

# PREA Facility Audit Report: Final

**Name of Facility:** Community Corrections Center Omaha

**Facility Type:** Community Confinement

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 12/05/2025

## 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:** 12/05/2025

## AUDITOR INFORMATION

**Auditor name:** Murray, Karen

**Email:** kdmconsults1@gmail.com

**Start Date of On-Site Audit:** 10/29/2025

**End Date of On-Site Audit:** 10/30/2025

## FACILITY INFORMATION

**Facility name:** Community Corrections Center Omaha

**Facility physical address:** 2320 Avenue J, Omaha, Nebraska - 68110

**Facility mailing address:**

## Primary Contact

<b>Name:</b>	Rhiannon Kelley
<b>Email Address:</b>	Rhiannon.kelley@nebraska.gov
<b>Telephone Number:</b>	402-522-7032

Facility Director	
<b>Name:</b>	James Jansen
<b>Email Address:</b>	.jansen@nebraska.gov
<b>Telephone Number:</b>	402-921-0177

Facility PREA Compliance Manager	
<b>Name:</b>	Rhiannon Kelley
<b>Email Address:</b>	rhiannon.kelley@nebraska.gov
<b>Telephone Number:</b>	402-522-7032
<b>Name:</b>	David Erickson
<b>Email Address:</b>	david.erickson@nebraska.gov
<b>Telephone Number:</b>	402-522-7024

Facility Health Service Administrator On-Site	
<b>Name:</b>	Christopher Cleaver
<b>Email Address:</b>	christopher.cleaver@nebraska.gov
<b>Telephone Number:</b>	402-595-396490

Facility Characteristics	
<b>Designed facility capacity:</b>	90
<b>Current population of facility:</b>	160
<b>Average daily population for the past 12 months:</b>	173

<b>Has the facility been over capacity at any point in the past 12 months?</b>	No
<b>What is the facility's population designation?</b>	Men/boys
<b>Age range of population:</b>	21-75
<b>Facility security levels/resident custody levels:</b>	Community A (4A) and Community B (4B)
<b>Number of staff currently employed at the facility who may have contact with residents:</b>	40
<b>Number of individual contractors who have contact with residents, currently authorized to enter the facility:</b>	13
<b>Number of volunteers who have contact with residents, currently authorized to enter the facility:</b>	149

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

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	
<b>Email Address:</b>	
<b>Telephone Number:</b>	

## 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:

6

- 115.211 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
- 115.231 - Employee training
- 115.252 - Exhaustion of administrative remedies
- 115.267 - Agency protection against retaliation
- 115.273 - Reporting to residents
- 115.283 - Ongoing medical and mental health care for sexual abuse victims and abusers

#### Number of standards met:

35

#### 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:	2025-10-29
2. End date of the onsite portion of the audit:	2025-10-30

#### Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Agency website third party reporting and agency PREA Hotline

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	179
15. Average daily population for the past 12 months:	159
16. Number of inmate/resident/detainee housing units:	3
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

<b>23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	179
<b>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:</b>	16
<b>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:</b>	0
<b>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:</b>	16
<b>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:</b>	16
<b>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:</b>	16
<b>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:</b>	7

<b>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:</b>	1
<b>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:</b>	0
<b>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:</b>	179
<b>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:</b>	0
<b>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):</b>	No text provided.
<b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b>	
<b>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:</b>	40
<b>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:</b>	0

<b>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:</b>	1
<b>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:</b>	No text provided.
<b>INTERVIEWS</b>	
<b>Inmate/Resident/Detainee Interviews</b>	
<b>Random Inmate/Resident/Detainee Interviews</b>	
<b>40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	10
<b>41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b>	<input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
<b>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b>	The facility provided the Auditor rosters by targeted categories and housing unit. Once targeted inmates were chosen, random inmates were selected by housing unit.
<b>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No



<b>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):</b>	No text provided.
<b>Targeted Inmate/Resident/Detainee Interviews</b>	
<b>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	10
<p>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".</p>	
<b>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:</b>	3
<b>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:</b>	0

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>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).</b></p>	<p>Review of rosters and interviews with specialized staff demonstrated that this category of inmate did not appear to be residing in the facility at the time of the onsite review.</p>
<p><b>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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>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).</b></p>	<p>Review of rosters and interviews with specialized staff demonstrated that this category of inmate did not appear to be residing in the facility at the time of the onsite review.</p>
<p><b>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:</b></p>	<p>0</p>

<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>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).</b></p>	<p>Review of rosters and interviews with specialized staff demonstrated that this category of inmate did not appear to be residing in the facility at the time of the onsite review.</p>
<p><b>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:</b></p>	<p>0</p>
<p><b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b></p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p><b>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).</b></p>	<p>Review of rosters and interviews with specialized staff demonstrated that this category of inmate did not appear to be residing in the facility at the time of the onsite review.</p>
<p><b>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:</b></p>	<p>3</p>

<b>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:</b>	1
<b>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:</b>	0
<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<b>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).</b>	The facility did not have a sexual harassment or sexual abuse incident in the past 12 months.
<b>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:</b>	179
<b>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:</b>	0

<b>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</b>	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
<b>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).</b>	The facility does not have restricted housing.
<b>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b>	No text provided.
<b>Staff, Volunteer, and Contractor Interviews</b>	
<b>Random Staff Interviews</b>	
<b>58. Enter the total number of RANDOM STAFF who were interviewed:</b>	12
<b>59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b>	<input type="checkbox"/> Length of tenure in the facility  <input checked="" type="checkbox"/> Shift assignment  <input checked="" type="checkbox"/> Work assignment  <input checked="" type="checkbox"/> Rank (or equivalent)  <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)  <input type="checkbox"/> None
<b>60. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No

<b>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):</b>	No text provided.
<b>Specialized Staff, Volunteers, and Contractor Interviews</b>	
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.	
<b>62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	10
<b>63. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>65. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>66. Were you able to interview the PREA Compliance Manager?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No  <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

**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

	<input type="checkbox"/> Other
<b>68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>a. Enter the total number of CONTRACTORS who were interviewed:</b>	1
<b>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</b>	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
<b>70. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	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

<b>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).</b>	No text provided.
<b>Documentation Sampling</b>	
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.	
<b>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?</b>	<input checked="" type="radio"/> Yes  <input type="radio"/> No
<b>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b>	No text provided.
<b>SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY</b>	
<b>Sexual Abuse and Sexual Harassment Allegations and Investigations Overview</b>	
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
<b>Inmate-on-inmate sexual abuse</b>	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0
<b>Total</b>	0	0	0	0

**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
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	0

## Sexual Abuse and Sexual Harassment Investigation Outcomes

### Sexual Abuse Investigation Outcomes

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

#### 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	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

### Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<b>Inmate-on-inmate sexual harassment</b>	0	0	0	0
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	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:**

0

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

The facility did not have a sexual harassment or sexual abuse allegation in the past 12 months.

<b>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)
<b>Inmate-on-inmate sexual abuse investigation files</b>	
<b>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
<b>Staff-on-inmate sexual abuse investigation files</b>	
<b>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b>	0
<b>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

<b>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
<b>Sexual Harassment Investigation Files Selected for Review</b>	
<b>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>a. Explain why you were unable to review any sexual harassment investigation files:</b>	The facility did not have a sexual harassment or sexual abuse allegation in the past 12 months.
<b>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
<b>Inmate-on-inmate sexual harassment investigation files</b>	
<b>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

<b>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
<b>101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	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
<ul style="list-style-type: none"> <li>Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>Does Not Meet Standard (requires corrective actions)</li> </ul>
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.211	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> <li>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>Nebraska Department of Correctional Services Organizational Chart, not dated</li> <li>CCC-O Organizational Chart, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Random Inmates</li> <li>Targeted Inmates</li> </ol>

3. Corporals
4. Case Workers
5. Administrative Programs Officer / PREA Compliance Manager
6. Captain / PREA Coordinator
7. Warden
8. Deputy Assistant Director / Agency Head

Interviews with inmates, staff, and one contractor; review of inmate and personnel files; review of facility and agency protocols; and a tour of the facility demonstrated the requirements of PREA are integrated into daily operations at all levels of the facility. Inmates and staff interviewed were able to clearly describe PREA practices and protocols consistent with the agency's Sexual Assault/Abuse Policy. The PREA Coordinator and PREA Compliance Manager each affirmed they are afforded adequate time to complete their PREA responsibilities and described sound systems in place to monitor ongoing compliance across operations.

Inmates provided unsolicited comments reflecting a strong culture of safety, respect, professionalism, and consistent messaging. Inmates reported feeling sexually safe in the facility, described searches as conducted professionally by staff, and confirmed mental health services are readily accessible. Inmates expressed strong trust in staff, stating staff address concerns quickly, maintain respectful communication, and consistently check in regarding safety and comfort. Inmates described female staff announcing before entering bathrooms, respectful treatment of transgender inmates, thorough and repeated assessments, and a lack of tension or threat within housing units. Several inmates spoke positively about staff professionalism, grievance accessibility, and the overall impact of PREA on improving safety within the correctional system.

Staff provided unsolicited comments that further demonstrated a well-developed culture grounded in professionalism, awareness, and zero tolerance. Staff described being consistently available to inmates to address concerns before they escalate, emphasized that "everyone is responsible for reporting," and stated they help educate inmates on LGBTI topics to promote understanding. Staff reported addressing inmates by their chosen pronouns, remaining cautious and respectful of inmate preferences, and ensuring professional, appropriate interactions at all times. Staff noted that the facility places significant emphasis on PREA, highlighted consistent management support, described strong collaboration with outside providers, and affirmed sensitivity to inmate needs, including agency-wide notifications regarding transgender inmates' pronouns and presentation preferences.

The PREA Coordinator demonstrated strong oversight of facility PREA Compliance Managers through regular email communication, Webex meetings, and frequent onsite visits to ensure accountability and consistency across facilities.

Site observations further supported the facility's integration of PREA into daily practice. Colored audit notices and agency "How to Report" postings were observed in each hallway, visitation area, administrative suite, dining area, and maintenance department. Postings included both internal and external reporting information in clear, accessible formats. Although unannounced rounds are not required for community confinement facilities, this facility had multiple unannounced rounds documented in logbooks in red ink by Case Managers, the Assistant Warden, and the Warden.

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

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 5, section 1. A. 1., states, "NDCS will seek to enhance the prevention of prison sexual abuse/assault and sexual harassment by maintaining a zero-tolerance standard for all sexual assault/abuse and sexual harassment on and by inmates. Protecting inmates and safeguarding communities of prison sexual assault/abuse and sexual harassment is a top priority."

(b) The Community Corrections Center Omaha PAQ states The PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its community confinement facilities. The position of the PREA Coordinator in the agency's organizational structure. NDCS has a designated agency wide PREA Coordinator who reports to the NDCS Security Administrator.

The facility provided an organizational chart from the Nebraska Department of

	<p>Correctional Services. The chart shows that the PREA Captain/Coordinator is included in the agency's structure and reports directly to the Agency Security Administrator, who in turn reports to the Chief of Operations.</p> <p>The facility provided a CCC-O Organizational Chart. The organizational chart demonstrates the Administrative Programs Officer serves as the PREA Compliance Manager.</p> <p>The facility exceeds the requirements of the standard by embedding PREA principles into routine operations, maintaining high visibility of reporting information, and fostering a culture in which inmates and staff consistently demonstrate awareness, professionalism, and accountability. The proactive oversight of the PREA Coordinator, combined with consistent messaging, visible postings, and demonstrated staff engagement, reflects a commitment that goes beyond basic compliance and contributes to a safe, respectful, and prevention-focused facility environment.</p>
--	---

115.212	Contracting with other entities for the confinement of residents
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Captain / PREA Coordinator</li> </ol> <p>The interview with the PREA Coordinator demonstrated that the agency does not currently house inmates through contracting entities; however, contracts remain in place should those services be required in the future.</p> <p>(a-b) The Community Corrections Center Omaha PAQ states the agency does not currently contract with private agencies for confinement services of their inmates.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>

115.213	Supervision and monitoring
	<p data-bbox="280 185 981 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="280 264 564 297"><b>Auditor Discussion</b></p> <p data-bbox="280 342 544 376">Document Review:</p> <ol data-bbox="280 409 1449 745" style="list-style-type: none"> <li data-bbox="280 409 954 443">1. Community Corrections Center Omaha PAQ</li> <li data-bbox="280 488 1409 555">2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li data-bbox="280 600 1449 667">3. Community Correctional Center-Omaha Annual Review of Staffing Assignment and Video Monitoring, dated 12.2024</li> <li data-bbox="280 712 1193 745">4. Critical Staffing Memorandum, dated 9.4.2025 and 9.7.2025</li> </ol> <p data-bbox="280 857 437 891">Interviews:</p> <ol data-bbox="280 925 730 1249" style="list-style-type: none"> <li data-bbox="280 925 584 958">1. Random Inmates</li> <li data-bbox="280 1003 588 1037">2. Targeted Inmates</li> <li data-bbox="280 1081 480 1115">3. Corporals</li> <li data-bbox="280 1149 730 1182">4. Captain / PREA Coordinator</li> <li data-bbox="280 1216 451 1249">5. Warden</li> </ol> <p data-bbox="280 1283 1401 1406">Interviews with inmates demonstrated that female staff announce their gender before entering bathrooms. One inmate stated females do a really good job announcing before coming into our bathroom or bedrooms.</p> <p data-bbox="280 1518 1449 1630">Interviews with corporals demonstrated that announcements are made at the beginning of each shift indicating that both male and female staff are on duty, and that female staff announce themselves before entering a bathroom.</p> <p data-bbox="280 1742 1465 1854">The interview with the PREA Coordinator demonstrated 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 Plans.</p> <p data-bbox="280 1966 1430 2078">The interview with the Warden demonstrated he is aware of the staffing plan and consistently reviews it with the PREA Coordinator and the PREA Compliance Manager.</p>

Site Observation:

During the tour, cross-gender announcements were made each time a wing or restroom was entered.

(a) The Community Corrections Center Omaha PAQ states the facility requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of residents is 176. 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 173.

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

- a. Generally accepted adult correctional institution practice.
- b. Any judicial findings of inadequacy.
- c. Any findings of inadequacy from federal investigative bodies.
- d. Any findings of inadequacy from internal or external oversight bodies.
- e. All components of the facility's physical plant, (including blind spots or areas where team members or inmates may be isolated.)
- f. The composition of the resident population (i.e.-gender ratios, risk/need of residents, physical size, Sexual Aggressive Behavior (SAB), Vulnerability to Victimization (VV).
- g. The number and placement of supervisory staff.
- h. Programs occurring on shifts.
- i. Any applicable state or local laws, regulations or standards.
- j. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
- k. Any other relevant factors.

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

(b) The Community Corrections Center Omaha PAQ states the facility documents each time the staffing plan is not complied with, the facility documents and justifies deviations. The facility stated the most common reason for deviating from the staffing plan in the last 12 months was sick leave.

The facility provided a Critical Staffing Memorandum, Incident Type: Below minimum staffing level. This report is documenting staffing deviations that occurred on a particular shift and the facilities coverage plan at 1400-2200 hours.

(c) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 8, section 3., states, "Each facility shall implement a policy and practice of having intermediate-level and higher-level supervisors conduct and document unannounced rounds, on all shifts, to identify and deter team members from sexual abuse/assault and sexual harassment. Specific expectations are detailed in facility written procedures.

Team members are strictly prohibited from alerting other team members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

On an annual basis each facility compliance manager will complete an annual PREA assessment based on data from the previous calendar year. This assessment will be submitted to the captain/PREA coordinator on or before February 1st each year."

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



	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"><li>1. Community Corrections Center Omaha PAQ</li><li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li><li>3. Nebraska Department of Correctional Services, Searches Pre-Service Course Outline, dated 8.20.2024</li></ol> <p>Interviews:</p> <ol style="list-style-type: none"><li>1. Random Inmates</li><li>2. Targeted Inmates</li><li>3. Corporals</li><li>4. Case Workers</li><li>5. Captain / PREA Coordinator</li><li>6. Warden</li><li>7. Deputy Assistant Director / Agency Head</li></ol> <p>Interviews with inmates demonstrated each had experienced a pat search and/or urinalysis at the facility and that those processes were conducted respectfully by all staff. When asked if they felt sexually safe in the program, all inmates responded affirmatively.</p> <p>Staff interviews demonstrated that cross-gender search procedures are trained annually through in-person in-service sessions. Staff stated they would not conduct searches on transgender inmates for the purpose of determining gender.</p> <p>The interview with the PREA Coordinator demonstrated the agency's current practice for searching transgender inmates is for searches to be conducted by staff of the same gender as documented on the inmate's driver's license and birth certificate.</p> <p>Site Observation:</p>

During the tour, the auditor observed the area where searches and urinalysis testing are conducted. Inmates walk through a metal detector and are then escorted to a restroom adjacent to the entryway and dayroom. Searches and urinalysis testing occur inside the restroom, out of camera view, with one staff member present.

(a) Community Corrections Center Omaha 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. In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of residents that did not involve exigent circumstances or were performed by non-medical staff was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 8, 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) This provision is not applicable as the facility does not have female residents.

(b) Community Corrections Center Omaha 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 facility does not house female inmates. Policy compliance can be found in provision (a) of this standard.

(d) Community Corrections Center Omaha 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 inmates 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 inmate housing unit. Written notice to inmates 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 inmate housing unit or when a team member of the opposite gender enters an inmate housing unit where inmate 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 inmate 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, inmate altercation, inmate/team member assault, etc.) the announcement of cross gender team members is not necessary."

(e) The Community Corrections Center Omaha PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Such searches (described in 115.215(e)-1) occurred in the past 12 months was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 9, section E. 4., states, "NDCS shall not search or physically examine a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If an inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.

	<p>(f) The Community Corrections Center Omaha PAQ states 100% of all security staff who received training on conducting cross-gender pat-down searches and searches of transgender and intersex residents in a professional and respectful manner, consistent with security needs.</p> <p>The facility provided a Nebraska Department of Correctional Services, Searches Pre-Service Course Outline. The course description includes the following.</p> <ol style="list-style-type: none"> <li>1. Define contraband.</li> <li>2. Explain the purpose of searches.</li> <li>3. List the four (4) most common types of searches.</li> <li>4. Describe professional conduct during searches.</li> <li>5. Explain the importance of professional conduct during searches.</li> <li>6. Identify four (4) ways to minimize the possibility of transmission of infectious disease when doing searches.</li> <li>7. List, in order, the six (6) elements of a search.</li> <li>8. Explain the limitations for cross-gender searches.</li> <li>9. Explain the procedure for searching Official Visitors to correctional facilities.</li> <li>10. Demonstrate a pat search within 45 seconds.</li> <li>11. Describe when you would modify a Pat Search.</li> <li>12. Define a Safety Search and list the three (3) additional elements of a safety search.</li> <li>13. Identify the four (4) additional elements of an area search.</li> <li>14. List additional elements of a room search.</li> <li>15. Demonstrate a Room Search / Area Search.</li> </ol> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.216</b>	<b>Residents with disabilities and residents who are limited English proficient</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

## Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Language Line Services Inc Service Contract Amendment, dated 1.1.2025 – 8.16.2027
4. Zero Tolerance for Sexual Abuse and Sexual Harassment flyers, English and Spanish, not dated
5. Nebraska Department of Correctional Services, Sexual Assault Awareness Brochure, Spanish, dated 7.2024

## Interviews:

1. Targeted Inmates
2. Unit Case Worker
3. Deputy Assistant Director / Agency Head

Interviews with three ADA inmates demonstrated each was able to read, access, and understand the PREA information and education provided to them. Each inmate articulated that they had full use of their tablets, could access inmate phones, and described where reporting posters were located throughout the facility.

Interviews with staff demonstrated that inmates are not used for translation services. Staff were aware they could utilize another staff member to translate or access translation service information available on the facility's public drive.

The interview with the Unit Case Worker demonstrated interpreters are used for non-English speaking inmates. PREA education is presented at a slower pace and re-explained for individuals who learn more slowly, with comprehension verified through follow-up questions.

The interview with the Deputy Assistant Director demonstrated disabilities are identified during the intake process and corresponding accommodations are implemented. Developmentally delayed inmates are housed in single cells and provided intensive mental health services. Geriatric inmates are moved to a

designated ward, and ADA placements are determined through the facility's classification process for individuals with physical disabilities. PREA information is communicated both verbally and in writing, and the facility provides access to TTY devices, translation lines, and on-site interpreters to ensure accessibility for all inmates.

Site Observation:

During the tour, "How to Report" postings in both English and Spanish were observed throughout the facility and near each inmate phone.

(a) The Community Corrections Center Omaha 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. 1-2., state,

1. "Information will be provided in formats accessible to all inmates, 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 inmates who have limited reading skills and who are limited English proficient. (This provision is also listed in PREA Standard secure facility 115.33 / community facility 115.233 Inmate Education.) (ACI-3D-09).

2. Reasonable steps will be taken to ensure meaningful access to information is provided to inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. Reliance will not be placed on inmate interpreters, inmate readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety. (ACI-3D09)"

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 inmates, 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 inmates who have limited reading skills and who are limited English proficient."

The facility provided an Americans with Disabilities Act (ADA) Pre-Service PowerPoint. The PowerPoint includes the following learning objectives.

- The Purpose of the ADA
- NDCS Policies
- Identify who is protected?
- Major Life Activities
- What Constitutes a Disability?
- Title I – Employment
- Explain how employees request reasonable accommodations
- Explain how NDCS accommodates employee injuries and illnesses
- Title II – State and Local Public Services
- Title II – Applicability to Correctional Programs and Services
- Title II – Reasonable Modification(s)
- Explain how inmates request reasonable accommodations
- Title II – Person First Inclusive Language
- Title II – Other Considerations and Person First Language
- Conclusion

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 NDCS English and Spanish Hotline posters providing inmates with information on how to report to include internal and external reporting information.

(b) The Community Corrections Center Omaha 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 Omaha 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 inmates who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately and impartially, both receptively and expressively, using any necessary specialized vocabulary. Reliance will not be placed on inmate interpreters, inmate readers or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety.

The facility provided a Language Line Services Inc Service Contract Amendment. The contract appears to be current and is dated 1.1.2025 through 8.16.2027.

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



115.217	Hiring and promotion decisions
	<p data-bbox="280 185 981 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="280 264 564 297"><b>Auditor Discussion</b></p> <p data-bbox="280 342 544 376">Document Review:</p> <ol data-bbox="280 409 1449 891" style="list-style-type: none"> <li data-bbox="280 409 954 443">1. Community Corrections Center Omaha PAQ</li> <li data-bbox="280 488 1410 566">2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li data-bbox="280 600 1449 678">3. Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, dated 7.31.2024</li> <li data-bbox="280 712 879 745">4. Reference Check form, dated 11.2013</li> <li data-bbox="280 779 1278 813">5. Employment Reference Check (by other agency), dated 1.26.2022</li> <li data-bbox="280 846 1134 891">6. Post Audit: Institutional Reference Checks (screenshots)</li> </ol> <p data-bbox="280 1003 437 1037">Interviews:</p> <ol data-bbox="280 1070 722 1104" style="list-style-type: none"> <li data-bbox="280 1070 722 1104">1. Human Resource Assistant</li> </ol> <p data-bbox="280 1149 1458 1350">The interview with the Human Resource Assistant demonstrated that all applicants and contractors must successfully pass a criminal history background check before being granted access to inmates and again during the promotion process. The Human Resource Assistant stated the Central Office provides each facility with an annual list identifying employees due for five-year criminal background checks.</p> <p data-bbox="280 1462 1477 1742">She further stated that applicants who have been involved in a sexual harassment incident may be considered for employment only after review and approval from the Central Office. All applicants and contractors complete administrative adjudication questions during both the hiring and promotion processes. The Human Resource Assistant also stated the agency maintains an affirmative duty policy requiring immediate reporting by employees and that she completes institutional reference checks on applicable applicants and former employees when requested.</p> <p data-bbox="280 1854 528 1888">Site Observation:</p> <p data-bbox="280 1899 1474 2101">Utilization of the PREA Audit – Adult Prisons &amp; Jails Documentation Review – Employee File/Records template demonstrated that twenty-three of twenty-three employee files and one contractor file contained documentation of criminal background checks completed upon hire and every five years thereafter. The facility also demonstrated that administrative adjudication questions were completed</p>

during both the hiring and promotion processes and that institutional reference checks were requested and completed for applicable applicants.

(a) The Community Corrections Center Omaha 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 10, section G., states, "NDCS shall not hire, promote or enlist the services of any contractor who may have contact with inmates 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 Omaha 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) The Community Corrections Center Omaha PAQ states the agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse. In the past 12 months, the number of persons hired who may have contact with residents who have had criminal background record checks is three.

(d) The Community Corrections Center Omaha PAQ states the agency policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with residents. In the past 12 months, the number of contracts for services where criminal background record checks were conducted on all staff covered in the contract who might have contact with residents is seven.

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

Nebraska Department of Correctional Services, Team Member Selection Policy 112.03, page 14, section II, 4-5., state,

4. "NDCS will conduct security checks of current team members every five years.

5. Additional background checks and financial background checks may be completed for certain identified NDCS positions at the discretion of the human talent director."

The facility provided a Human Resource Database report demonstrating the agency has a system to ensure criminal background checks are completed every five years.

(g) The Community Corrections Center Omaha PAQ states 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."

(h) The facility provided an Employment Reference Check (by other agency). The document demonstrates the facility answers Administrative Adjudication questions for other institutional employers.

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

<b>115.218</b>	<b>Upgrades to facilities and technology</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. Community Corrections Center-Omaha 2025 Floor Plan – Camera Schematic</li> <li>4. Camera Listing, dated 9.3.2025</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Warden</li> <li>2. Deputy Assistant Director / Agency Head</li> </ol> <p>The interview with the Warden demonstrated that additional cameras have been installed since the last PREA audit to enhance coverage of the facility’s exterior areas.</p> <p>The interview with the Deputy Assistant Director demonstrated that the agency recently completed construction of a new building on an existing facility site and is preparing to break ground on a new facility. The Deputy Assistant Director stated the engineering team is well-versed in PREA requirements and designs facilities to eliminate blind spots and maximize lines of sight. Cameras are positioned at multiple angles, and facial recognition technology is currently being implemented to further strengthen facility security and monitoring.</p> <p>(a) The Community Corrections Center Omaha PAQ states the agency has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p>

	<p>(b) The Community Corrections Center Omaha PAQ states, the agency/facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.</p> <p>The facility provided a Community Corrections Center-Omaha 2025 Floor Plan – Camera's schematic. The map designates camera placement throughout the facility.</p> <p>The facility provided a camera listing demonstrating the placement of each of the facility's 47 cameras which aligns the camera schematic provided.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

115.221	Evidence protocol and forensic medical examinations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. Nebraska Medical Sexual Assault Protocol, Nebraska Attorney General's Office, dated 7.2019</li> <li>4. Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, not dated</li> <li>5. Nebraska Department of Correctional Services Memorandum, RE: Community Hospital MOU, dated 9.8.2025</li> <li>6. Advocacy Attempt Memorandum, dated 12.11.2024</li> <li>7. Nebraska Revised Statute 81-2005</li> </ol> <p>Interviews:</p>

1. Administrative Nurse
2. Associate Director of Nursing

The interview with medical staff demonstrated both are aware of the signs and symptoms of sexual abuse and would immediately report any concerns to custody staff while remaining with the victim to ensure safety until custody personnel arrive. The Administrative Nurse stated that forensic exams are performed at the Women's Methodist Medical Center and that this information is included in the facility's nursing protocols.

Site Observation:

The facility has not experienced a sexual assault allegation or required a forensic medical exam within the past twelve months.

(a) The Community Corrections Center Omaha 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). If another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility is the Nebraska State Patrol.

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

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 Omaha 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 zero. The number of SANEs/SAFEs during the past 12 months was zero. The number of exams performed by a qualified medical practitioner during the past 12 months was zero.

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."

The facility provided a Nebraska Department of Correctional Services Memorandum from the Captain / PREA Coordinator to the PREA Auditor, regarding the Community Hospital MOU 115.21, stating, "NDCS has not had a Memorandum of Understanding with the community hospital since 2016. This is due to the Community Hospitals that we utilize are required to have a SANE program that consists of SANE nurses that are available to conduct the SANE examinations. The State Sane Coordinator conducts the training for all Nebraska Hospitals.

(d) The Community Corrections Center Omaha 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.

In the event that an inmate is sent to the community hospital for a SANE examination, the facility shift supervisor will ask the inmate if they would like a victim advocate present at the hospital for support through the SANE examination. If the inmate 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. 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 an advocacy attempts from the years 2022, 2023, and 2024.

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

(f) The Community Corrections Center Omaha PAQ states if the agency is not responsible for investigating allegations of sexual abuse and relies on another



	<p>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 standard.</p> <p>(g) The agency provided Nebraska Revised Statute 81-2005. This statute demonstrates the Nebraska State Patrol’s commitment to investigating sexual abuse allegations within their confinement facilities. Section (3) states the following, “To make arrests upon view and without warrant for any violation committed in their presence of any provision of the laws of the state relating to misdemeanors or felonies, if and when designated or called upon to do as provided by law.”</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

115.222	Policies to ensure referrals of allegations for investigations
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> <li>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Investigator / Assistant Warden</li> </ol> <p>The interview with the Investigator demonstrated that all allegations of sexual harassment or sexual abuse are taken seriously and investigated regardless of the source or nature of the allegation.</p> <p>Site Observation:</p> <p>The facility has not experienced an allegation of sexual harassment or sexual abuse within the past twelve months.</p>

(a) The Community Corrections Center Omaha 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 zero allegations of sexual abuse and sexual harassment that was received.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 11-12, section J, 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 agency 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."

(b/c) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 24, section EE. 1, states, "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 the allegation is determined to be opened for investigation, the captain/PREA coordinator will assign the investigation a case number in the Investigator's Case Management data base and forward the case log and initial reports to the PREA compliance manager at the respective facility to be assigned to a PREA investigator."

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

	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"><li>1. Community Corrections Center Omaha PAQ</li><li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li><li>3. Nebraska Department of Correctional Services Sexual Assault, Sexual Abuse and Sexual Harassment PowerPoint Presentation, dated 2025</li><li>4. Nebraska Department of Correctional Services Sexual Assault-Abuse Pre-Service PowerPoint Presentation, dated 11.4.2024</li><li>5. PREA of 2003: Information For Those With Direct And Indirect Contact With Inmates, Training Acknowledgment, not dated</li><li>6. PREA Monthly Training Refreshers, January-December, dated 2024-2025</li></ol> <p>Interviews:</p> <ol style="list-style-type: none"><li>1. Corporals</li><li>2. Specialized Personnel</li><li>3. Administrative Programs Officer / PREA Coordinator</li><li>4. Captain / PREA Coordinator</li></ol> <p>Interviews with Corporals demonstrated each was aware of and had received initial, annual, and documented monthly refresher PREA trainings during shift change. Employees affirmed the training includes information on employee and inmate rights, preventative measures, detection, reporting, and first responder protocols.</p> <p>The interview with the PREA Coordinator demonstrated she distributes monthly refresher trainings to each PREA Compliance Manager, who then disseminate policy revisions, updated procedures, and PREA refresher materials to all facility employees.</p> <p>Site Observation:</p> <p>Review of twenty-three personnel files demonstrated that all staff interviewed had completed PREA training upon hire and annually thereafter.</p>

(a) The Community Corrections Center Omaha 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 12-13, section K., states,

1. "Staff Training and Development will offer training (both pre-service and in-service classes) for all team members who may have contact with inmates based on the contents of this policy and its attachments. Lesson plans will be based on this policy and its attachments and the federal PREA standards and any subsequent revisions thereof.

2. 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 inmates:

(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) Inmates' right to be free from sexual abuse/assault and sexual harassment.

(d) Inmates' 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 inmates including sexual abuse/assault and sexual harassment.

(i) Communicating effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, and gender nonconforming inmates 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 inmates in exigent circumstances) and searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner

possible, consistent with security needs (Preservice and as needed).”

The facility provided a Nebraska Department of Correctional Services Sexual Assault, Sexual Abuse and Sexual Harassment PowerPoint Presentation. The presentation includes the following Units.

Unit 1: The Prison Rape Elimination Act: Overview of the Law and Your Role

Unit 2: Inmates’ Rights to be Free from Sexual Abuse and Sexual Harassment and Staff and Inmate Rights to be Free from Retaliation for Reporting

Unit 3 Part I: Prevention and Detection

Unit 3 Part II: Response and Reporting

Unit 4: Professional Boundaries and False Allegations

Unit 5: Effective and Professional Communication with Inmates

The facility provided a Nebraska Department of Correctional Services Sexual Assault-Abuse Pre-Service PowerPoint Presentation with the following course overview.

- Federal Standard
- Zero Tolerance
- Prevention, detection, reporting and response
- Investigation process and discipline
- Fears of inmate reporting and inmate methods of reporting
- Victim advocacy
- Avoiding inappropriate relationships with inmates
- Prevention planning
- Responsive planning
- Training and Education
- Screening for risk of sexual victimization and abusiveness
- Reporting methods
- Official response following an inmate report
- Investigations

- Discipline
- Medical and Mental Health care
- Data collection and review
- Audits

(b) The Community Corrections Center Omaha 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. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha 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 monthly.

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

	<p>(d) The Community Corrections Center Omaha 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</p> <p>The facility provided a Prison Rape Elimination Act of 2003: Information for Those With Direct And Indirect Contact With Inmates, Training Acknowledgment. Through printed name and signature, employees attest to the following: 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."</p> <p>The facility exceeds the requirements of the standard by providing multiple opportunities for annual PREA training and ongoing refresher instruction throughout the year. The incorporation of monthly shift-change refreshers, in-person in-service sessions, and electronic learning modules ensures that all employees remain informed and engaged in the agency's zero-tolerance approach. The frequency and consistency of training reinforce staff accountability, strengthen facility awareness, and demonstrate a proactive commitment to sustaining compliance and safety beyond the minimum requirements.</p>
--	---

<b>115.232</b>	<b>Volunteer and contractor training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. Nebraska Department of Correctional Services, Community Partner Orientation PowerPoint, dated 2.2021</li> <li>4. Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, Training Acknowledgment, not dated</li> </ol>

Interviews:

1. Registered Nurse - Contract

The interview with the Registered Nurse demonstrated she has completed specialized training for medical and mental health staff through an in-person class with NDCS personnel. She also completed annual training on the agency's zero-tolerance policy through the agency's learning management system.

Site Observation:

Review of one contractor file demonstrated that she completed a training acknowledgment in 2025.

(a) The Community Corrections Center Omaha 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 158. The PAQ states, "149 volunteers are approved to enter CCCO 9 contract medical/mental health."

The facility provided a Nebraska Department of Correctional Services, Community Partner Orientation Training PowerPoint with the following training components.

- Chapter 1 - NDCS Overview
- Chapter 2 - NDCS Mission Statement
- Chapter 3 - NDCS Vision & Values
- Chapter 4 - American Correctional Association
- Chapter 5 - Characteristic of the Incarcerated Population
- Chapter 6 - Who Are Our Community Partners?
- Chapter 7 - Contraband
- Chapter 8 - Security
- Chapter 9 - Dress Code
- Chapter 10 - Security
- Chapter 11 - Reporting to Staff



	<ul style="list-style-type: none"> <li>· Chapter 12 – Emergencies</li> <li>· Chapter 13 – Infectious Disease</li> <li>· Chapter 14 – Workplace Harassment</li> <li>· Chapter 15 – Sexual Assault on Incarcerated People</li> <li>· Chapter 16 – Hostage Situation</li> <li>· Chapter 17 – Working with Incarcerated People</li> <li>· Chapter 18 – Con Games</li> <li>· Chapter 19 – Victim Assistance</li> <li>· Chapter 20 – What we need from you</li> </ul> <p>(b) The Community Corrections Center Omaha 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. Curriculum compliance can be found in provision (a) of this standard.</p> <p>(c) The Community Corrections Center Omaha PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received.</p> <p>The facility provided a Nebraska Department of Correctional Services Prison Rape Elimination Act (PREA) of 2003: Information for Those with Direct and Indirect Contact with Inmates, Training Acknowledgment. This document is used for staff and contractors and is explained in detail in § 115.31.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.233</b>	<b>Resident education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Nebraska Department of Correctional Services Community Corrections Center-Omaha, New Arrival PREA Educational Refresher, not dated
4. Prison Rape Elimination Act Inmate Orientation Information, Inmate Acknowledgement, dated 3.2025

Interviews:

1. Random Inmates
2. Targeted Inmates
3. Unit Case Worker

Interviews with twenty inmates demonstrated each understood PREA, the agency's zero-tolerance policy, and the available reporting methods. Inmates described multiple ways to report, including verbally to any staff member, anonymously, through a grievance on their tablets, to a trusted adult in the community, or by calling the PREA hotline or the Ombudsman.

The interview with the Unit Case Worker demonstrated that PREA education is read to inmates upon arrival at the facility. The education includes information on the agency's zero-tolerance policy, inmate rights, internal and external reporting methods, and where postings can be found throughout the facility.

Site Observation:

Utilizing the PREA Audit - Community Confinement Facilities Documentation Review template demonstrated that eighteen of twenty inmates arrived at the program within the past twelve months, and all eighteen received PREA education within seventy-two hours of intake.

(a) The Community Corrections Center Omaha PAQ states residents receive information at time of intake about the zero-tolerance policy, how to report incidents or suspicions of sexual abuse or harassment, their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to

such incidents. The number of residents admitted during past 12 months who were given this information at intake was 3164.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 13-14, section M. 1-2, state,”

1. During the intake process at all NDCS facilities, inmates 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.

2. Within 30 days of intake, inmates newly assigned to NDCS shall receive comprehensive education through use of a power point/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.”

The facility provided a Nebraska Department of Correctional Services Community Corrections Center-Omaha, New Arrival PREA Educational Refresher. The curriculum provides inmates with information on the following.

- Zero Tolerance policy
- Types of abusive sexual acts
- Internal and External Reporting Information
- Federal Law
- Inmate Acknowledgement

(b) The Community Corrections Center Omaha 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 101. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was 101. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section M. 3, states, "Information will be provided in formats accessible to all inmates, 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 inmates who have limited reading skills and who are limited English proficient."

The facility provided a Prison Rape Elimination Act Inmate Orientation Acknowledgment demonstrating inmates are educated on the following.

- Agency Zero Tolerance Policy
- Federal Law to include information on rights
- How to report incidents of sexual assault, sexual abuse and sexual harassment
- Inmate acknowledgement

(d) The Community Corrections Center Omaha PAQ states the agency maintains documentation of resident participation in PREA education sessions.

(e) The Community Corrections Center Omaha 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 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 free 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."

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

115.234	<b>Specialized training: Investigations</b>
	<p data-bbox="280 185 981 219"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="280 264 564 297"><b>Auditor Discussion</b></p> <p data-bbox="280 342 544 376">Document Review:</p> <ol data-bbox="280 409 1410 786" style="list-style-type: none"> <li data-bbox="280 409 954 443">1. Community Corrections Center Omaha PAQ</li> <li data-bbox="280 483 1410 562">2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li data-bbox="280 595 1358 674">3. Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting Instructor Outline, not dated</li> <li data-bbox="280 707 1390 786">4. State of Nebraska 46-NDCS – PREA Investigator Training Certificate, dated 10.4.2018.</li> </ol> <p data-bbox="280 898 437 931">Interviews:</p> <ol data-bbox="280 965 783 1077" style="list-style-type: none"> <li data-bbox="280 965 783 999">1. Assistant Warden / Investigator</li> <li data-bbox="280 1032 639 1066">2. Criminal Investigator</li> </ol> <p data-bbox="280 1111 1466 1234">The interview with the Investigator and review of personnel files demonstrated that each facility investigator completed in-person investigator training through the Nebraska Department of Correctional Services.</p> <p data-bbox="280 1335 1426 1503">The interview with the Criminal Investigator demonstrated he received in-person PREA investigation training with the agency’s PREA Coordinator. The Criminal Investigator is also a certified police officer and serves as a liaison between the Nebraska Department of Correctional Services and the Nebraska State Patrol.</p> <p data-bbox="280 1603 528 1637">Site Observation:</p> <p data-bbox="280 1648 1445 1727">During the pre-audit phase, the Investigator’s training record report was uploaded to the Online Audit System.</p> <p data-bbox="280 1827 1453 1951">(a/b) The Community Corrections Center Omaha PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p>

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14, section N. 1.-2., state,

1. "In addition to the general training provided to all team members, 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.

2. NDCS shall maintain documentation confirming investigators have received specialized training in conducting sexual abuse/assault investigations."

The facility provided PREA Instructor Outline for Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting Instructor Outline. This course overview includes:

- PREA Standard 115.21/115.221
- PREA Standard 115.34/115.234
- PREA Standard 115.71/115.271
- PREA Standard 115.72/115.272
- Investigation Basics
- Assignment of Investigation
- Criminal V Administrative
- Basic Investigation Steps
- Initial Response
- Investigation
- Determination of Findings
- Prosecutorial Referral
- Investigative Report Packet
- Working with Victims

- Understanding Victim's Background
- Biological Impact of Trauma
- Trauma's Effect on Brain
- Immediate Reaction
- Being Very Impressive
- Remaining Controlled, Numb
- Associated Problems
- Short-Term Aftermath
- Long-Term Aftermath
- Confinement Setting Aftermath Issues
- Additional Male Aftermath Issues
- Additional Female Aftermath Issues
- PTSD
- Trauma Informed Approach
- Avoid Additional Harm
- Avoid Secondary Harm
- Delayed Reporting
- Delayed Reporting in Youth
- Hesitant Victims
- Staff Aggressors
- Interviewing
- Personal Biases
- Managing Biases
- Initial Interviewing
- Soft Interviewing
- Hard Interviewing
- Communication: Female Inmates/Male Inmates/Minority Populations
- Hostile or Uncooperative Victims

	<ul style="list-style-type: none"> <li>• When to Interview Victim</li> <li>• Negative Effects of Repeated Interviews</li> <li>• Handling False Reports</li> <li>• False Reports</li> <li>• Sexualized Work Environment</li> <li>• Signs of Sexual Abuse Perpetrated by Inmates</li> <li>• Staff Sexual Misconduct</li> <li>• Red Flags of Sexual Abuse Perpetrated by Staff</li> <li>• Red Flags Exhibited by Staff</li> <li>• Influences of Reporting Culture</li> <li>• Reporting</li> <li>• Inmate Code of Silence</li> <li>• Staff Code of Silence</li> <li>• Strategies for Changing Culture</li> <li>• Investigators Influence</li> </ul> <p>(c) The Community Corrections Center Omaha PAQ states the agency maintains documentation showing that investigators have completed the required training. The number of investigators currently employed who have completed the required training is one.</p> <p>The facility provided a State of Nebraska 46-NDCS – PREA Investigator Training Certificate dated 10.4.2018.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.235</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>



Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Prison Rape Elimination Act NDCS Director of Nursing Medical Training Curriculum, not dated
4. Medical PREA Completion Record
5. Post Audit: Nine National PREA Resource Center Specialized Medical and Mental Health Training Certificates

Interviews:

1. Administrative Nurse
2. Associate Director of Nursing
3. Mental Health - Contractor
4. Registered Nurse - Contractor

The interview with contract medical practitioners demonstrated each had received initial, monthly, and annual education on the agency's zero-tolerance policy. Specialized PREA training required for medical and mental health staff is completed every three years.

Site Observation:

During the pre-audit phase, the facility uploaded the Medical and Mental Health Training Report to the Online Audit System, demonstrating that all medical and mental health staff had completed the required specialized training.

(a) The Community Corrections Center Omaha 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 29.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 14-15, section O. 1., states, “

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.”

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.

- 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) Community Corrections Center Omaha PAQ states the agency medical staff at this facility do not conduct forensic medical exams.

(b) The Community Corrections Center Omaha PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

The facility provided CCCO-NCYF Medical and mental health training report demonstrating 29 medical and mental health staff employed at both facilities have completed the required training. The report demonstrates the following is documented.

- Name
- Specialized medical training completion date
- Pre-services / In-service training date
- Primary location

	<ul style="list-style-type: none"> <li>· NDCS Staff / Agency</li> <li>· Medical or Mental Health</li> </ul> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.241</b>	<b>Screening for risk of victimization and abusiveness</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. Nebraska Department of Correctional Services, Identification of Potential Aggressors and Victims/Survivors, dated 7.31.2024</li> <li>4. Nebraska Inmate Case Management System PREA Assessment</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Inmates</li> <li>2. Targeted Inmates</li> <li>3. Unit Case Manager</li> <li>4. Captain / PREA Coordinator</li> </ol> <p>Interviews with inmates demonstrated that most recalled being screened at intake and again approximately one month later. Inmates remembered being asked questions about prior incarceration, whether they had ever been sexually victimized or had sexually abused another person, their sexual orientation, being offered mental health services and whether they had experienced any safety concerns since incarceration.</p> <p>The interview with the Unit Case Manager demonstrated that inmates complete a risk screening on the day of intake in a private setting with herself and another Unit</p>

Case Manager. The Case Manager stated that risk is assessed for vulnerability and aggressiveness, criminal history, age, prior incarcerations, sexual orientation, past abuse and the location of that abuse, medical issues, and any fears for personal safety.

The interview with the PREA Coordinator demonstrated that only diagnostic centers have access to the complete inmate risk assessment.

Site Observation:

Utilization of the PREA Audit – Adult Prisons & Jails Documentation Review – Inmate File/Records Review template demonstrated that eighteen of the twenty inmates interviewed had been admitted into the program within the past twelve months. Of those eighteen inmates, each had completed risk assessments within seventy-two hours of intake and again within thirty days of admission.

(a) The Community Corrections Center Omaha 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 201.03, page 2, section 1., states, “All inmates 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 inmates and/or their potential to be sexually abusive or sexually harassing toward other inmates. 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 inmate’s detriment by staff or other inmates.”

(b) The Community Corrections Center Omaha 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 2993.

(c-e) The Community Corrections Center Omaha PAQ states the risk assessment is conducted using an objective screening instrument.

The facility provided computer screen prints of the agency PREA risk assessment.

#### Criminal History Check:

- Who completed the Criminal History check:
- 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?
- Is the current conviction sexual violence?
- How many convictions of sexual violence?
- Is there a convictions for sexual violence against a child?
- Is there a conviction for sexual violence against an adult
- NDCS history of perpetrated violence for sexual abuse/sexual harassment found.
- NDCS history of perpetrated violence for sexual assault/abuse and or harassment (Misconduct reports)

#### Inmate questions:

- Have you been previously incarcerated?
- How many times?
- Number of convictions that are of a violent nature include sexual violence?
- How may 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 Omaha 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. 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 2853. Policy compliance can be found in provision (b) of this standard.

(g) The Community Corrections Center Omaha 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, page 6, section V., states, "REASSESSMENTS USING THE PREA SCREENING ASSESSMENT (PREA standard Secured facilities 115.41g/Community facility 15.241g)

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. Significant Incidents include:

- A. Involved in an allegation of sexual assault or sexual abuse.
- B. After a substantiated or unsubstantiated sexual assault or sexual abuse allegation. An inmate discloses a change to their gender identity or sexual orientation.
- C. An inmate turns the age of 65.
- D. An inmate becomes disabled such as a wheelchair, deaf or blind.
- E. A clinician reports the decline in an inmate's mental health.
- F. An inmate is charged with a new crime that includes a sexual assault.
- G. Return from remand, parole or abscond status when it has been longer than 24 hours.
- H. Return from the outside hospital when it has been longer than 24 hours without direct supervision (i.e. medical furlough).

After an allegation of sexual assault or sexual abuse is reported to facility staff, the victim, and aggressor will be assessed. Staff will complete the assessment using the NICaMS PREA screening assessment This assessment shall be completed as soon as possible following the notification of the allegation (generally within 24 hours) and must be completed within 72 hours.

When facility staff are made aware of any inmate-on-inmate sexual assault sexual abuse or sexual harassment incident, a mental health referral must be submitted per the established facility process. Treatment/follow-up will be provided as deemed necessary by mental health staff.

If there is any change in the inmate's aggression or victimization potential, changes to the inmate's housing, programming and work assignments shall be made as appropriate."

(h) The Community Corrections Center Omaha 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



	<p>a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the resident’s own perception of vulnerability.</p> <p>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.”</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

115.242	Use of screening information
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Targeted Inmates</li> <li>2. Unit Case Manager</li> <li>3. Captain / PREA Coordinator</li> <li>4. Warden</li> </ol> <p>Interviews with four LGBTQI inmates and three inmates who disclosed prior victimization demonstrated each was highly respected by peers and staff members and felt comfortable with their cellmates and within the program overall.</p> <p>The interview with the Warden and the PREA Compliance Manager demonstrated that risk assessment outcomes are reviewed at intake and each time a housing</p>

placement or programmatic element changes for an inmate, including job assignments, room placements, and classroom settings. Each review considers the potential for vulnerability or aggressiveness, and inmates are never placed in the same room or area where they could be isolated together.

The interview with the PREA Coordinator demonstrated that quarterly gender dysphoria meetings are held with facilities to discuss transgender and intersex inmates entering or transferring within programs to ensure individual needs are met. In addition, the PREA Coordinator reviews all six-month reassessments after they are completed by designated facility personnel.

(a) The Community Corrections Center Omaha 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 15, 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 inmates 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 inmates within an institution may be utilized. Facilities will make individualized determinations about how to ensure the safety of each inmate."

(b) The Community Corrections Center Omaha PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each resident. Policy compliance regarding individualized determinations can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11,

	<p>page 15-16, section Q. 2., states, “In deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, NDCS shall consider on a case-by-case basis whether a placement would ensure the inmates health and safety, and whether the placement would present management or security problems.”</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.251</b>	<b>Resident reporting</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. CCC-O Incarcerated Individual In-House Rules and General Information Handbook, dated 1.2025</li> <li>4. NDCS Staff Reporting Training Slides 95 &amp; 97</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Inmates</li> <li>2. Targeted Inmates</li> <li>3. Case Workers and Corporals</li> <li>4. Warden</li> </ol> <p>Formal and informal interviews with inmates demonstrated a clear awareness of reporting options, including information displayed on facility postings and education received during orientation. Inmates described multiple ways to report, including directly to staff, to a trusted adult in the community, through the grievance application on their tablets, by writing a kite, or by calling the PREA hotline or the Ombudsman.</p>

Interviews with Case Workers and Corporals demonstrated they would accept verbal, written, third-party, and anonymous reports and immediately notify their supervisor.

Site Observation:

During the tour, the PREA hotline was tested using inmate phones, and the call connected immediately. A message was left on the voicemail, and the PREA Coordinator demonstrated that the message was received on her cell phone.

(a) The Community Corrections Center Omaha 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 17, section S. 1., 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.

- Inmates may verbally report the incident to any staff member.
- 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 captain/PREA coordinator. See How To Dial Hotlines (Attachment C) for directions on dialing the PREA Hotline.
- Inmates may report the incident in writing on an Inmate Interview Request or Grievance form."

The facility provided a CCC-O Incarcerated Individual In-House Rules and General Information Handbook, which is printed in English and Spanish. Page 75, third paragraph states, "The Nebraska Department of Correctional Services offers multiple ways to report sexual abuse and sexual harassment to include: • Reports can be made anonymously.

- Report to any staff, volunteer, contractor, or medical or mental health staff.

- Report to the PREA Coordinator or PREA Compliance Manager (Kelley).
- 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.
- Report by you calling the PREA hotline by entering - PIN: 0-111-111-111 - Speed Dial 08#"

(b) The Community Corrections Center Omaha 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. Policy compliance can be found in provision (a) of this standard. The PAQ states, "The inmate population can contact the Ombudsman's office if they choose to. The Ombudsman's office is set up as a speed dial on the inmates' calling system."

(c) The Community Corrections Center Omaha 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. Policy and practice compliance can be found in provision (a) of this standard.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 18, section 17. 4., states, "Staff will accept all reports made verbally, in writing, anonymously, from other inmates and from third parties outside NDCS. Verbal reports will be promptly documented."

(d) The Community Corrections Center Omaha PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 18, section 17. 4., states, "Staff have the option of privately reporting sexual assault/abuse and sexual harassment of inmates and retaliation against inmates and staff by directly notifying the captain/PREA coordinator (402-479-5660) or utilizing the established hotline number (855-623-7360)."

The facility provided slides 95 and 97 from the agency PREA training PowerPoint demonstrating employees are provided internal ways to report and a hotline number of 855.623.7360 as well as information on affirmative duty.

	<p>The facility provided a NCYF Investigative Case Log Report demonstrating the following is documented when a report is received for sexual harassment or sexual abuse.</p> <ul style="list-style-type: none"> <li>· Case #</li> <li>· Logging Date</li> <li>· Investigator</li> <li>· Facility</li> <li>· Report Date</li> <li>· Incident Date</li> <li>· Case Type</li> <li>· Nature of Case</li> <li>· Case Status</li> <li>· Case Notes</li> <li>· PREA Allegation/Category</li> <li>· Persons Involved</li> </ul> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.252</b>	<b>Exhaustion of administrative remedies</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p>

1. Random Inmates

2. Targeted Inmates

Interviews with twenty inmates demonstrated they were aware that grievances could be filed through the application on their tablets.

The interview with the PREA Compliance Manager demonstrated that grievances are submitted electronically through inmate tablets and automatically forwarded to both the PREA Compliance Manager and the PREA Coordinator, who monitor all PREA-related grievances. The system records each grievance from submission through resolution, ensuring timely response and accountability.

Site Observation:

During the onsite review, the agency grievance database was examined. The facility demonstrated that the database tracks the inmate's name, date, time, grievance details, actions taken, and closure date, providing comprehensive documentation of the grievance process.

(a) The Community Corrections Center Omaha PAQ states the agency has an administrative procedure for dealing with resident grievances regarding sexual abuse.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 18, section T., states, "Inmates 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 inmate 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 inmate is not required to use any informal grievance process (i.e., an inmate 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 inmate 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 inmates preparing an administrative appeal. An extension of up to 70 days may be requested if there is insufficient time to make an appropriate decision. Inmates will be notified in writing of the extension and be provided a date by which the decision will be made. If the inmate 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 inmate 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 inmate is at substantial risk of imminent sexual abuse/assault and the action taken in response to the emergency grievance.”

(b) The Community Corrections Center Omaha 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 Omaha 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 Omaha PAQ states the agency policy and procedure requires that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months, the number of grievances filed that alleged sexual abuse was zero. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was zero. Policy



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

(e) The Community Corrections Center Omaha 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 require that if a resident decline to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the residents' 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 residents' decision to decline was zero. Policy compliance can be found in provision (a) of this standard.

(f) The Community Corrections Center Omaha PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires an initial response within 48 hours. The number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months was zero. The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse requires that a final agency decision be issued within 5 days. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was zero. Policy compliance can be found in provision (a) of this standard.

(g) The Community Corrections Center Omaha 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.

The facility exceeds the requirements of the standard through its efficient, technology-based grievance process that promotes accessibility, transparency, and accountability. The electronic tracking system allows real-time monitoring by both the PREA Compliance Manager and the PREA Coordinator, ensuring prompt responses and thorough documentation. This level of oversight and accessibility surpasses standard requirements and reflects the facility's commitment to maintaining a transparent and responsive grievance system for all inmates.

115.253	<b>Resident access to outside confidential support services</b>
	<p data-bbox="280 188 979 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="280 266 564 300"><b>Auditor Discussion</b></p> <p data-bbox="280 344 544 378">Document Review:</p> <ol data-bbox="280 412 1410 636" style="list-style-type: none"> <li data-bbox="280 412 956 445">1. Community Corrections Center Omaha PAQ</li> <li data-bbox="280 479 1410 557">2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li data-bbox="280 591 1075 624">3. Advocacy Attempt Memorandum, dated 12.11.2024</li> </ol> <p data-bbox="280 748 437 781">Interviews:</p> <ol data-bbox="280 815 719 848" style="list-style-type: none"> <li data-bbox="280 815 719 848">1. Captain / PREA Coordinator</li> </ol> <p data-bbox="280 882 1477 1039">Interviews with the PREA Coordinator demonstrated that inmates are partnered with a facility or agency mental health provider for emotional support services, as the agency has not yet secured a formal agreement with an outside advocacy organization.</p> <p data-bbox="280 1151 1477 1487">(a) The Community Corrections Center Omaha 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.</p> <p data-bbox="280 1599 1477 1834">Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 19, section U., states, "NDCS shall maintain or attempt to enter into a memorandum of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse. The agency shall maintain copies of agreements or documentation showing attempts to enter into such agreement.</p> <p data-bbox="280 1946 1450 2058">In the event that a victim advocate is needed for an incident of sexual assault, the facility shall make available or attempt to make available to the victim a victim advocate from a rape crisis center. If a victim advocate from a rape crisis center is</p>

not available to provide victim advocate services, the facility shall make available a qualified staff member from a community-based organization or qualified agency staff member. 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 secure services from rape crisis centers on the Facility Checklist for Incidents of Sexual Assault/Abuse. As requested by the victim, the victim advocate, qualified agency staff 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 staff assisted telephone call. The staff assisted call shall be no longer than 15 minutes in duration. Staff will document the call, or attempted call, on an Incident Report.”

(b) The Community Corrections Center Omaha 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 Omaha 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 an Advocacy Attempt Memorandum from the NDCS PREA Coordinator, stating, “NDCS currently does not have a MOU with a rape crisis center. However, when the inmate goes to the community hospital for a SANE examination the hospital contacts a victim advocate to be present.

In the event NDCS enters into a MOU with a RAPE crisis center the below information will be part of the MOU and information will be given to the incarcerated population.”

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

115.254	Third party reporting
	<p data-bbox="280 185 981 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <p data-bbox="280 264 564 295"><b>Auditor Discussion</b></p> <p data-bbox="280 338 544 369">Document Review:</p> <ol data-bbox="280 412 1410 555" style="list-style-type: none"> <li data-bbox="280 412 956 443">1. Community Corrections Center Omaha PAQ</li> <li data-bbox="280 486 1410 555">2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p data-bbox="280 669 437 701">Interviews:</p> <ol data-bbox="280 743 587 846" style="list-style-type: none"> <li data-bbox="280 743 587 775">1. Random Inmates</li> <li data-bbox="280 817 587 846">2. Targeted Inmates</li> </ol> <p data-bbox="280 889 1417 1001">Interviews with twenty inmates demonstrated their understanding of third-party reporting, stating that family members, friends, or other inmates could report allegations of sexual harassment or sexual abuse on their behalf.</p> <p data-bbox="280 1115 526 1146">Site Observation:</p> <p data-bbox="280 1155 1431 1312">During the tour, “How to Report” postings were observed throughout the facility. The postings included third-party reporting options such as mailing addresses for the agency, instructions for reporting through a friend or family member, and contact information for the Ombudsman.</p> <p data-bbox="280 1426 1465 1583">(a) The Community Corrections Center Omaha 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.</p> <p data-bbox="280 1697 1469 1977">On September 30, 2025, at 2:05 p.m. MST, this writer left a message on the agency PREA Hotline at 855-623-7360. After proper introductions, a return call was requested to explain the steps taken when a report of sexual harassment, sexual abuse, or retaliation is received through this number. The phone call was returned by the agency PREA Coordinator on October 1, 2025, at 8:00 a.m., stating, “Attached is your Hotline call. If this had been an inmate reporting an allegation, I would contact the facility for follow-up on a possible investigation.”</p> <p data-bbox="280 2092 1420 2123">Based on the review of documentation, observations, and interviews, the facility</p>

	meets the standard requirements.
--	----------------------------------

<b>115.261</b>	<b>Staff and agency reporting duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"><li>1. Community Corrections Center Omaha PAQ</li><li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li></ol> <p>Interviews:</p> <ol style="list-style-type: none"><li>1. Corporals</li><li>2. Case Workers</li><li>3. Administrator Programs Officer / PREA Compliance Manager</li><li>4. Captain / PREA Coordinator</li><li>5. Warden</li></ol> <p>Interviews with facility personnel demonstrated that each actively practices and understands the importance of immediately reporting all allegations of sexual abuse and sexual harassment.</p> <p>Site Observation:</p> <p>The facility has not received any allegations of sexual harassment or sexual abuse within the past twelve months.</p> <p>(a/d-e) The Community Corrections Center Omaha PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or</p>

	<p>retaliation.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20, section W., states, “All NDCS staff are required to report immediately and according to policy any knowledge, suspicion or information regarding:</p> <ul style="list-style-type: none"> <li>a. An incident of sexual assault/abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.</li> <li>b. Retaliation against inmates or staff who reported such an incident.</li> <li>c. Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</li> </ul> <p>Medical and mental health staff are obligated to report sexual assault/abuse and inform inmates of their duty to report and the limitations of confidentiality at the initiation of services.</p> <p>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.</p> <p>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.”</p> <p>(b) The Community Corrections Center Omaha 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.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.262</b>	<b>Agency protection duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Warden</li> </ol> <p>The interview with the Warden demonstrated that protective custody is only considered in cases of an immediate safety concern; however, segregated housing is not utilized at the facility for any reason. The Warden stated that victims are kept separate from perpetrators through central monitoring and other protective measures, ensuring safety without the use of isolation. The Warden also stated that no inmates have requested protective housing within the past twelve months.</p> <p>(a) The Community Corrections Center Omaha PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the number of times the agency or facility determined that a resident was subject to a substantial risk of imminent sexual abuse was zero.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 20, section X, states, "When NDCS learns that an inmate 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."</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>

<b>115.263</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Email Notification of a Sexual Abuse Report
4. Incident Report

Interviews:

1. Warden
2. Deputy Assistant Director / Agency Head

The interview with the Warden demonstrated he was aware that upon receiving an allegation that an inmate was sexually abused while confined at another facility, he would personally notify the Warden of the facility where the allegation was alleged to have occurred within seventy-two hours of receipt and document the formal complaint through email communication.

The interview with the Deputy Assistant Director demonstrated all sexual abuse allegations are referred to the Nebraska State Patrol and coordinated through the agency PREA Coordinator, facility PREA Compliance Managers, and the assigned criminal investigators.

On Site Observation:

Utilizing a PREA Audit – Community Confinement Facility Documentation Review – Investigations template one investigation was reviewed which was reported at another facility who notified the Community Corrections Center Omaha.

(a) The Community Corrections Center Omaha 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,



	<p>page 20, section Y, states, “Within 72 hours of receipt of an allegation an inmate 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.”</p> <p>The facility provided an email notification to the Facility Warden providing information on a receipt of a claim of sexual abuse that was alleged to have occurred at the Omaha Correctional Center.</p> <p>The facility provided an incident report of the allegation of sexual abuse reported in response to the notification.</p> <p>(b) The Community Corrections Center Omaha PAQ states the agency policy requires the facility head to provide such notification as soon as possible, but no later than 72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Community Corrections Center Omaha 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.</p> <p>(d) The Community Corrections Center Omaha PAQ states the agency or facility policy requires that allegations received from other facilities and agencies are investigated in accordance with the PREA standards. In the past 12 months, the number of allegations of sexual abuse the facility received from other facilities was zero. Policy compliance can be found in provision (a) of this standard.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.264</b>	<b>Staff first responder duties</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024

Interviews:

1. Corporals
2. Case Workers

Interviews with each staff demonstrated they were aware of their first responder responsibilities. Staff stated reporting information is posted throughout the facility and they have access to a first responder checklist through a supervisor and or the facility shared computer drive. Staff stated they would document PREA allegations and or incidents on the Incident Checklist. Staff could articulate they would call for back up before engaging to separate those involved in a sexual abuse incident, encourage the victim not to wash, eat or drink or use the restroom, demand perpetrators do not wash, eat or drink or use the restroom, have a staff member guard the area where the abuse took place until instructed otherwise by administrative or law enforcement personnel and write a report of the incident before leaving their shift.

Site Observation:

The facility has not received a sexual harassment or sexual abuse incident in the past twelve months.

(a) The Community Corrections Center Omaha PAQ states the agency has a first responder policy for allegations of sexual abuse. In the past 12 months, one allegation occurred where a resident was sexually abused. Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was one. In the past 12 months, there was one allegation where staff were notified within a time period that still allowed for the collection of evidence. Of this allegation the number of times the first security staff member to respond to the report was zero.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 21, section Z. 1. a-b, Initial Response:

- a. Upon learning of an allegation an inmate was sexually assaulted, the first

	<p>security staff member (team members primarily responsible for the supervision and control of inmates, including but not limited to custody, housing unit, mental health, recreation, maintenance, teachers, etc.) to respond to the report shall be required to:</p> <ol style="list-style-type: none"> <li>1. Separate the victim and abuser and ensure that the victim is safe.</li> <li>2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence.</li> <li>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.</li> </ol> <p>b. Inmate victims of sexual assault or inmates alleging they are victims of sexual assault which occurred within the past 120 hours will be referred immediately, under appropriate security provisions, to a community hospital for initial treatment and gathering of evidence without financial cost to the inmate. All forensic examinations shall be at a community hospital. If it is determined a forensic examination will be conducted department medical staff may provide only emergency medical care prior to transport."</p> <p>(b) The Community Corrections Center Omaha 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.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

115.265	Coordinated response
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Facility Checklist for Incidents of Sexual Assault Sexual Abuse and Sexual Harassment, dated 7.2024

Interviews:

1. Administrative Programs Officer / PREA Compliance Manager

Interviews with the PREA Compliance Manager demonstrated the facility utilizes a Facility Checklist for each incident of sexual abuse or sexual harassment, and each Lieutenant has access to the document information through computer access.

Site Observation:

Review of the facility's Coordinated Response Plan demonstrated clear direction to staff to ensure first responder duties are fulfilled.

(a) The Community Corrections Center Omaha 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 ensures the following information is completed and or directives are followed upon an allegation of sexual assault, sexual abuse and or sexual harassment.

- |   |   |                           |
|---|---|---------------------------|
| · | Date reported / Time Reported               |                           |
| · | Date of Incident / Time of Incident         |                           |
| · | First staff on Scene with title             | Means of Discovery/       |
|   | Reporting                                   |                           |
| · | Alleged Victim – Name and Number            | Alleged Perpetrator-Name/ |
|   | Number                                      |                           |
| · | Witnesses of the Incident – Name and Number |                           |

## Steps to ensure a coordinated response for sexual Assault, Sexual Abuse and Sexual Harassment

Each of the following steps must be answered with a yes, no, Initial and time

- Alleged victim separated from alleged abuser
- Crime scene preserved and protected if applicable

If incident is Sexual Assault (to include rape or any allegation whereas DNA evidence, physical injury, etc. may have occurred)

- Request alleged victim not to take any actions that could destroy evidence
- Ensure alleged abuser does not take any actions that could destroy evidence
- Notify Medical for the completion of an on-site assessment of alleged victim's acute medical needs and initiation of medical protocols
- Alleged victim advised of the benefits of a forensic exam and offered the opportunity to undergo an exam (if within 120 hours of incident)
- If consenting, alleged victim taken to a community medical facility for initial treatment and evidence collection during examination by a SAFE or SANE
- Alleged victim offered the presence of a victim advocate for the exam.
- If the inmate has requested a victim advocate, once the inmate is in route to the hospital the Shift Supervisor notifies the hospital of victim advocate request
- Escorting staff briefed regarding procedures and advised to document names of any victim advocate and any law enforcement/investigators
- Upon return to the facility, victim is placed on 15-minute observation checks. Evaluation by mental health staff should be conducted. Alleged Victim is given the opportunity to use a phone to contact the victim advocate hotline or contact personal support person.

Always ensure the following is completed:

- The Shift Supervisor completes a Mental Health Referral Form for both the alleged victim and alleged perpetrator, before the end of the shift. The Shift Supervisor contact Mental Health for the completion of an on-site assessment for both the alleged victim and aggressor.
- The Shift Supervisor must complete a cover letter and collect reports from reporting employee, other first responders, Mental Health and Medical. obtain inmate statements from alleged victim and alleged aggressor and completed

	<p>checklist. Submit packet to the Security Administrator and PERA Compliance Manager before the end of the shift.</p> <p>Notifications / Contact made * is for Sexual Assault only</p> <ul style="list-style-type: none"> <li>· Medical</li> <li>· Mental Health Staff</li> <li>· Oncoming Shift Supervisor</li> <li>· Warden informed by phone</li> <li>· Facility PREA Compliance Manager informed by phone</li> <li>· Department PREA Coordinator informed by phone</li> <li>· Department Investigators/State Patrol*</li> <li>· Facility PREA Compliance Manager reviewed incident packet</li> </ul> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.266</b>	<b>Preservation of ability to protect residents from contact with abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. 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</li> </ol> <p>Interviews:</p>

	<p>1. Deputy Assistant Director / Agency Head</p> <p>The interview with the Deputy Assistant Director demonstrated that contracts are in place for correctional, nursing, and teaching personnel, and that these contracts are renewed every two years.</p> <p>(a) The Community Corrections Center Omaha PAQ states the agency, facility, or any other governmental entity is not responsible for collective bargaining on the agency's behalf has not entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>The facility is currently entered into a collective bargaining agreement. The agreements include the following:</p> <ul style="list-style-type: none"> <li>· The State of Nebraska and Protective Services, represented by Fraternal Order of Police, Nebraska Protective Services, Lodge 88 (FOP 88), page 31, section 10.2 n., states, "Work place harassment based, in whole or in part, on race, color, sex, religion, age, disability or national origin, which manifests itself in the form of unwelcome comments, jokes, printed material and/or unwelcomed sexual advances, requests for sexual favors or other verbal or physical conduct of a sexual nature."</li> </ul> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

115.267	Agency protection against retaliation
	<p><b>Auditor Overall Determination:</b> Exceeds Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Administrative Programs Officer I / PREA Compliance Manager</li> </ol>

The interview with the Administrative Programs Officer demonstrated she has not yet had the need to implement retaliation monitoring; however, she stated she would initiate monitoring upon receipt of a sexual abuse allegation. The Administrative Programs Officer explained she would monitor the victim's interactions with other inmates and staff, review incident reports, and examine case notes from Case Managers. She further stated she would document the initial check-in with the victim and conduct subsequent monitoring at least every thirty days, or as long as necessary. The Administrative Programs Officer also stated that if an inmate were transferred to another NDCS facility, retaliation monitoring responsibilities would transfer to the PREA Compliance Manager at that location to ensure monitoring continued for a total of ninety days.

Site Observation:

In the past twelve months, the facility has not received any allegations of sexual harassment or sexual abuse.

(a-b) The Community Corrections Center Omaha PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 23, section CC. 1-2., state,

- "NDCS has an obligation to protect all inmates 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 inmates 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 inmates, 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.
- Once the PREA compliance manager is made aware of an open investigation, the PREA compliance manager shall meet with the victim and begin retaliation tracking. Facilities shall employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims and emotional support services for



	<p>inmates or staff who fear retaliation for reporting sexual abuse/assault or sexual harassment or for cooperating with investigations.”</p> <p>(c/d) The Community Corrections Center Omaha PAQ states the facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to ascertain if there are any changes that may suggest possible retaliation by residents or staff. The facility will monitor conduct or treatment until the resident is discharged. The facility acts promptly to remedy any such retaliation. In the past 12 months, the facility has had zero incidents of retaliation.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 23-24, section CC. 3., states, “For at least 90 days following a report of sexual assault/abuse, the agency shall monitor the conduct and treatment of inmates or staff who report sexual assault/abuse and of inmates who were reported to have suffered sexual assault/abuse to determine if there are changes that may suggest possible retaliation by inmates or team members. Immediate action will be taken to remedy any retaliation. The facility will continue monitoring beyond 90 days if the initial monitoring indicates a continuing need.</p> <p>a. Items that should be monitored include any inmate disciplinary reports, housing or program changes or negative performance reviews or reassignments of staff.</p> <p>b. The facility PREA compliance manager or captain/PREA coordinator will make periodic status checks to determine if retaliation is being perpetrated against or perceived by inmates or staff. With the approval of the warden, the PREA compliance manager may designate up to three management positions (Unit Manager, Lieutenant or above) to assist with retaliation monitoring. Allegations or indications of retaliation will be reviewed and documented. Appropriate action will be taken in the event of confirmed retaliation against inmates or staff.”</p> <p>The facility exceeds the requirements of the standard by ensuring retaliation monitoring follows the inmate in the event of a transfer to another facility. This practice demonstrates a strong commitment to maintaining victim safety and continuity of care beyond the minimum requirements. The proactive coordination between facility staff, the Administrative Programs Officer, and PREA Compliance Managers across NDCS locations reflects a system-wide approach to accountability, reinforcing a culture of protection, transparency, and sustained compliance.</p>
--	--

<b>115.271</b>	<b>Criminal and administrative agency investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

## Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024

## Interviews:

1. Assistant Warden / Investigator
2. Criminal Investigator
3. Captain / PREA Coordinator

The interview with the Investigator demonstrated he begins an investigation immediately and reviews the Incident Checklist to ensure documentation of all events is being maintained. He gathers all incident reports and available evidence, including camera footage, completes required notifications, and identifies and interviews victims, witnesses, staff, and alleged perpetrators.

The interview with the Criminal Investigator demonstrated that his investigative approach depends on the type of incident. He stated he reviews the report, offers a SANE examination when applicable, ensures both the victim and aggressor are reassessed and separated, reviews the secured schedule, gathers all related documentation, and initiates a preliminary investigation.

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

## Site Observation:

The facility has not received any allegations of sexual harassment or sexual abuse within the past twelve months.

(a/b) The Community Corrections Center Omaha 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 24, 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."

(h) The Community Corrections Center Omaha 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 is zero.

(i) The Community Corrections Center Omaha PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 32, section OO. 4.a., states, "Maintenance of Records

a. 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 captain/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 database as well as a hard copy in the captain/PREA coordinator's office. Each case shall be identified as one of the following PREA categories:

1. Staff on inmate sexual assault Staff on inmate sexual abuse
2. Staff on inmate exhibitionism
3. Staff on inmate voyeurism
4. Staff on inmate sexual harassment

	<p>5. Inmate on inmate sexual assault</p> <p>6. Inmate on inmate sexual abuse</p> <p>7. Inmate on inmate sexual harassment”</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	--

<b>115.272</b>	<b>Evidentiary standard for administrative investigations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Assistant Warden / Investigator</li> <li>2. Criminal Investigator</li> </ol> <p>The interview with the Investigators demonstrated the facility imposes no standard higher than a preponderance of the evidence when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>(a) The Community Corrections Center Omaha 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.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, 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.”</p>

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

<b>115.273</b>	<b>Reporting to residents</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. NDCS / PREA Post Investigation Inmate Notification Form, dated 7.2023</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Assistant Warden / Investigator</li> </ol> <p>The interview with the Investigator demonstrated that victims are notified of the outcomes of sexual abuse investigations both in writing and verbally by facility staff, regardless of whether the allegation is substantiated, unsubstantiated, or unfounded.</p> <p>Site Observation:</p> <p>In the past twelve months, the facility has not received any allegations of sexual harassment or sexual abuse.</p> <p>(a) The Community Corrections Center Omaha 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 one. 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 one.</p>

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, 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/ designee and documented. The obligation to report is terminated if the inmate is released from NDCS custody."

(b) The Community Corrections Center Omaha 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. Policy compliance can be found in provision (a) of this standard.

(c) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 27, section GG. PREA Standard Secure Facility 115.73 a-f / Community Facility 115.273 a-f Reporting to Inmates, 2., Inmate Allegation against a Team Member, states, "Upon completion of the investigation (including the final review) of an inmate's allegation that a staff member has committed sexual abuse/assault 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.

d. It is learned the team member has been convicted on a charge related to sexual abuse/assault within the facility.”

The facility provided a NDCS / PREA Post Investigation Resident Notification. This notification documents the following:

- Recipient of Notice/Date of Notification
- Nature of Allegation
- Allegation Category
- Did the victim receive written/verbal/Notice of Investigation?
- Did investigation include outside agency? If yes, Name of Agency and date notified
- Date Investigation began and concluded
- 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 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
- Sanction Imposed – unless unfounded
- o Staff Suspect removed from Inmates unit
- o Inmate suspect separated from the victim
- o Staff Suspect no longer employed Suspect (staff or Inmate) indicted
- o Suspect (staff or Inmate) convicted
- Inmate Signature/Inmate #/Date/Time
- PREA Compliance Manager signature/Date/Time
- Facility Warden signature/Date/Time
- PREA Coordinator signature/Date/Time

(d) The Community Corrections Center Omaha PAQ states following a resident's

	<p>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.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section GG. 3., states, "Upon completion of the investigation (including the final review) of an inmate's allegation that another inmate has committed sexual assault/abuse against the inmate, he or she will be informed whenever:</p> <p>a. It is learned the alleged abuser has been indicted on a charge related to sexual assault/abuse within the facility.</p> <p>b. It is learned the alleged abuser has been convicted on a charge related to sexual assault/abuse within the facility."</p> <p>(e) The Community Corrections Center Omaha PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, the number of notifications to residents that were provided pursuant to this standard was zero. Policy compliance can be found in provision (a) of this standard.</p> <p>The facility exceeds the requirements of the standard by ensuring victims are notified of the outcomes of all sexual abuse investigations, including those determined to be unfounded. Providing written and verbal notifications regardless of case disposition demonstrates transparency, respect for victims' rights, and a commitment to trauma-informed communication. This practice reinforces accountability, promotes trust in the reporting process, and reflects a level of diligence that goes beyond compliance with the standard.</p>
--	--

<b>115.276</b>	<b>Disciplinary sanctions for staff</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> <li>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy</li> </ol>



203.11, dated 7.31.2024

Interviews:

1. Warden

The interview with the Warden demonstrated that any employee involved in a sexual abuse incident would be reported to the Central Office, investigators, and the PREA Coordinator. The Warden stated the employee could choose to resign or proceed through the termination process, and any related licensing official or agency would be notified by the investigator.

Site Observation:

In the past twelve months, the facility has had no staff disciplined for violation of the agency's sexual abuse or sexual harassment policy.

(a) The Community Corrections Center Omaha 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 28, 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 would 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 Omaha PAQ states in the last 12 months, there has been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies.

	<p>(c) The Community Corrections Center Omaha PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment. Policy compliance can be found in provision (a) of this standard.</p> <p>(d) The Community Corrections Center Omaha 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. Policy compliance can be found in provision (a) of this standard.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

115.277	Corrective action for contractors and volunteers
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> <li>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Warden</li> </ol> <p>The interview with the Warden demonstrated that any contractor or volunteer involved in a sexual abuse incident would be permanently barred from entering any NDCS institution, and the Investigator would notify the associated agency, law enforcement, and any applicable licensing authority.</p>

	<p>Site Observation:</p> <p>In the last twelve months the facility did not have any volunteers or contractors subject to disciplinary action for violating sexual abuse or sexual harassment policies.</p> <p>(a) The Community Corrections Center Omaha 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.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section II., states, "Any contractor or volunteer who engages in sexual assault/abuse shall be prohibited from contact with inmates 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 inmates, in the case of any other violation of agency sexual assault/abuse or sexual harassment policies by a contractor or volunteer."</p> <p>(b) The Community Corrections Center Omaha PAQ the facility takes appropriate remedial measures and considers whether to prohibit further contact with Residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. Policy compliance can be found in provision (a) of this standard.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.278</b>	<b>Disciplinary sanctions for residents</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Nebraska Department of Correctional Services Rules and Regulations Manual, dated 3.28.2023

Interviews:

1. Warden

The interview with the Warden demonstrated that an inmate found to be involved in a sexual abuse incident would be placed on Central Monitoring, and the nature of the incident would determine the inmate's classification level, any demotion in classification, and the potential for criminal charges.

Site Observation:

During the past twelve months, the facility has had no inmates subject to disciplinary action for violating sexual abuse or sexual harassment policies.

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

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 28, section JJ. 1., states, "Disciplinary Process

1. Inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding the inmate engaged in inmate-on inmate sexual assault or sexual harassment or following a criminal finding of guilt for inmate-on-inmate sexual abuse/assault."

(b) The Community Corrections Center Omaha PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the

underlying reasons or motivations for abuse.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section JJ. 4., states, "If the facility offers therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse, the facility shall consider whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. If such a determination is made the inmate will be re-classified accordingly."

(c) The Community Corrections Center Omaha PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section JJ. 5., states, "Inmates shall not be disciplined for having sexual contact with staff unless it is determined the staff member did not consent to such contact.

(f) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 29, section JJ. 6., states, "For the purpose of disciplinary action, a report of sexual assault/abuse or sexual harassment made in good faith based upon a reasonable belief the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation."

(g) The Community Corrections Center Omaha PAQ states the agency prohibits all sexual activity between residents. If the agency prohibits all sexual activity between residents and disciplines residents for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11,

	<p>page 29, section JJ. 7., states, “While NDCS does prohibit all sexual activity between inmates, such activity, when it occurs, will not constitute sexual abuse if it is determined the activity is consensual and has not been coerced.”</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.282</b>	<b>Access to emergency medical and mental health services</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> <li>3. Nebraska Department of Correctional Services Mental Health PREA Intake Screening Form, dated 3.2025</li> <li>4. Nebraska Department of Correctional Services Mental Health/Medical Referral Form, dated 11.98</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Administrative Nurse</li> <li>2. Associate Director of Nursing</li> <li>3. Behavioral Health Supervisor</li> </ol> <p>Interviews with medical and mental health staff demonstrated that inmates would be transported to The Methodist Medical Center for all emergency services within one hour of a sexual abuse incident occurring.</p> <p>Site Observation:</p> <p>In the past twelve months, the facility has not experienced a sexual abuse allegation that required emergency medical or mental health services.</p>

(a/b) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Mental Health Services Policy 115.23, page 29-30, section KK., states, "f the screening pursuant to PREA Standard 115.41 indicates that a prison/jail inmates has experienced prior sexual victimization, or has perpetrated sexual assault/abuse whether it occurred in an institutional setting or in the community, staff shall ensure that the inmates offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening. Any information related to sexual victimization or abusiveness is strictly limited to medical and mental health practitioners and staff as necessary for treatment plans, security, housing, work education and program assignments.

During an intake screening the inmate does not report prior victimization and or abusiveness but once seen by medical and mental health and decides to report victimization and or abusiveness the facility PREA compliance manager will be notified of such to ensure that a proper PREA screening assessment is completed.

Medical and mental health staff shall obtain informed consent from inmates before reporting prior information about sexual victimization that did not occur in an institutional setting, unless the inmate is under 18 years of age.

The facility provided a Nebraska Department of Correctional Services Mental Health PREA Intake Screening form documenting the following.

Name and number / Date

1. Are you a victim / survivor of sexual abuse?
2. If you ask: Would you like to receive mental health follow up related to that/those experience/s
3. Did this occur in the community or in an institutional setting
4. Have your ever sexually assaulted or sexually abused another person, or have you ever been accused of doing so?
5. Are you incarcerated for a sexual offense? Against a child/adult?
6. Are you in need of any mental health follow-up for any current needs in this

area?

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 Inmate Program
  - o Psychiatric Consult
  - o Medical
  - o Socially & Developmentally Impaired Program
  - o Crisis Intervention
  - o Mental Health Counseling / Assessment
  - o Other
- Comments
- Specific Problem Identified
- Description of Symptoms Inmate is Exhibiting
- Medical/Mental History (Include Current Medication(s))
- Date of Screening Interview / Interviewed by
- Disposition / Date / Initials

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

(d) The Community Corrections Center Omaha PAQ states, treatment services are



	<p>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. Policy compliance can be found in provision (a) of this standard.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.283</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Community Corrections Center Omaha PAQ</li> <li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Administrative Nurse</li> <li>2. Associate Director of Nursing</li> <li>3. Behavioral Health Supervisor</li> </ol> <p>Interviews with medical and mental health staff demonstrated a continuum of medical and mental health treatment begins upon a victim returning from a forensic exam. Staff stated victims would be treated immediately for any medical and mental health concerns and seen by a provider Monday through Friday. Medical and mental health staff stated victims and perpetrators would be evaluated for a continuum of care upon return of a forensic exam.</p> <p>Site Observation:</p> <p>The facility has not experienced the need for emergency medical and or mental health services in the past 12 months.</p> <p>(a-c/g) The Community Corrections Center Omaha PAQ states the facility offers</p>

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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 30, section LL., states, "Inmate victims of sexual assault/abuse shall 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. If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim and immediately notify the appropriate medical and mental health staff.

Inmate victims of sexual assault/abuse shall be 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. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident."

(d) This provision is not applicable as the facility does not care for female residents.

(e) This provision is not applicable as the facility does not care for female residents.

(f) The Community Corrections Center Omaha PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Policy compliance can be found in provision (a) of this standard.

(h) The Community Corrections Center Omaha 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.

The facility exceeds the requirements of the standard by establishing and maintaining a proactive continuum of care for individuals involved in sexual abuse

	allegations. Medical and mental health staff demonstrated clear understanding of their responsibilities to provide immediate treatment and coordinated follow-up care for both victims and perpetrators. This structured and responsive system ensures timely, compassionate, and consistent service delivery. The facility's coordinated approach reflects a trauma-informed and responsive practice that extends beyond compliance, reinforcing the agency's commitment to comprehensive care and safety.
--	---

<b>115.286</b>	<b>Sexual abuse incident reviews</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"><li>1. Community Corrections Center Omaha PAQ</li><li>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li><li>3. Sexual Abuse Incident Review Template</li></ol> <p>Interviews:</p> <ol style="list-style-type: none"><li>1. Warden</li></ol> <p>The interview with the Warden demonstrated that the incident review team is comprised of the Warden, PREA Coordinator, and representatives from medical and mental health services. The Warden explained that when an investigation outcome is unsubstantiated, each team member receives the investigation packet via email for review and provides feedback on what was handled well and what could be improved, after which he makes the final outcome determination. When an investigation is substantiated, the team meets in person to discuss all aspects of the case, collaboratively determine the outcome, and ensure all responsible parties are held accountable.</p> <p>(a) The Community Corrections Center Omaha PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been one criminal and or administrative investigations of alleged sexual abuse completed at the facility,</p>

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 31, section NN. 1-2., 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. It 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.”

(b) The Community Corrections Center Omaha PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only “unfounded” incidents were zero.

(c) The Community Corrections Center Omaha 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. Compliance can be found in provision (b) of this standard.

(c) The Community Corrections Center Omaha 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

	<p>the facility head and Warden.</p> <p>(d) The Community Corrections Center Omaha PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>(e) The Community Corrections Center Omaha PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.287</b>	<b>Data collection</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>Community Corrections Center Omaha PAQ</li> <li>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>Captain / PREA Coordinator</li> </ol> <p>The interview with the PREA Coordinator demonstrated that each facility PREA Compliance Manager provides her with annual sexual harassment and sexual abuse investigation data, which are then aggregated across the agency for review. The aggregated information is used to identify trends, inform training and education for agency and facility personnel, and support the development of the agency's annual report.</p> <p>(a/c) The Community Corrections Center Omaha 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.</p>

	<p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 32, section OO. 1-3, states, “NDCS shall collect accurate, uniform data for every allegation of sexual assault/abuse at all facilities using a standardized instrument and set of definitions. This data shall be aggregated at least annually.</p> <ol style="list-style-type: none"> <li>1. The incident-based data collected shall 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 DOJ, which is completed by the captain/PREA coordinator.</li> <li>2. NDCS shall maintain, review and collect data as needed from all available incident based documents, including reports, investigation files and Sexual Assault/ Abuse Incident Reviews.</li> <li>3. Upon request, NDCS shall provide all such data from the previous calendar year to the DOJ.”</li> </ol> <p>(b) The Community Corrections Center Omaha PAQ states the agency aggregates the incident-based sexual abuse at least annually.</p> <p>(d) The Community Corrections Center Omaha PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.</p> <p>(e) The Community Corrections Center Omaha PAQ states this standard is not applicable as the agency does not contract with private facilities. The contracting sources identified in 115.42 are county contracts and contract language for those facilities is inclusive of PREA Audit requirements.</p> <p>(f) The Community Corrections Center Omaha PAQ states the agency provided DOJ with data from the previous calendar year upon request.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.288</b>	<b>Data review for corrective action</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

## Document Review:

1. Community Corrections Center Omaha PAQ
2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024
3. Nebraska Department of Correctional Services Annual PREA Assessment 2024

## Interviews:

1. Captain / PREA Coordinator
2. Deputy Assistant Director / Agency Head

The interview with both the PREA Coordinator and the Deputy Assistant Director demonstrated that each allegation of sexual harassment or sexual abuse is reviewed at both the facility and agency level at the time of the incident. In addition, recommendations for corrective action are reviewed to ensure implementation occurs at the facility and agency level, as appropriate.

(a) The Community Corrections Center Omaha 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.

Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 33-34, section PP., states, "NDCS shall review data in order to assess and improve the effectiveness of NDCS's sexual assault/abuse prevention, detection and response policies, practices and training by:

- a. Identifying problem areas
- b. Taking corrective action on an ongoing basis
- c. Preparing an annual report of its findings and corrective actions for each facility and NDCS as a whole.

1. These reports shall include a comparison of three years and corrective actions with those from prior years and shall provide an assessment of NDCS's progress in addressing sexual assault/abuse.

2. The reports shall be approved by the director/designee and made readily available to the public through its website.

3. NDCS may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.”

(b) The Community Corrections Center Omaha 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 facility provided the Nebraska Department of Correctional Services Annual PREA Assessment 2024. The report compares the following data from years 2014 through 2024.

- Introduction of PREA
  - o Nebraska Department of Correctional Services Zero Tolerance Policy
  - o Reporting options for inmates
  - o PREA orientation education provided to inmates
- Assessment of NDCS’s Progress
- Goals for 2025
- Facility Audit Schedule
- PREA Investigations to include:
  - o Total investigations for 2024
  - o Staff Perpetrated Sexual Assault
  - o Staff Perpetrated Sexual Abuse
  - o Staff Perpetrated Exhibitionism
  - o Staff Perpetrated Voyeurism
  - o Staff Perpetrated Sexual Abuse
  - o Inmate Perpetrated Sexual Assault
  - o Inmate Perpetrated Sexual Abuse



	<ul style="list-style-type: none"> <li>o Inmate Perpetrated Sexual Harassment</li> <li>o County Attorney Referrals</li> <li>· Victim Advocacy</li> <li>· Supervision and Monitoring</li> <li>· Nebraska Statewide Coordinated Response Team</li> <li>o Vision</li> <li>o Mission</li> <li>o CRT members</li> </ul> <p>The annual report is signed by the PREA Coordinator, Assistant Deputy Director of Intelligence</p> <p>Deputy Director of Prisons, Deputy Director of Programs, Assistant Director and the Director.</p> <p>(c) The Community Corrections Center Omaha PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head. The Annual Report is available at <a href="https://corrections.nebraska.gov/about/prison-rape-elimination-act-0">https://corrections.nebraska.gov/about/prison-rape-elimination-act-0</a>.</p> <p>1. The Community Corrections Center Omaha 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.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

115.289	Data storage, publication, and destruction
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <p>1. Community Corrections Center Omaha PAQ</p>

	<p>2. Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, dated 7.31.2024</p> <p>(a/d) The Community Corrections Center Omaha PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p>Nebraska Department of Correctional Services, Sexual Assault/Abuse Policy 203.11, page 34, section QQ., states, “The data collected shall be securely retained. All aggregated sexual assault/abuse data shall be made readily available to the public at least annually through the agency’s website; all personal identifiers will be removed prior to making the information available to the public. The captain/PREA coordinator shall be responsible for collection and retention of said data. NDCS shall maintain sexual assault/abuse data collected for at least 10 years after the date of the initial collection unless Federal, State or local law requires otherwise.”</p> <p>The facility provided a Schedule 92, Nebraska Department of Correctional Services demonstrating request for approval of records retention and a disposition schedule has been requested and documented.</p> <p>(b) The Community Corrections Center Omaha PAQ states the agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website; however, the agency is not currently contracting for confinement of their inmates at this time. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Community Corrections Center Omaha PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>
--	---

<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<b>Auditor Discussion</b>
	<p>(a) During the prior three-year audit period, the agency ensured that each facility it operated was audited once.</p> <p>(b) This is the fifth audit cycle for the Community Corrections Center of Omaha and represents the first year of the current audit cycle.</p> <p>(h) The Auditor was granted complete access to all areas of the facility and permitted to observe operations as needed.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents, including electronically stored information.</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as they would when communicating with legal counsel.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>(b) The agency has posted the current 2022 PREA audit report on their website.</p> <p>Based on the review of documentation, observations, and interviews, the facility meets the standard requirements.</p>

<b>Appendix: Provision Findings</b>		
<b>115.211 (a)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.211 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	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
<b>115.212 (a)</b>	<b>Contracting with other entities for the confinement of residents</b>	
	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
<b>115.212 (b)</b>	<b>Contracting with other entities for the confinement of residents</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents.)	na
<b>115.212 (c)</b>	<b>Contracting with other entities for the confinement of residents</b>	
	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
<b>115.213 (a)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.213 (b)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.213 (c)</b>	<b>Supervision and monitoring</b>	
	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
<b>115.215 (a)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.215 (b)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if the facility does not have female inmates.)	na
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
<b>115.215 (c)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.215 (d)</b>	<b>Limits to cross-gender viewing and searches</b>	
	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
<b>115.215 (e)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.215 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.216 (a)</b>	<b>Residents with disabilities and residents who are limited English proficient</b>	
	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	yes

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



	expressively, using any necessary specialized vocabulary?	
<b>115.216 (c)</b>	<b>Residents with disabilities and residents who are limited English proficient</b>	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations?	yes
<b>115.217 (a)</b>	<b>Hiring and promotion decisions</b>	
	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

<b>115.217 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with residents?	yes
	Does the agency consider any incidents of sexual harassment in determining to enlist the services of any contractor who may have contact with residents?	yes
<b>115.217 (c)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.217 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
<b>115.217 (e)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.217 (f)</b>	<b>Hiring and promotion decisions</b>	
	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	yes

	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?	
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.217 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.217 (h)</b>	<b>Hiring and promotion decisions</b>	
	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
<b>115.218 (a)</b>	<b>Upgrades to facilities and technology</b>	
	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
<b>115.218 (b)</b>	<b>Upgrades to facilities and technology</b>	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated any video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012 or since the last PREA audit, whichever is later.)	yes
<b>115.221</b>	<b>Evidence protocol and forensic medical examinations</b>	

<b>(a)</b>		
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal or administrative sexual abuse investigations.)	yes
<b>115.221 (b)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.221 (c)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.221 (d)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	Does the agency attempt to make available to the victim a victim	yes

	advocate from a rape crisis center?	
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<b>115.221 (e)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.221 (f)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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.)	na
<b>115.221 (h)</b>	<b>Evidence protocol and forensic medical examinations</b>	
	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
<b>115.222 (a)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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	yes

	investigation is completed for all allegations of sexual harassment?	
<b>115.222 (b)</b>	<b>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
<b>115.222 (c)</b>	<b>Policies to ensure referrals of allegations for investigations</b>	
	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
<b>115.231 (a)</b>	<b>Employee training</b>	
	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.	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<b>115.231 (b)</b>	<b>Employee training</b>	
	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
<b>115.231 (c)</b>	<b>Employee training</b>	
	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
<b>115.231 (d)</b>	<b>Employee training</b>	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

<b>115.232 (a)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.232 (b)</b>	<b>Volunteer and contractor training</b>	
	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
<b>115.232 (c)</b>	<b>Volunteer and contractor training</b>	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
<b>115.233 (a)</b>	<b>Resident education</b>	
	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
<b>115.233 (b)</b>	<b>Resident education</b>	
	Does the agency provide refresher information whenever a	yes



	resident is transferred to a different facility?	
<b>115.233 (c)</b>	<b>Resident education</b>	
	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
<b>115.233 (d)</b>	<b>Resident education</b>	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
<b>115.233 (e)</b>	<b>Resident education</b>	
	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
<b>115.234 (a)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.234 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include: Techniques for interviewing	yes

	sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	
	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
<b>115.234 (c)</b>	<b>Specialized training: Investigations</b>	
	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
<b>115.235 (a)</b>	<b>Specialized training: Medical and mental health care</b>	
	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	yes

	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.)	
	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
<b>115.235 (b)</b>	<b>Specialized training: Medical and mental health care</b>	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency does not employ medical staff or the medical staff employed by the agency do not conduct forensic exams.)	na
<b>115.235 (c)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.235 (d)</b>	<b>Specialized training: Medical and mental health care</b>	
	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
<b>115.241 (a)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive	yes

	toward other residents?	
	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
<b>115.241 (b)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
<b>115.241 (c)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
<b>115.241 (d)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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.	yes

	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
<b>115.241 (e)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.241 (f)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.241 (g)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.241</b>	<b>Screening for risk of victimization and abusiveness</b>	

<b>(h)</b>		
	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
<b>115.241 (i)</b>	<b>Screening for risk of victimization and abusiveness</b>	
	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
<b>115.242 (a)</b>	<b>Use of screening information</b>	
	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
<b>115.242 (b)</b>	<b>Use of screening information</b>	
	Does the agency make individualized determinations about how to ensure the safety of each resident?	yes

<b>115.242 (c)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.242 (d)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.242 (e)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.242 (f)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.251 (a)</b>	<b>Resident reporting</b>	
	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
<b>115.251 (b)</b>	<b>Resident reporting</b>	

	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
<b>115.251 (c)</b>	<b>Resident reporting</b>	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
<b>115.251 (d)</b>	<b>Resident reporting</b>	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
<b>115.252 (a)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.252 (b)</b>	<b>Exhaustion of administrative remedies</b>	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve	yes



	with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	
<b>115.252 (c)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.252 (d)</b>	<b>Exhaustion of administrative remedies</b>	
	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
<b>115.252 (e)</b>	<b>Exhaustion of administrative remedies</b>	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party files such a request on behalf	yes

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

	alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	
<b>115.253 (a)</b>	<b>Resident access to outside confidential support services</b>	
	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
<b>115.253 (b)</b>	<b>Resident access to outside confidential support services</b>	
	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
<b>115.253 (c)</b>	<b>Resident access to outside confidential support services</b>	
	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
<b>115.254 (a)</b>	<b>Third party reporting</b>	
	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
<b>115.261 (a)</b>	<b>Staff and agency reporting duties</b>	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or	yes

	information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
<b>115.261 (b)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.261 (c)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.261 (d)</b>	<b>Staff and agency reporting duties</b>	
	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
<b>115.261 (e)</b>	<b>Staff and agency reporting duties</b>	
	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

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

	washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
<b>115.264 (b)</b>	<b>Staff first responder duties</b>	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
<b>115.265 (a)</b>	<b>Coordinated response</b>	
	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
<b>115.266 (a)</b>	<b>Preservation of ability to protect residents from contact with abusers</b>	
	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
<b>115.267 (a)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.267 (b)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.267 (c)</b>	<b>Agency protection against retaliation</b>	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency:4. Monitor resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor resident program changes?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignment of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
<b>115.267 (d)</b>	<b>Agency protection against retaliation</b>	
	In the case of residents, does such monitoring also include periodic status checks?	yes
<b>115.267 (e)</b>	<b>Agency protection against retaliation</b>	
	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
<b>115.271 (a)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (b)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (c)</b>	<b>Criminal and administrative agency investigations</b>	
	Do investigators gather and preserve direct and circumstantial	yes



	evidence, including any available physical and DNA evidence and any available electronic monitoring data?	
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
<b>115.271 (d)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (e)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (f)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (g)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271</b>	<b>Criminal and administrative agency investigations</b>	

<b>(h)</b>		
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
<b>115.271 (i)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (j)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.271 (l)</b>	<b>Criminal and administrative agency investigations</b>	
	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
<b>115.272 (a)</b>	<b>Evidentiary standard for administrative investigations</b>	
	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
<b>115.273 (a)</b>	<b>Reporting to residents</b>	
	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
<b>115.273 (b)</b>	<b>Reporting to residents</b>	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency	yes

	request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
<b>115.273 (c)</b>	<b>Reporting to residents</b>	
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
<b>115.273 (d)</b>	<b>Reporting to residents</b>	
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform	yes

	the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	
<b>115.273 (e)</b>	<b>Reporting to residents</b>	
	Does the agency document all such notifications or attempted notifications?	yes
<b>115.276 (a)</b>	<b>Disciplinary sanctions for staff</b>	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
<b>115.276 (b)</b>	<b>Disciplinary sanctions for staff</b>	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
<b>115.276 (c)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.276 (d)</b>	<b>Disciplinary sanctions for staff</b>	
	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
<b>115.277 (a)</b>	<b>Corrective action for contractors and volunteers</b>	

	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
<b>115.277 (b)</b>	<b>Corrective action for contractors and volunteers</b>	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
<b>115.278 (a)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.278 (b)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.278 (c)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.278 (d)</b>	<b>Disciplinary sanctions for residents</b>	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a	yes

	condition of access to programming and other benefits?	
<b>115.278 (e)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.278 (f)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.278 (g)</b>	<b>Disciplinary sanctions for residents</b>	
	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
<b>115.282 (a)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.282 (b)</b>	<b>Access to emergency medical and mental health services</b>	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
<b>115.282 (c)</b>	<b>Access to emergency medical and mental health services</b>	
	Are resident victims of sexual abuse offered timely information	yes

	about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	
<b>115.282 (d)</b>	<b>Access to emergency medical and mental health services</b>	
	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
<b>115.283 (a)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
<b>115.283 (b)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
<b>115.283 (c)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
<b>115.283 (d)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if “all-male” facility. Note: in “all-male” facilities, there may be residents who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
<b>115.283 (e)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive	na

	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.)	
<b>115.283 (f)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
<b>115.283 (g)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.283 (h)</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>	
	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
<b>115.286 (a)</b>	<b>Sexual abuse incident reviews</b>	
	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
<b>115.286 (b)</b>	<b>Sexual abuse incident reviews</b>	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
<b>115.286 (c)</b>	<b>Sexual abuse incident reviews</b>	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes



<b>115.286 (d)</b>	<b>Sexual abuse incident reviews</b>	
	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.	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<b>115.286 (e)</b>	<b>Sexual abuse incident reviews</b>	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
<b>115.287 (a)</b>	<b>Data collection</b>	
	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
<b>115.287 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.287 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data	yes

	necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	
<b>115.287 (d)</b>	<b>Data collection</b>	
	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
<b>115.287 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	na
<b>115.287 (f)</b>	<b>Data collection</b>	
	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
<b>115.288 (a)</b>	<b>Data review for corrective action</b>	
	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
<b>115.288 (b)</b>	<b>Data review for corrective action</b>	

	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.288 (c)</b>	<b>Data review for corrective action</b>	
	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
<b>115.288 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
<b>115.289 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.287 are securely retained?	yes
<b>115.289 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.289 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.289 (d)</b>	<b>Data storage, publication, and destruction</b>	
	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
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	

	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
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
<b>115.401 (h)</b>	<b>Frequency and scope of audits</b>	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
<b>115.401 (i)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
<b>115.401 (m)</b>	<b>Frequency and scope of audits</b>	
	Was the auditor permitted to conduct private interviews with residents?	yes
<b>115.401 (n)</b>	<b>Frequency and scope of audits</b>	
	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
<b>115.403</b>	<b>Audit contents and findings</b>	

(f)	
	<div data-bbox="322 185 1273 555"> <p>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.)</p> </div> <div data-bbox="1305 185 1353 219">yes</div>