designated facility personnel.

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

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 16, section Q. 1., states, “Facilities will utilize information from the risk screening to inform housing, bed, work, education and program assignments with the goal of keeping those incarcerated individuals who are at high risk of being sexually victimized from those who are at high risk of being sexually abusive. The institution's physical plant, staffing levels, size, and number of programs and services, as well as activity schedules, will determine the extent to which separation is possible or contacts minimized. Computer tracking of high-risk incarcerated individuals within an institution may be utilized. Facilities will make individualized determinations about how to ensure the safety of each incarcerated individual.”

The facility provided an Inmate Information screenshot demonstrating a Risk Factors and PREA section identifies the Incarcerated Individuals risk for the following areas.

- Suicide Risk
- Violence to Inmates
- Violence to Staff
- Victim Potential
- Current PREA Sexual Violence Potential Scores Available
- Current PREA Sexual Victimization Potential Scores Available
- PREA Violence/Vitim Potential (NEW)

	(b) The Community Corrections Center Lincoln PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each resident. Policy compliance can be found in provision (a) of this standard. (c-d) The Community Corrections Center Lincoln PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis. Policy compliance can be found in provision (a) of this standard. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.251	**Resident reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. NDCS Reporting Posting 4. Verbal Report Documentation Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals 3. Correctional Corporals 4. Case Managers Interviews with Incarcerated Individuals demonstrated an understanding of multiple reporting options, including the PREA hotline, kites, grievances, applications available on facility tablets, third-party reporting, and contacting the Ombudsman. Interviewees further demonstrated an awareness that reports could be submitted anonymously through these reporting mechanisms.

	Interviews with staff demonstrated that reports of sexual abuse and sexual harassment would be accepted through any reporting method chosen by an Incarcerated Individual, including anonymous and third-party reports. Site Observations: During the facility tour, agency PREA informational postings were observed in English and Spanish throughout the housing wings, hallways, administrative areas, classrooms, and visitation area. The PREA hotline was tested using an Incarcerated Individual telephone located in a housing wing. The call connected directly to the PREA Coordinator's cell phone voicemail, where a recorded message informed callers that reports could be made anonymously and provided instructions regarding the information callers could leave. The PREA Coordinator subsequently confirmed receipt of the test call and shared the recorded message. (a) The Community Corrections Center Lincoln PAQ states the agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other residents or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 16-17, section 8. 1. a-c., states, “Inmates shall be provided with multiple ways to privately report sexual assault/abuse, sexual harassment, and retaliation by other inmates or staff for reporting sexual assault/abuse, sexual harassment, staff neglect and/or violation of responsibilities that may have contributed to such incidents. a. Inmates may verbally report the incident to any staff member. b. Inmates may utilize the established hotline number (855-623-7360) to report an allegation anonymously. This number shall be included on all inmates Inmate Calling System (ICS) automatically. The number is a generic pin for all inmates 0-111-111-111 and speed dial 08#. These calls shall not be subject to monitoring. Upon receipt of a voice message, a system generated email is forwarded to the PREA Coordinator. See How To Dial Hotlines (Attachment C) for directions on dialing the PREA Hotline. c. Inmates may report the incident in writing through an Inmate Interview Request or Grievance form.”

(b) The Community Corrections Center Lincoln PAQ states the agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency. The PAQ states, “the inmate population can contact the Ombudsman's office if they chose too. the Ombudsman's office is set up as a speed dial on the inmates calling system.”

(c) The Community Corrections Center Lincoln 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 19, section S. 3-4, state, “Staff will accept all reports made verbally, in writing, anonymously, from other incarcerated individuals and from third parties outside NDCS. Verbal reports will be promptly documented.

Staff have the option of privately reporting sexual assault/abuse and sexual harassment of incarcerated individuals and retaliation against incarcerated individuals and staff by directly notifying the captain/PREA coordinator (402-479-5660) or utilizing the established hotline number (855-623-7360).”

The facility provided a NDCS Reporting Posting demonstrating the following is made available to incarcerated individuals.

- How to Report – internally and externally
- How to Contact the PREA Hotline

The facility provided a report of a verbal report demonstrating the following was documented.

- To / From / Incident Date / Re:
- Facility / Primary Location
- Incident Report Details
- Staff Involved
- Actions Taken

	· Notifications Made (d) The Community Corrections Center Lincoln PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. Policy compliance can be found in provision (c) of this standard. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.252	**Exhaustion of administrative remedies**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Grievance Report Review Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals 3. Captain / Security Administrator / PREA Compliance Manager Interviews with Incarcerated Individuals demonstrated an understanding of their ability to submit grievances electronically through facility-issued tablets. Interviewees identified the tablet grievance system as an available mechanism for reporting concerns, including allegations of sexual abuse and sexual harassment. The interview with the PREA Compliance Manager demonstrated that alternative grievance procedures are available to ensure Incarcerated Individuals maintain access to the grievance process when electronic reporting is unavailable. She explained that paper grievance forms are provided to individuals placed on tablet

	restrictions or those whose tablets are damaged and who cannot afford to purchase replacements. This practice ensures that access to the grievance process is maintained regardless of an individual's ability to utilize the electronic system. Site Observations: During the onsite review, the PREA Coordinator demonstrated the electronic grievance tracking system, which automatically notifies her whenever a PREA-related grievance is submitted through an Incarcerated Individual's tablet. The PREA Coordinator provided access to the database, demonstrating that the grievances reviewed had been responded to and closed on the same day they were received. The electronic notification and tracking process provides a mechanism for timely identification, review, and documentation of PREA-related grievances, while supporting administrative oversight of the facility's response process. (a) The Community Corrections Center Lincoln PAQ states the agency does have an administrative procedure for dealing with resident grievances regarding sexual abuse. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 19, section T., states, “Incarcerated individuals will not be disciplined for filing a grievance related to alleged sexual assault/abuse or sexual harassment unless the facility demonstrates the grievance was deliberately filed in bad faith. NDCS does not impose a time limit on when an incarcerated individual may submit a grievance regarding an allegation of sexual assault/abuse or sexual harassment. Applicable time limits to any portion of a grievance that does not allege an incident of sexual assault/abuse or sexual harassment will be followed per policy. An incarcerated individual is not required to use any informal grievance process (i.e., an incarcerated individual may submit a Step I Grievance without an Informal Grievance attached) or otherwise attempt to resolve an alleged incident of sexual assault/abuse or sexual harassment with staff. An incarcerated individual who alleges sexual assault/abuse or sexual harassment may file a grievance without submitting it to a staff member who is the subject of the complaint. A grievance will not be referred to a staff member who is the subject of the complaint. A final response to the grievance will be issued within 90 days of the initial filing.

	This does not include time consumed by incarcerated individuals preparing an administrative appeal. An extension of up to 70 days may be requested if there is insufficient time to make an appropriate decision. Incarcerated individuals will be notified in writing of the extension and be provided a date by which the decision will be made. If the incarcerated individual does not receive a response or notification of an extension, he or she may consider the absence of a response to be a denial at that level. An incarcerated individual may also file an emergency grievance if he or she feels there is a substantial risk of imminent sexual abuse/assault. The emergency grievance will immediately be forwarded to the shift supervisor, who will take immediate corrective action. An initial response shall be provided within 24 hours and a final decision will be issued within five calendar days. The initial response and final decision will serve as documentation determining whether the incarcerated individual is at substantial risk of imminent sexual abuse/assault and the action taken in response to the emergency grievance.” (b) The Community Corrections Center Lincoln 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. Policy compliance can be found in provision (a) of this standard. (c) The Community Corrections Center Lincoln 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 require that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy compliance can be found in provision (a) of this standard. (d) The Community Corrections Center Lincoln PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was one. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was one. Policy compliance can be found in provision (a) of this standard.

	The Grievance Report was reviewed and the grievance was answered on the same day it was filed. (e) The Community Corrections Center Lincoln PAQ states agency policy and procedure permit third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident decision to decline was zero. Policy compliance can be found in provision (a) of this standard. (f) The Community Corrections Center Lincoln PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was three. Policy compliance can be found in provision (a) of this standard. (g) The Community Corrections Center Lincoln 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. Policy compliance can be found in provision (a) of this standard. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.253	**Resident access to outside confidential support services**

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Community Corrections Center Lincoln PAQ

2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025

3. Advocacy Attempt Memorandum, dated 7.8.2026

Interviews:

1. Targeted Incarcerated Individual

2. Captain / PREA Coordinator

The interview with the PREA Coordinator demonstrated that Incarcerated Individuals who report sexual abuse would be connected with a facility and/or agency mental health provider, as the agency has been unable to secure an agreement with a community advocacy organization.

During an interview with an Incarcerated Individual who disclosed prior sexual victimization, the individual reported currently receiving mental health services related to the disclosure. However, the Incarcerated Individual was unaware that community advocacy services were available to provide additional support, regardless of whether the individual was residing at the facility or in the community.

Recommendation:

It is recommended that the facility provide Incarcerated Individuals with information regarding available community advocacy services, including how to access those services while residing at the facility and following transition into the community. Facility response: A list has been provided to the PCM to post in the units. uploaded to the OAS.

(a) The Community Corrections Center Lincoln PAQ states the facility provides residents with access to outside victim advocates for emotional support services related to sexual abuse. The facility provides residents with access to such services by giving residents mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or

	rape crisis organizations. The facility provides residents with access to such services by enabling reasonable communication between residents and these organizations in as confidential a manner as possible. (b) The Community Corrections Center Lincoln PAQ states the facility informs residents, prior to giving them access to outside support services, of the extent to which such communications will be monitored. (c) The Community Corrections Center Lincoln PAQ states the agency or facility maintains memorandum of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse. The facility provided documentation of advocacy outreach efforts demonstrating the agency has made ongoing attempts to establish advocacy services through Advocacy and Government Affairs. These efforts demonstrate the agency's continued attempt to secure access to outside advocacy services for inmates. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.254	**Third party reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Random Incarcerated Individuals 2. Targeted Incarcerated Individuals

	3. Correctional Corporals 4. Case Workers 5. Captain / Security Administrator / PREA Compliance Manager Interviews with inmates demonstrated they were aware they could report through a trusted adult in the community. Interviews with personnel demonstrated each would accept any type of report regarding allegations received through a third party. Site Observation: During the facility tour, the agency third party information was observed in the visitation area in the facility. (a) The Community Corrections Center Lincoln PAQ states the agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment. The agency or facility publicly distributes information on how to report resident sexual abuse or sexual harassment on behalf of residents. The Ombudsman reporting mechanism was tested using an Incarcerated Individual telephone. Following introductions and an explanation of the purpose of the call, the individual answering confirmed that information received through the Ombudsman's office is forwarded to the facility Warden Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.261	**Staff and agency reporting duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ

2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025

Interviews:

1. Random Incarcerated Individuals
2. Targeted Incarcerated Individuals
3. Correctional Corporals
4. Case Workers
5. Captain / Security Administrator / PREA Compliance Manager

Interviews with staff and Incarcerated Individuals demonstrated an understanding of the importance of immediately reporting all allegations of sexual abuse and sexual harassment. Staff demonstrated an understanding of their responsibility to immediately report any knowledge, suspicion, or information received regarding sexual abuse and sexual harassment, including incidents personally observed or disclosed by Incarcerated Individuals. However, interviews with administrative personnel did not demonstrate a consistent understanding of which facility or agency department is responsible for notifying Adult Protective Services when an allegation of sexual abuse involves a vulnerable adult.

Site Observations:

A review of facility records demonstrated that four allegations of sexual abuse and one allegation of sexual harassment were received during the review period. Of the five allegations, one was reported by a third party, two were verbally reported to staff, and the remaining two were identified through facility Intelligence (Intel) processes. These findings demonstrated that allegations were identified through multiple reporting mechanisms, including direct reporting, third-party reporting, and facility intelligence activities.

Recommendation:

It is recommended that facility or agency protocols clearly identify the department or designated personnel responsible for notifying Adult Protective Services when an allegation of sexual abuse involves a vulnerable adult. Additionally, applicable administrative personnel should be educated on the established notification procedures to ensure a consistent understanding of reporting responsibilities and timely notification to the appropriate protective services agency when warranted. Facility response: NDCS Medical department is working on an MOU with DHHS. Posters are being developed to be posted in medical / mental health areas.

(a) The Community Corrections Center Lincoln 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 it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 21, section W., states, “All NDCS staff are required to report immediately and according to policy any knowledge, suspicion or information regarding:

1. An incident of sexual assault/abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.

2. Retaliation against incarcerated individuals or staff who reported such an incident.

3. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Medical and mental health staff are obligated to report sexual assault/abuse and inform incarcerated individuals of their duty to report and the limitations of confidentiality at the initiation of services.

If the alleged victim is under 18 years old or considered a vulnerable adult, the allegations will be reported to the Department of Health and Human Services under applicable mandatory reporting laws.

Staff shall not reveal any information related to a sexual assault/abuse report to anyone other than to the extent necessary as specified in NDCS policy, to make treatment, investigations, and other security decisions.

(b) The Community Corrections Center Lincoln PAQ states, apart from reporting to designated supervisors or officials and designated state or local services agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment,

	investigation, and other security and management decisions. Policy compliance can be found in provision (a) of this standard. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.262	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Correctional Corporals 2. Case Workers 3. Captain / Security Administrator / PREA Compliance Manager 4. Captain / PREA Coordinator 5. Warden Interviews with facility personnel demonstrated an understanding that all allegations of sexual abuse and sexual harassment, regardless of the reporting method or source, are taken seriously and immediately reported to supervisory personnel, agency criminal investigators, or external law enforcement agencies, including the Nebraska State Patrol or Lincoln Police Department, as appropriate. Staff demonstrated knowledge of their responsibilities upon receiving an allegation, including immediately separating the alleged victim and alleged abuser, taking appropriate measures to preserve potential physical evidence, and promptly notifying designated personnel to ensure the allegation is addressed and referred for investigation in accordance with established procedures. (a) The Community Corrections Center Lincoln PAQ states when the agency or

	facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was eight. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 21, section X, states, “When NDCS learns that an incarcerated individual is subject to a substantial risk of imminent sexual assault/abuse, it shall take immediate action to protect them and assess and implement appropriate protective measures without unreasonable delay.” Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.263	**Reporting to other confinement facilities**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Email Communication of Facility to Facility Notification of Sexual Assault Interviews: 1. Warden 2. Deputy Director of Prisons Operations The interview with the Warden demonstrated an understanding of his responsibility to notify the Warden or designated administrator of another confinement facility upon receiving an allegation that an Incarcerated Individual was sexually abused while confined at that facility. He further explained that the agency PREA Coordinator would be notified to ensure appropriate communication, coordination, and follow-up in accordance with established agency protocols.

	The interview with the Deputy Director of Prisons Operations demonstrated all sexual assault allegations are referred to the Nebraska State Patrol and are coordinated through the agency PREA Coordinator, facility PREA Compliance Manager, and criminal investigators. (a) The Community Corrections Center Lincoln PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was one. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22, section Y, states, “Within 72 hours of receipt of an allegation an incarcerated individual was sexually abused while confined at another facility, the receiving warden/designee shall notify the warden/designee where the incident was alleged to have occurred and the captain/PREA coordinator. Such notification shall be documented. The captain/PREA coordinator will ensure an investigation is completed according to policy.” The facility provided an email communication demonstrating a Warden to Warden notification of sexual assault was reported while incarceration. (b) The Community Corrections Center Lincoln PAQ states agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard. (c) The Community Corrections Center Lincoln PAQ states the agency or 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. (d) The Community Corrections Center Lincoln PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was one. Policy compliance can be found in provision (a) of this standard.

	Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.264	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Correctional Corporals 2. Case Workers Interviews with Correctional Corporals and Case Workers demonstrated an understanding of first responder responsibilities. Staff described separating the alleged victim and alleged abuser, ensuring the safety of the alleged victim, preserving potential physical evidence, and maintaining supervision until appropriate personnel assumed responsibility for the response. Staff described preventing alleged victims from changing clothes, showering, eating, drinking, or urinating and, when applicable, placing the individual in a dry area or maintaining constant supervision. Interviews did not consistently demonstrate an understanding that staff are to request and encourage alleged victims not to take actions that could destroy potential physical evidence rather than prohibit or restrict the alleged victim from engaging in those activities. Recommendation: It is recommended that the facility reinforce with staff that alleged victims of sexual abuse should be requested and encouraged not to take actions that could destroy potential physical evidence, including washing, brushing their teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, rather than being restricted or prohibited from engaging in these activities. Facility response: Agency email sent out by PREA Coordinator on 9/29/2026 with refresher information uploaded to OAS. New pocket response cards are being made. Response cards uploaded to OAS.

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

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

Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence was one. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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 was one. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report ensured that the alleged abuser not take any actions that could destroy

	physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating was one. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 22, section Z. 1., states, “Upon learning of an allegation an incarcerated individual was sexually assaulted, the first security staff member (team members primarily responsible for the supervision and control of incarcerated individuals, including but not limited to custody, housing unit, mental health, recreation, maintenance, teachers, etc.) to respond to the report shall be required to: 1) Separate the victim and abuser and ensure that the victim is safe. 2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. 3) Security staff and non-security staff that respond to an incident will request the alleged victim and ensure the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing/showering, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating if the abuse occurred within a time period that allows for evidence collection (120 hours); and notify the shift supervisor immediately.” (b) The Community Corrections Center Lincoln PAQ states the facility’s’ policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that a resident was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero. Policy compliance can be found in provision (a) of this standard. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.265	**Coordinated response**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ

2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025

3. Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, dated 3.2025

Interviews:

1. Captain / PREA Coordinator

2. Warden

The interview with the PREA Coordinator demonstrated that each facility utilizes a standardized Facility Checklist for Incidents of Sexual Assault, Sexual Abuse, and Sexual Harassment to guide staff responses to allegations and ensure required procedures are consistently addressed and documented.

The interview with the Warden demonstrated that Shift Supervisors maintain access to the Facility Checklist for Incidents of Sexual Assault, Sexual Abuse, and Sexual Harassment to provide immediate guidance when responding to allegations. The checklist serves as a resource to assist supervisory personnel in coordinating the facility's response and ensuring appropriate actions are taken.

Site Observations:

A review of the Facility Checklist for Incidents of Sexual Assault, Sexual Abuse, and Sexual Harassment demonstrated that the document provides clear direction to staff regarding their responsibilities when responding to allegations. The checklist outlines procedures intended to guide first responders and supervisory personnel through the necessary response activities, promoting a coordinated and consistent approach to addressing allegations of sexual abuse and sexual harassment.

(a) The Community Corrections Center Lincoln PAQ states the facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

The facility provided a Facility Checklist for incidents of sexual assault, sexual abuse and sexual harassment. The checklist documents the following information.

· Date and time reported

	· Date and time of incident · Allegation Category · Alleged Victim-Name / Number · Alleged Perpetrator-Name/Number · Witnesses of the Incident – Name and Number · First Team Member(s) on Scene (with title) · Means of Discovery/Reporting Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.266	**Preservation of ability to protect residents from contact with abusers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. The Nebraska Association of Pubic Employees Local 61, dated 7.1.2025 – 6.30.2027 4. Labor Contract Between The State of Nebraska and Protective Services, Fraternal Order of Police, Nebraska Protective Services, Lodge 88, dated 7.1.2025 – 6.30.2027 Interviews: 1. Deputy Director of Prisons Operations The interview with the Deputy Director of Prisons Operations demonstrated the Department of Administrative Services have completed negotiations having the ability through agency policy and contract language to move, discipline and take appropriate action for reasons related to PREA.

	(a) The Community Corrections Center Lincoln PAQ states the agency, facility, or any other governmental entity is responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section BB., states, "NDCS shall not enter into any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any incarcerated individuals pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. NDCS is not restricted from entering into or renewing agreements that govern the conduct of the disciplinary process or whether a no-contact assignment imposed pending the outcome of an investigation shall be expunged from or retained in the staff member's personnel file following a determination the allegation of sexual abuse/assault is not substantiated." Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.267	**Agency protection against retaliation**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Retaliation Monitoring Log for Incarcerated Individuals, dated 7.2025 Interviews: 1. Captain / Security Administrator / PREA Compliance Manager The interview with the PREA Compliance Manager demonstrated once an allegation is received, she explains retaliation processes to the victim and ensures the victim

	understands they can report to her at any time, makes sure the victim knows the lines of communication are open and it is her job to keep them safe, completes rounds daily to give the victim multiple reporting opportunities as well as provide staff member names for the victim to speak with in her absence. During retaliation monitoring, the PREA Compliance Manager reviews misconduct reports, work schedule, incident reports and housing changes. The PREA Compliance Manager begins documentation on the day she explains retaliation monitoring, at least twice weekly for up to 90 days and or as long as it necessary. (a) The Community Corrections Center Lincoln 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 Compliance Manager is the designated retaliation monitor. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section CC. 1., states, “NDCS has an obligation to protect all incarcerated individuals and team members who report sexual assault/abuse or sexual harassment or cooperate with sexual assault/abuse or sexual harassment investigations from retaliation by other incarcerated individuals or staff. Examples of acts of retaliation include, but are not limited to, unnecessary discipline, intimidation, unnecessary changes in work or program assignments, unjustified transfers or placements and unjustified denials of privileges or services. The facility PREA compliance manager is responsible for monitoring retaliation against incarcerated individuals, the captain/PREA coordinator is responsible for monitoring retaliation against staff. Staff who believe they have been subject to retaliation should contact the captain/PREA coordinator in order to initiate retaliation tracking.” (c) The Community Corrections Center Lincoln PAQ states the facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. The length of time that the agency/facility monitors the conduct or treatment is 12 months. In the past 12 months, the facility has had zero incidents of retaliation. The facility provided a Retaliation Monitoring Log for Incarcerated Individuals. The form documents the following. · Victim Name / Number

	· Incident Date · Monitoring Begin Date · Initial Review / Type · Initial Protection Measures · Investigation Results · Monitoring Ended Date · Periodic Checks – Date / Time / Misconduct Reports / Cell -Unit Changes / Program Changes / Job Change / Contact Notes – Comments / Initials Based on the review of documentation, observations, and interviews, the facility does not meet the standard requirements.

115.271	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Fiscal Year 26 PREA Tracker Interviews: 1. Unit Manager / Investigator 2. Captain / PREA Coordinator The interview with the Investigator demonstrated that he completed specialized investigator training through the Academy in Nebraska and has since completed refresher training through the Central Office. He stated that once an investigation is assigned by the PREA Coordinator, applicable reports are forwarded to him and he is expected to complete the investigation within 14 days. He reported that an extension may be granted by the PREA Coordinator when exigent circumstances exist.

The Investigator described his investigative process as including review of all applicable reports, available camera footage, and collected evidence, as well as interviews with involved parties and potential witnesses. He stated that efforts are made to locate and interview former staff whose employment may have ended and Incarcerated Individuals who may have discharged from the program during the investigation. Upon completion of the investigation, the Investigator documents the facts and investigative findings in a written report and forwards the report and supporting attachments to the PREA Compliance Manager and PREA Coordinator, who determine the final investigative outcome.

The interview with the PREA Coordinator demonstrated that she maintains communication and participates in regular meetings with agency criminal investigators and the Nebraska State Patrol to remain informed regarding the status of sexual abuse investigations.

Site Observations:

The facility experienced two sexual harassment and three sexual abuse investigations during the past 12 months. Each investigation was reviewed during the onsite review and demonstrated that investigations were completed and investigative records were maintained in accordance with the applicable standard provisions.

(a-b) The Community Corrections Center Lincoln PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE., states, “NDCS shall ensure that an administrative or criminal investigation is completed for all allegations of sexual assault/abuse and sexual harassment, including third party and anonymous reports, in a prompt, thorough and objective manner. Any outside entities responsible for conducting administrative or criminal investigations of sexual assault/abuse shall have in place a policy governing the conduct of such investigations that complies with PREA standards and shall provide training pertaining to the investigation of sexual assault/abuse in confinement settings to the agents and investigators who conduct such investigations. When outside agencies investigate sexual abuse/assault, NDCS shall cooperate with outside investigators and endeavor to remain informed about the progress of the investigation.”

	The agency provided a Fiscal Year 2026 PREA Tracker demonstrating that investigative data is consistently documented and tracked throughout the fiscal year, including the following information: · Case # / Status of Case / Logging Date · Communication Method of Alleged Incident · Report Date / SIR Date · Individual's Assigned Facility · Date of Alleged Incident · Location of Alleged Incident · Facility Notified within 72 Hours (if applicable) · Summary of Allegation · Allegation Category / Allegation Comment · Investigator Name · Est. Due Date / Extension Due Date / Reason for Extension · Date Returned for Correction / Reason for Correction · Date Sent to Law Clerk / Date Returned from Law Clerk · Date Sent to ASA Review / Comments · Date of Investigation Completed / Allegation Determination / Justification of Determination · Date Victim Notified · SAIR Review Date (if applicable) · Improvements Recommended? / Disciplinary Action Recommended? · Amount of Days to Complete · Initiation of Investigation / Length of Investigation / Total Days from Report to Disposition · Length of Legal Review · Amount of Days to Notify Victim (b) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE 3.a., states, "Investigators shall gather and preserve

	direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Alleged victims, suspected perpetrators and witnesses shall be interviewed. Any prior complaints and reports of sexual assault/abuse involving the suspected perpetrator will be reviewed." (d) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE 3.b., states, "When the quality of evidence appears to support criminal prosecution, compelled interviews will only be conducted after consulting with prosecutors as to whether the compelled interview may be an obstacle for subsequent criminal prosecution." (e) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE 4., states, "The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as inmate or staff. Inmates who allege sexual assault/abuse will not be submitted to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation." (f) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE. 5., states, "Administrative Investigations shall: a. Include an effort to determine whether staff actions or failures to act contributed to the abuse. b. Be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings. c. Impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse/assault or sexual harassment are substantiated." (g) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 25, section EE. 6., states, "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence and attached copies of all documentary evidence where feasible." (h) The Community Corrections Center Lincoln PAQ states substantiated allegations of conduct that appear to be criminal are referred for prosecution. The number of substantiated allegations of conduct that appear to be criminal that were

	referred for prosecution since August 20, 2012, or since the last PREA audit, whichever is later was two. (l) The Community Corrections Center Lincoln PAQ states the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 31, section OO. 4.a., states, “The case records involving allegations of sexual harassment, sexual abuse or sexual assault of inmates and the subsequent investigations and outcomes will be kept by the PREA Coordinator. Written reports regarding criminal and administrative investigations will be retained for as long as the alleged abuser is incarcerated or employed by NDCS, plus five years. The required information will be kept in the Investigator’s Case Management Data Base as well as a hard copy in the PREA Coordinator’s office.” In addition to maintaining policies governing administrative and criminal investigations of sexual abuse and sexual harassment, the agency has implemented practices designed to promote timely completion, comprehensive investigative review, and ongoing oversight of PREA investigations. The Investigator demonstrated a structured investigative process that includes review of applicable reports, available camera footage, collected evidence, and interviews with involved parties and potential witnesses. Investigative efforts continue when individuals are no longer readily available, including attempts to locate former employees and Incarcerated Individuals who have discharged from the program. The facility has also established an internal expectation that investigations be completed within 14 days, with extensions requiring approval by the PREA Coordinator when extenuating circumstances exist. The agency further maintains a comprehensive PREA Tracker that provides ongoing oversight of investigations from initial report through final disposition and victim notification. The tracker captures investigative assignment and due dates, extensions and the reasons for extensions, investigations returned for correction and the reasons for correction, legal and administrative review dates, investigative determinations and supporting justification, victim notification, sexual abuse incident review information, recommended improvements or disciplinary action, and multiple measures of investigative timeliness.

	The PREA Coordinator additionally maintains regular communication with agency criminal investigators and the Nebraska State Patrol to remain informed regarding the status of criminal sexual abuse investigations. Review of the facility's five sexual abuse and sexual harassment investigations from the previous 12 months demonstrated that investigations were completed and records were maintained consistent with applicable requirements. The combination of an established 14-day internal investigative timeframe, detailed investigation tracking and accountability measures, continued investigative efforts when involved individuals leave employment or the program, and ongoing coordination regarding criminal investigations demonstrates investigative oversight and accountability practices that extend beyond the minimum requirements of the standard. Based on interviews, documentation, and observations, the facility exceeds compliance with this standard.

115.272	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Unit Manager / Investigator The interview with the Investigator demonstrated an understanding that the preponderance of the evidence standard is applied when determining whether allegations of sexual abuse and sexual harassment are substantiated or unsubstantiated. The Investigator further demonstrated an understanding that investigative findings are based on the totality of available evidence and that a higher standard of proof is not required to substantiate an allegation.

Site Observations:

A review of the investigative documentation associated with four allegations of sexual abuse and one allegation of sexual harassment demonstrated that the preponderance of the evidence standard was clearly articulated within the investigative credibility assessments and documented investigative facts and findings. The documentation demonstrated consideration of the available evidence in reaching investigative determinations.

(a) The Community Corrections Center Lincoln PAQ Bureau states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section FF., states, “NDCS shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual assault/abuse or sexual harassment are substantiated.”

Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.273	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Completed NDCS / PREA Post Investigation Inmate Notification Forms, dated 3.2025 4. Final Report Notification Sample

Interviews:

1. Captain / Security Administrator / PREA Compliance Manager

The interview with the PREA Compliance Manager demonstrated that Incarcerated Individuals who report sexual abuse or sexual harassment are informed of the investigative findings upon completion of the investigation. She explained that notifications are provided both verbally and in writing to ensure individuals are aware of the investigative outcome and that documentation of the notification is maintained.

Site Observations:

A review of investigations completed within the preceding 12 months demonstrated that each investigative file contained documentation confirming the alleged victim was notified of the investigative outcome. The notifications demonstrated that the facility maintains a process for communicating investigative determinations to Incarcerated Individuals and documenting completion of the notification process.

(a) The Community Corrections Center Lincoln PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or administrative investigations of alleged resident sexual abuse that were completed by the agency/facility in the past 12 months was four. Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of residents who were notified, verbally or in writing, of the results of the investigation was three. The PAQ states one investigation remains open."

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 26, section GG. 1., states, "Following an investigation into an inmate's allegation that he or she suffered sexual assault/abuse or harassment, the inmate shall be informed as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. If NDCS did not conduct the investigation it shall request the relevant information from the Nebraska State Patrol in order to inform the inmate. All notifications or attempts shall be made by the captain/PREA coordinator or designee and documented. The obligation to report is terminated if the inmate is released from NDCS custody."

The facility provided completed NDCS / PREA Post Investigation Inmate Notifications. This notification documents the following:

	· Inmate Name / Number / Case Number · Nature of Allegation · Allegation Category · Did the victim receive written/verbal/Notice of Investigation? · Did the investigation include outside agency? If yes, Name of Agency and date notified · Date Investigation began and concluded · Victim must be notified of the below throughout the investigation o Victim notified on of aggressor (team member) removed from inmates unit o Victim notified on of aggressor (incarcerated individual) separated from the victim. · Below Sanction Imposed – unless unfounded or unsubstantiated o Victim notified on of aggressor (team member) no longer employs o Victim notified on of aggressor (team member or incarcerated individual) indicted o Victim notified on of aggressor (team member or incarcerated individual) convicted · Finding of investigation o Case open with State Patrol o Substantiated – allegation was investigated and determined to have occurred o Unfounded – allegation was investigated and determined not to have occurred o Unsubstantiated – allegation was investigated, and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred · Victim Signature/Inmate #/Date/Time · PREA Compliance Manager signature/Date/Time · Facility Warden signature/Date/Time · PREA Coordinator signature/Date/Time (b) The Community Corrections Center Lincoln PAQ states an outside entity

	conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation. The number of investigations of alleged resident sexual abuse in the facility that were completed by an outside agency in the past 12 months was zero. Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of residents alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation was one. (c) The Community Corrections Center Lincoln PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: (a) the staff member is no longer posted within the resident's unit; (b) the staff member is no longer employed at the facility; (c) the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or (d) the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. There have been zero substantiated and unsubstantiated complaints in the past 12 months. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 26-27, section GG. 2., states, "Upon completion of the investigation (including the final review) of an inmate's allegation that a staff member has committed sexual assault/abuse against the inmate (unless it is determined the allegation was unfounded), he or she will be informed whenever: a. The team member is no longer posted within the inmate's unit. b. The team member is no longer employed at the facility. c. It is learned the team member has been indicted on a charge related to sexual abuse/assault within the facility. It is learned the team member has been convicted on a charge related to sexual abuse/assault within the facility." (d) The Community Corrections Center Lincoln PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: (a) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (b) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. (e) The Community Corrections Center Lincoln PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In

	the past 12 months, there have been seven notifications provided to incarcerated individuals, pursuant to this standard. Of those notifications made in the past 12 months, the number that were documented was seven. Policy compliance can be found in provision (a) of this standard. The facility provided a Final Report sample demonstrating the following is documented. · To / From / Date / Subject · Allegations · Conclusion · Synopsis · Finding of Facts · Interviews · History of Prior Investigations · Attachments Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.276	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Warden The interview with the Warden demonstrated that when a staff member is alleged to

	have committed sexual abuse, immediate measures are taken to restrict the staff member's access to the facility and ensure separation from the alleged victim. He explained that the Department of Investigations and criminal investigators, when warranted, are notified, and appropriate steps are taken to preserve potential evidence and secure the incident scene. A mental health referral is initiated for the alleged victim, and Central Control is notified that the staff member is prohibited from entering the facility. Additionally, applicable licensing agencies are notified, and the Human Resources Director is informed for review of potential disciplinary action, up to and including termination of employment. (a) The Community Corrections Center Lincoln PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section HH, states, “Staff members shall be subject to disciplinary sanctions up to and including termination for violating agency sexual assault/abuse or sexual harassment policies. Disciplinary sanctions for violations of agency policies relating to sexual assault/abuse or sexual harassment (other than actually engaging in sexual assault/abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual assault/abuse. All terminations for violations of agency sexual assault/abuse or sexual harassment policies, or resignations by staff who may have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.” (b) The Community Corrections Center Lincoln 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. In the past 12 months, the number of staff from the facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies is zero. (c) The Community Corrections Center Lincoln PAQ states the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have been zero staff requiring discipline for

	sexual abuse or sexual harassment. Policy compliance can be found in provision (a) of this standard. (d) The Community Corrections Center Lincoln 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. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.277	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 Interviews: 1. Warden The interview with the Warden demonstrated that when a contractor or volunteer is alleged to have committed sexual abuse, immediate measures are taken to restrict the individual's access to the facility and ensure separation from the alleged victim. He explained that the Department of Investigations and criminal investigators, when warranted, are notified, and appropriate steps are taken to preserve potential evidence and secure the incident scene. A mental health referral is initiated for the alleged victim, and Central Control is notified that the contractor or volunteer is prohibited from entering the facility. Additionally, the agency or organization associated with the contractor or volunteer is notified of the allegation, along with applicable licensing authorities, when appropriate, to ensure necessary administrative and investigative actions are taken.

	(a) The Community Corrections Center Lincoln PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, contractors or volunteers have not been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents. In the past 12 months, the number of contractors or volunteers reported to law enforcement for engaging in sexual abuse of residents was zero. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section HH. II., states, “Any contractor or volunteer who engages in sexual assault/abuse shall be prohibited from contact with incarcerated individuals and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. The facility shall take appropriate remedial measures, and shall consider whether to prohibit further contact with incarcerated individuals, in the case of any other violation of agency sexual assault/ abuse or sexual harassment policies by a contractor or volunteer.” (b) The Community Corrections Center Lincoln PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with Inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.278	**Disciplinary sanctions for residents**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services Rules and Regulations Manual, dated 3.28.2023

Interviews:

1. Warden

The interview with the Warden demonstrated that when an Incarcerated Individual is alleged to have committed sexual abuse, immediate measures are taken to separate the alleged victim and alleged abuser to ensure safety and prevent further contact. He explained that the alleged abuser may be transferred to another facility pending completion of the investigation. Appropriate measures are taken to secure the incident scene and preserve potential evidence. He further explained that when a transfer occurs, family notifications are made for the alleged victim or alleged abuser, as applicable. The Warden demonstrated an understanding of the importance of maintaining an impartial approach throughout the investigative process, ensuring that allegations are thoroughly investigated and disciplinary determinations are based on the available evidence and investigative findings.

(a) The Community Corrections Center Lincoln PAQ states residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that a resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse. In the past 12 months, the number of administrative findings of resident-on-resident sexual abuse that have occurred at the facility was one. In the past 12 months, the number of criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the facility was one.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29-30, section JJ. 1., states, “Incarcerated individuals shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding the incarcerated individual engaged in incarcerated individual-on-incarcerated individual sexual assault/abuse/assault or sexual harassment or following a criminal finding of guilt for incarcerated individual-on-incarcerated individual sexual abuse/assault.

If a Misconduct Report (MR) has not previously been issued, an MR shall be issued to the abuser by the facility PREA compliance manager after he or she receives the result of the investigation from the captain/PREA coordinator confirming the allegation has been substantiated. The point of discovery for the violation will be when the results of the investigation are received by the facility PREA compliance manager/designee. A copy of the MR will be placed in the investigation file upon hearing findings.”

	(b) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. 2., states, “Sanctions shall be administered following the guidelines set forth in the Code of Offenses, Chapter 5, and Inmate Disciplinary Procedures, Chapter 6, and shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history and the sanctions imposed for comparable offenses by other inmates with similar histories.” The facility provided the Nebraska Department of Correctional Services Rules and Regulations Manual. Chapter 5 – Code of Offenses, includes definitions for the following offenses: I [O [- Sexual Assault, II [C] – Sexual Activities, II [V] – Sexual Harassment. The facility provided the Nebraska Department of Correctional Services Rules and Regulations Manual. Chapter 6 – Inmate Disciplinary Procedures explaining the disciplinary process for offenses, of any type. (c) Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. 3., states, “The disciplinary process shall consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. (d) The Community Corrections Center Lincoln PAQ states the facility does offer therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. (d) The Community Corrections Center Lincoln PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact. (e) Community Corrections Center Lincoln 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. (f) Community Corrections Center Lincoln PAQ states the agency prohibits all

	sexual activity between residents. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.282	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services, Mental Health/Medical Referral Form, dated 11.1998 Interviews: 1. Nurse Administrator The interview with the Nurse Administrator demonstrated that victims of sexual abuse are referred to Bryan West Hospital for forensic medical examinations and appropriate medical services. She explained that medical and security personnel work collaboratively, maintaining open communication and sharing relevant information to ensure timely referrals and coordination of services for Incarcerated Individuals reporting sexual abuse. The Nurse Administrator further demonstrated that established nursing protocols guide the medical response to allegations of sexual abuse, including the identification of immediate healthcare needs and appropriate referrals. She explained that victims are provided timely access to emergency contraception and sexually transmitted infection prophylaxis, when medically appropriate, with follow-up medical services coordinated immediately upon their return from the hospital. She further confirmed that pregnancy-related healthcare services, including access to abortion services as permitted under Nebraska law, are made available through appropriate medical referrals. (a-b) The Community Corrections Center Lincoln 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. The facility would always refer out to local mental health or the emergency room for medical and mental health emergency situations. The facility provided a Nebraska Department of Correctional Services, Mental Health/Medical Referral Form. The form is completed to document the following. · Date / Referral Source · Inmate Name / Number · Institution / Living Location · Referral to: o In-Patient Mental Health Program o In-Patient Sex Offender Program o Psychiatric Consult o Medical o Socially & Developmentally Impaired Program o Crisis Intervention o Mental Health Counseling / Assessment o Other (c) The Community Corrections Center Lincoln 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. (d) The Community Corrections Center Lincoln 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. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.283	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Mental Health Response to Allegations of Sexual Abuse Protocol 3. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims / Survivors Policy 201.03, dated 7.31.2023 Interviews: 1. Nurse Administrator 2. Behavior Health Practitioner During the onsite review, review of Incarcerated Individual rosters and conversations with the PREA Compliance Manager demonstrated that reported incidents of sexual abuse involving identified victims occurred outside the applicable timeframe for the collection of forensic evidence. Regardless of the time elapsed since the alleged incident, each identified victim was offered mental health services upon reporting the sexual abuse. The interview with the Nurse Administrator and Behavioral Health Practitioner demonstrated that victims of sexual abuse are offered ongoing medical and mental health services following their return from a forensic examination and immediately following a reported incident of sexual abuse, as applicable. They further reported that alleged perpetrators are offered ongoing medical and mental health services following a sexual abuse incident. (a-c/g) The Community Corrections Center Lincoln PAQ states the facility does 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. The facility provided a mental health response to allegations of sexual assault to include the following protocols.

	· Upon the inmate's return to the facility (or after declining medical treatment), the inmate will be placed on fifteen-minute check status until evaluated by mental health staff. · During daytime business hours, medical staff (or security staff when medical is unavailable) will make both a verbal and written referral to mental health. · After daytime business hours, medical (or security) staff will contact the Mental Health Officer of the Day (MHOD) immediately. The MHOD will notify her/his Institutional Mental Health Supervisor (IMHS) who will arrange for the post-incident mental health assessment of the Inmate. · A mental health staff person will meet with the inmate within one working day after the referral is received to determine the need for crisis intervention and/or long-term counseling. (d) The Community Corrections Center Lincoln PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests. (c) The Community Corrections Center Lincoln PAQ states if pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. (f) The Community Corrections Center Lincoln PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. (h) This Community Corrections Center Lincoln PAQ states the facility does attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.286	**Sexual abuse incident reviews**

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Community Corrections Center Lincoln PAQ

2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025

3. Post Audit: Nebraska Department of Correctional Services, Sexual Abuse Incident Review (SAIR), dated 2026

4. Post Audit: Training Documentation

5. Post Audit: Memorandum, RE: PREA Standard 115.286 Sexual Assault Incident Review, dated 10.22.2026

Interviews:

1. Assistant Warden

The interview with the Assistant Warden demonstrated that the sexual abuse incident review team consists of the Warden, Assistant Warden, Intel, Captain/PREA Compliance Manager, Unit Administrator, and Point of Contact personnel. She stated that the team meets three times per week and additionally as needed. The Assistant Warden reported that the team reviews incident and misconduct reports and is responsible for ensuring that sexual abuse incident reviews are completed within 30 days of the conclusion of the investigation. She further stated that implementation and sustainment of recommendations resulting from incident reviews are overseen by the PREA Compliance Manager and PREA Coordinator, who track recommendations and identify the department responsible for implementation and ongoing sustainment.

Site Observations:

Review of investigative documentation demonstrated that sexual abuse incident reviews were not consistently completed within 30 days of the conclusion of the investigation, as required by the standard.

Corrective Action Plan:

· Review the current agency- and facility-level process for initiating, tracking, and completing sexual abuse incident reviews and develop a sustainable process to

	ensure reviews are completed within 30 days of the conclusion of the investigation. · Provide documented training to applicable staff responsible for initiating, completing, tracking, and/or providing oversight of sexual abuse incident reviews. Training shall include the applicable requirements of §115.286 and the established process for ensuring timely completion. · Appropriate facility personnel shall provide a memorandum outlining the sustainable action plan, including the process that will be utilized to track timely completion and the designated position responsible for ongoing oversight to ensure the requirements of §115.86 are consistently implemented and maintained. The memorandum shall be addressed to the DOJ PREA Auditor and include the date, author, and applicable standard. · Upload the memorandum, training documentation, and all other supporting documentation to the corresponding provision within the Online Audit System. Post audit, the facility provided two signed copies of the agency's Sexual Assault/ Abuse Policy, with Section NN, PREA Standard 115.86(a)–(b) for Secure Facilities and 115.286(a)–(b) for Community Facilities, Sexual Abuse Incident Reviews, highlighted. The signed documents demonstrate that the PREA Compliance Manager and PREA Coordinator completed additional training and reviewed the requirements associated with conducting sexual abuse incident reviews. Post audit, the agency PREA Coordinator provided a memorandum to the DOJ PREA Auditor with a sustainable action plan documentation demonstrating that the PREA Coordinator evaluated and revised the agency's Sexual Abuse Incident Review (SAIR) process to ensure reviews are completed within the required 30-day timeframe. The revised process establishes the conclusion of an investigation as the date the investigative findings are formally approved through the review process. The PREA Coordinator implemented procedures to minimize delays in returning completed investigations to the facility, notify the Facility PREA Compliance Manager when a SAIR is required, and establish a completion deadline not to exceed 30 days. The PREA Coordinator will monitor established timelines to ensure reviews are completed as required. Additionally, the agency revised the SAIR template to streamline documentation requirements, improve efficiency, and reduce the time necessary to complete incident reviews. Supporting documentation included the revised procedures and training curriculum provided to the Facility PREA Compliance Manager, demonstrating the agency's efforts to establish a consistent, timely, and sustainable incident review process. (a) The Community Corrections Center Lincoln 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 have been two criminal and five

	administrative investigations of alleged sexual abuse completed at the facility. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 32, section NN. 1., state, “ 1. The facility shall conduct a Sexual Abuse Incident Review at the conclusion of every sexual assault/abuse investigation for all substantiated and unsubstantiated allegations. II is not necessary to complete Incident Reviews for occurrences for allegations of sexual harassment. 2. The facility PREA Management Team is responsible for conducting the incident review and shall ordinarily meet within 30 days of the final review and closing of the investigation. The facility PREA compliance manager will oversee the PREA Management Team, which will include, at a minimum, one person from each of the following: a. Upper-level management officials (i.e., Deputy, Associate or Assistant Warden; Major; Captain; Unit Administrator) b. Line supervisors (i.e., Lieutenant, Sergeant, Unit Manager, Unit Case Manager) c. Investigative staff (i.e., Intelligence supervisor or other Intelligence staff) d. Medical or mental health staff Specific operational procedures regarding the PREA Management Teams are detailed in facility written Procedures. The facility provided a Nebraska Department of Correctional Services, Sexual Abuse Incident Review (SAIR). The review includes the following. · Facility / Case # · Date of Allegation / Date Allegation Reported · Alleged Victim / Alleged Perpetrator · Location of the Incident:/ How was the allegations reported · Type of Allegation: · If incident was Sexual Assault was a SANE conducted · If substantiated, was there team member or incarcerated individual discipline · Incident Review · The Facility assessed whether monitoring technology should be deployed or augmented to supplement supervision by staff. · Does the investigation indicate changes in Policy/Practice needed to better prevent, detect, or respond · Are there recommendations for improvement

	The SAIR is signed and dated by the following: · Line Supervisor / Title · Investigating team member / intel · Medical / Title · Mental Health / Title · PREA Compliance Manager / Title Upper-Level Management Review · Warden · Agency PREA Coordinator · Agency Security Administrator (b) The Community Corrections Center Lincoln PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents were three. Policy compliance can be found in provision (a) of this standard. (c) The Community Corrections Center Lincoln 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 and practice compliance can be found in provision (b) of this standard. (d) The Community Corrections Center Lincoln 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 Coordinator. (e) The Community Corrections Center Lincoln PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.

	Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.287	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Survey of Sexual Victimization, 2024 Interviews: 1. Captain / PREA Coordinator The interview with the PREA Coordinator demonstrated each facility PREA Compliance Manager provides her with annual sexual harassment and sexual abuse investigation numbers which are then aggregated across the agency for review and collection for the agency annual report. (a) The Community Corrections Center Lincoln 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. (b) The Community Corrections Center Lincoln PAQ states the agency aggregates incident-based sexual abuse at least annually. (c) The Community Corrections Center Lincoln PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

	The facility provided a Survey of Sexual Victimization as their data collection. (d) The Community Corrections Center Lincoln 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. (e) The Community Corrections Center Lincoln PAQ states the agency does contract with private facilities. The contracting sources identified in 115.42 are county contracts and the contract language for those facilities is inclusive of PREA Audit requirements. (f) The Community Corrections Center Lincoln PAQ states the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.288	**Data review for corrective action**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Nebraska Department of Correctional Services Annual PREA Assessment 2025 4. Community Corrections Center - Lincoln Annual PREA Assessment 2025 Interviews: 1. Captain / PREA Coordinator 2. Deputy Director of Prisons Operations

	The interview with both the PREA Coordinator and the Deputy Director of Prisons Operations demonstrated each allegation of sexual harassment and sexual abuse is reviewed at the facility and agency level, at the time of the incident. In addition, recommendations provided for corrective action are reviewed to ensure implementation takes place at the facility and agency level if appropriate. (a) The Community Corrections Center Lincoln PAQ states the agency reviews data collected and aggregated pursuant to §115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, response policies, and training, including: (a) identifying problem areas; (b) taking corrective action on an ongoing basis; and (c) preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. The facility provided a Community Confinement Center - Lincoln Annual PREA Assessment 2025 demonstrating the following is documented. Section I – Document Purpose Section II – Incarcerated Individual Population Overview Section III – Assessment of Team Member Section IV – Assessment of Video Monitoring/Technology Section V – Internal / External Oversight Section VI – PREA Investigations Section VIII – Data Comparison Section IX – Goals for 2026 The assessment is signed and dated by the PREA Compliance Manager, Warden and PREA Coordinator. (b) The Community Corrections Center Lincoln 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. The annual report provides progress in addressing sexual abuse. The facility provided the Nebraska Department of Correctional Services Annual PREA

	Assessment 2025. The report compares the following data from years 2020-2025. · Introduction of PREA o Assessment of NCDS Compliance with Federal PREA Standards o Victim Advocacy o Supervision and Monitoring o Investigation Tracking and Data Analysis o 2025 Investigation Executive Summary o Investigation Outcomes o Facility Performance Summary o Data submitted to the U.S. Department of Justice – Years 2020-2025 The annual PREA Assessment is signed by the PREA Coordinator, Agency Security Administrator and the Deputy Assistant Director. (c) The Community Corrections Center Lincoln PAQ states the agency makes its annual report readily available to the public, at least annually, through its website at https://corrections.nebraska.gov/about/prison-rape-elimination-act-. (d) The Community Corrections Center Lincoln 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. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.289	**Data storage, publication, and destruction**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	Document Review: 1. Community Corrections Center Lincoln PAQ 2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2025 3. Schedule 92, Nebraska Department of Correctional Services, dated 12.12.2011 (a/d) The Community Corrections Center Lincoln PAQ states the agency ensures that incident-based and aggregate data are securely retained. (b) The Community Corrections Center Lincoln 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 at https://corrections.nebraska.gov/about/prison-rape--elimination-act-0. (c) The Community Corrections Center Lincoln PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once. (b) This is the second audit cycle for Community Corrections Center Lincoln and the second year of the fourth audit cycle. (h) The Auditor was granted complete access to, and the ability to observe, all

	areas of the facility. (i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information). (m) The Auditor was permitted to conduct private interviews with residents. (n) Residents are permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel. Through such reviews, the facility meets the standard requirements.

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	(b) The agency has final audit reports published on its agency website. Through such reviews, the facility meets the standard requirements.

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

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

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

	perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	
	Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing?	yes
115.215 (e)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.215 (f)	**Limits to cross-gender viewing and searches**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.216 (a)	**Residents with disabilities and residents who are limited English proficient**	
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents	yes

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

	interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	
115.217 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of the services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two questions immediately above ?	yes
115.217 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have	yes

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

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

	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.)	
115.221 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (NA if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
115.221 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.221 (d)	**Evidence protocol and forensic medical examinations**	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these	yes

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

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

	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.231 (b)	**Employee training**	
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.231 (c)	**Employee training**	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.231 (d)	**Employee training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.232 (a)	**Volunteer and contractor training**	

	Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.232 (b)	**Volunteer and contractor training**	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.232 (c)	**Volunteer and contractor training**	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.233 (a)	**Resident education**	
	During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents?	yes
	During intake, do residents receive information regarding agency policies and procedures for responding to such incidents?	yes
115.233 (b)	**Resident education**	
	Does the agency provide refresher information whenever a resident is transferred to a different facility?	yes
115.233	**Resident education**	

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

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

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

115.241 (b)	**Screening for risk of victimization and abusiveness**	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.241 (c)	**Screening for risk of victimization and abusiveness**	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.241 (d)	**Screening for risk of victimization and abusiveness**	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following	yes

	criteria to assess residents for risk of sexual victimization: The resident’s own perception of vulnerability?	
115.241 (e)	**Screening for risk of victimization and abusiveness**	
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses?	yes
	In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?	yes
115.241 (f)	**Screening for risk of victimization and abusiveness**	
	Within a set time period not more than 30 days from the resident’s arrival at the facility, does the facility reassess the resident’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.241 (g)	**Screening for risk of victimization and abusiveness**	
	Does the facility reassess a resident’s risk level when warranted due to a: Referral?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Request?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Incident of sexual abuse?	yes
	Does the facility reassess a resident’s risk level when warranted due to a: Receipt of additional information that bears on the resident’s risk of sexual victimization or abusiveness?	yes
115.241 (h)	**Screening for risk of victimization and abusiveness**	
	Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.241 (i)	**Screening for risk of victimization and abusiveness**	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident’s detriment by staff or other residents?	yes
115.242 (a)	**Use of screening information**	
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.242 (b)	**Use of screening information**	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes
115.242 (c)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242	**Use of screening information**	

(d)		
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242 (e)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.242 (f)	**Use of screening information**	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.251 (a)	**Resident reporting**	
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.251 (b)	**Resident reporting**	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
115.251 (c)	**Resident reporting**	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from	yes

	third parties?	
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.251 (d)	**Resident reporting**	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.252 (a)	**Exhaustion of administrative remedies**	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.252 (b)	**Exhaustion of administrative remedies**	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.252 (c)	**Exhaustion of administrative remedies**	
	Does the agency ensure that: a resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.252	**Exhaustion of administrative remedies**	

(d)		
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension is 70 days per 115.252(d)(3)), does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.252 (e)	**Exhaustion of administrative remedies**	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident’s decision? (N/A if agency is exempt from this standard.)	yes
115.252 (f)	**Exhaustion of administrative remedies**	
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is	yes

	exempt from this standard.)	
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.252 (g)	**Exhaustion of administrative remedies**	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.253 (a)	**Resident access to outside confidential support services**	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility enable reasonable communication between residents and these organizations, in as confidential a manner as possible?	yes

115.253 (b)	**Resident access to outside confidential support services**	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.253 (c)	**Resident access to outside confidential support services**	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.254 (a)	**Third party reporting**	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes
115.261 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.261 (b)	**Staff and agency reporting duties**	

	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.261 (c)	**Staff and agency reporting duties**	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform residents of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.261 (d)	**Staff and agency reporting duties**	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.261 (e)	**Staff and agency reporting duties**	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators?	yes
115.262 (a)	**Agency protection duties**	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.263 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.263 (b)	**Reporting to other confinement facilities**	

	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.263 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.263 (d)	**Reporting to other confinement facilities**	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.264 (a)	**Staff first responder duties**	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.264 (b)	**Staff first responder duties**	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any	yes

	actions that could destroy physical evidence, and then notify security staff?	
115.265 (a)	**Coordinated response**	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.266 (a)	**Preservation of ability to protect residents from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.267 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.267 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.267 (c)	**Agency protection against retaliation**	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report	yes

	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?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.267 (d)	**Agency protection against retaliation**	
	In the case of residents, does such monitoring also include periodic status checks?	yes

115.267 (e)	**Agency protection against retaliation**	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.271 (a)	**Criminal and administrative agency investigations**	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.221(a).)	yes
115.271 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234?	yes
115.271 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	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
115.271 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.271 (e)	**Criminal and administrative agency investigations**	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.271 (f)	**Criminal and administrative agency investigations**	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.271 (g)	**Criminal and administrative agency investigations**	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.271 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.271 (i)	**Criminal and administrative agency investigations**	
	Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.271 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes

115.271 (l)	**Criminal and administrative agency investigations**	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).)	yes
115.272 (a)	**Evidentiary standard for administrative investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.273 (a)	**Reporting to residents**	
	Following an investigation into a resident's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.273 (b)	**Reporting to residents**	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.273 (c)	**Reporting to residents**	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the	yes

	resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (d)	**Reporting to residents**	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.273 (e)	**Reporting to residents**	
	Does the agency document all such notifications or attempted notifications?	yes
115.276 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.276	**Disciplinary sanctions for staff**	

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

115.278 (a)	**Disciplinary sanctions for residents**	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, are residents subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.278 (b)	**Disciplinary sanctions for residents**	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
115.278 (c)	**Disciplinary sanctions for residents**	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.278 (d)	**Disciplinary sanctions for residents**	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits?	yes
115.278 (e)	**Disciplinary sanctions for residents**	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.278 (f)	**Disciplinary sanctions for residents**	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.278 (g)	**Disciplinary sanctions for residents**	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.282 (a)	**Access to emergency medical and mental health services**	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.282 (b)	**Access to emergency medical and mental health services**	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.282 (c)	**Access to emergency medical and mental health services**	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.282 (d)	**Access to emergency medical and mental health services**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.283 (a)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile	yes

	facility?	
115.283 (b)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.283 (c)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.283 (d)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (e)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.283 (f)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.283 (g)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Are treatment services provided to the victim without financial	yes

	cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	
115.283 (h)	**Ongoing medical and mental health care for sexual abuse victims and abusers**	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.286 (a)	**Sexual abuse incident reviews**	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.286 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.286 (c)	**Sexual abuse incident reviews**	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.286 (d)	**Sexual abuse incident reviews**	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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	yes

	should be deployed or augmented to supplement supervision by staff?	
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.286 (e)	**Sexual abuse incident reviews**	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.287 (a)	**Data collection**	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.287 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.287 (c)	**Data collection**	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.287 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.287 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	yes

115.287 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.288 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.288 (b)	**Data review for corrective action**	
	Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?	yes
115.288 (c)	**Data review for corrective action**	
	Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.288 (d)	**Data review for corrective action**	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety	yes

	and security of a facility?	
115.289 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
115.289 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.289 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.289 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	**Frequency and scope of audits**	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes

	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with residents?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the 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