

# PREA Facility Audit Report: Final

**Name of Facility:** Wichita Transitional Center

**Facility Type:** Community Confinement

**Date Interim Report Submitted:** NA

**Date Final Report Submitted:** 05/30/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> Karen d. Murray	<b>Date of Signature:</b> 05/30/2025

AUDITOR INFORMATION	
<b>Auditor name:</b>	Murray, Karen
<b>Email:</b>	kdmconsults1@gmail.com
<b>Start Date of On-Site Audit:</b>	05/15/2025
<b>End Date of On-Site Audit:</b>	05/16/2025

FACILITY INFORMATION	
<b>Facility name:</b>	Wichita Transitional Center
<b>Facility physical address:</b>	701 East 21st Street North, Wichita, Kansas - 67214
<b>Facility mailing address:</b>	

Primary Contact
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<b>Name:</b>	Michael L. Little
<b>Email Address:</b>	michael.little@csgprograms.com
<b>Telephone Number:</b>	316 680-5144

<b>Facility Director</b>	
<b>Name:</b>	Michael L. Little
<b>Email Address:</b>	michael.little@csgprograms.com
<b>Telephone Number:</b>	316 680-5144

<b>Facility PREA Compliance Manager</b>	
<b>Name:</b>	Kaylan Edwards
<b>Email Address:</b>	kaylan.edwards@csgprograms.com
<b>Telephone Number:</b>	316.207.1091
<b>Name:</b>	Michael Little
<b>Email Address:</b>	michael.little@csgprograms.com
<b>Telephone Number:</b>	316.680.5144

<b>Facility Characteristics</b>	
<b>Designed facility capacity:</b>	70
<b>Current population of facility:</b>	53
<b>Average daily population for the past 12 months:</b>	60
<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>	Both women/girls and men/boys
<b>In the past 12 months, which population(s)</b>	

<p>has the facility held? Select all that apply (Nonbinary describes a person who does not identify exclusively as a boy/man or a girl/woman. Some people also use this term to describe their gender expression. For definitions of “intersex” and “transgender,” please see <a href="https://www.prearesourcecenter.org/standard/115-5">https://www.prearesourcecenter.org/standard/115-5</a>)</p>	
<p><b>Age range of population:</b></p>	18 - 80
<p><b>Facility security levels/resident custody levels:</b></p>	Low
<p><b>Number of staff currently employed at the facility who may have contact with residents:</b></p>	18
<p><b>Number of individual contractors who have contact with residents, currently authorized to enter the facility:</b></p>	1
<p><b>Number of volunteers who have contact with residents, currently authorized to enter the facility:</b></p>	0

<b>AGENCY INFORMATION</b>	
<b>Name of agency:</b>	Correctional Solutions Group, LLC.
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	PO Box 7760, Tyler, Texas - 75711
<b>Mailing Address:</b>	P.O. Box 7760, Tyler, Texas - 75711
<b>Telephone number:</b>	9036306291

<b>Agency Chief Executive Officer Information:</b>	
<b>Name:</b>	John Forren
<b>Email Address:</b>	forren@aol.com

<b>Telephone Number:</b>	(619) 249-9816
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<b>Agency-Wide PREA Coordinator Information</b>			
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<b>Name:</b>	Carol Powell	<b>Email Address:</b>	carol.powell@csgprograms.com
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<b>Facility AUDIT FINDINGS</b>
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<b>Summary of Audit Findings</b>
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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.

<b>Number of standards exceeded:</b>	
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2	<ul style="list-style-type: none"> <li>• 115.213 - Supervision and monitoring</li> <li>• 115.252 - Exhaustion of administrative remedies</li> </ul>
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<b>Number of standards met:</b>	
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39	
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<b>Number of standards not met:</b>	
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0	
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## POST-AUDIT REPORTING INFORMATION

### GENERAL AUDIT INFORMATION

#### On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-05-15
2. End date of the onsite portion of the audit:	2025-05-16

#### 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:	Wichita Area Sexual Assault Center - advocate Facility external hotline

### AUDITED FACILITY INFORMATION

14. Designated facility capacity:	70
15. Average daily population for the past 12 months:	55
16. Number of inmate/resident/detainee housing units:	12
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>18. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:</b>	62
<b>19. 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>	8
<b>20. 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>	2
<b>21. 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>	0
<b>22. 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>	1
<b>23. 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>	0
<b>24. 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>	1

<p><b>25. 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></p>	<p>0</p>
<p><b>26. 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></p>	<p>0</p>
<p><b>27. 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></p>	<p>0</p>
<p><b>28. 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></p>	<p>0</p>
<p><b>29. 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></p>	<p>No text provided.</p>
<p><b>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</b></p>	
<p><b>30. 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></p>	<p>21</p>
<p><b>31. 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></p>	<p>0</p>

<p><b>32. 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></p>	<p>0</p>
<p><b>33. 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></p>	<p>No text provided.</p>
<p><b>INTERVIEWS</b></p>	
<p><b>Inmate/Resident/Detainee Interviews</b></p>	
<p><b>Random Inmate/Resident/Detainee Interviews</b></p>	
<p><b>34. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</b></p>	<p>8</p>
<p><b>35. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</b></p>	<p> <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 checked="" type="checkbox"/> Gender  <input type="checkbox"/> Other  <input type="checkbox"/> None </p>
<p><b>36. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</b></p>	<p>The day before the onsite review the facility provided a roster of all male and female residents by target and housing unit. Once the auditor choose the targeted residents, random residents were chosen to ensure a percentage of female residents were selected and the remainder of random male residents were chosen by different dorms.</p>

<b>37. 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>38. 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>39. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</b>	8
<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>40. 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>41. 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>	1

<p><b>42. 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>42. 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>42. 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>After review of the facility roster and interviews with specialized staff, this category of resident did not appear to be residing at the facility during the onsite review.</p>
<p><b>43. 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>1</p>
<p><b>44. 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>44. 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>44. 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>After review of the facility roster and interviews with specialized staff, this category of resident did not appear to be residing at the facility during the onsite review.</p>
<p><b>45. 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>1</p>
<p><b>46. 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></p>	<p>0</p>
<p><b>46. 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>46. 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>After review of the facility roster and interviews with specialized staff, this category of resident did not appear to be residing at the facility during the onsite review.</p>
<p><b>47. 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></p>	<p>0</p>

<p><b>47. 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>47. 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>Although no residents reported sexual abuse one resident reported sexual harassment and she was interviewed.</p>
<p><b>48. 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></p>	<p>0</p>
<p><b>48. 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>48. 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>After review of the facility roster and interviews with specialized staff, this category of resident did not appear to be residing at the facility during the onsite review. In addition, there were no residents who disclosed prior abuse during the 16 formal interviews.</p>

<p><b>49. 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></p>	<p>0</p>
<p><b>49. 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>49. 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>The facility does not have segregated housing.</p>
<p><b>50. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</b></p>	<p>Seven informal interviews were conducted during the tour. All were aware of the upcoming audit, the agency zero tolerance policy and how to report internally or externally.</p>
<p><b>Staff, Volunteer, and Contractor Interviews</b></p>	
<p><b>Random Staff Interviews</b></p>	
<p><b>51. Enter the total number of RANDOM STAFF who were interviewed:</b></p>	<p>5</p>

<p><b>52. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</b></p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p><b>53. Were you able to conduct the minimum number of RANDOM STAFF interviews?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
<p><b>53. Select the reason(s) why you were unable to conduct the minimum number of RANDOM STAFF interviews: (select all that apply)</b></p>	<p><input type="checkbox"/> Too many staff declined to participate in interviews.</p> <p><input type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles).</p> <p><input checked="" type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews.</p> <p><input type="checkbox"/> Other</p>
<p><b>54. 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></p>	<p>Every staff on every shift was interviewed during the onsite review.</p>

**Specialized Staff, Volunteers, and Contractor Interviews**

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

<b>55. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</b>	11
<b>56. Were you able to interview the Agency Head?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>57. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>58. Were you able to interview the PREA Coordinator?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
<b>59. 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)

**60. 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>61. 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>62. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No
<b>63. Provide any additional comments regarding selecting or interviewing specialized staff.</b>	The facility does not utilize volunteers or contract personnel.

## 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.

<b>64. Did you have access to all areas of the facility?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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### Was the site review an active, inquiring process that included the following:

<b>65. 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)?</b>	<input checked="" type="radio"/> Yes <input type="radio"/> No
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<p><b>66. 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)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>67. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>68. Informal conversations with staff during the site review (encouraged, not required)?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>69. 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></p>	<p>Seven informal conversations with residents and two informal conversations with staff took place during the tour.</p>
<p><b>Documentation Sampling</b></p>	
<p>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.</p>	
<p><b>70. 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></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p><b>71. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</b></p>	<p>No text provided.</p>

# SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

### 72. 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

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

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

**Sexual Abuse and Sexual Harassment Investigation Outcomes**

**Sexual Abuse Investigation Outcomes**

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

**74. Criminal SEXUAL ABUSE 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 abuse</b>	0	0	0	0	0
<b>Staff-on-inmate sexual abuse</b>	0	0	0	0	0
<b>Total</b>	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
<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

**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.

**76. 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

**77. 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	1
<b>Staff-on-inmate sexual harassment</b>	0	0	0	0
<b>Total</b>	0	0	0	1

**Sexual Abuse and Sexual Harassment Investigation Files Selected for Review**

**Sexual Abuse Investigation Files Selected for Review**

<b>78. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:</b>	0
<b>78. Explain why you were unable to review any sexual abuse investigation files:</b>	The facility has not received a sexual abuse allegation in more than 12 months. Specialized staff reported none had been received in her employ of five years.

<p><b>79. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p><b>Inmate-on-inmate sexual abuse investigation files</b></p>	
<p><b>80. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>81. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>82. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p><b>Staff-on-inmate sexual abuse investigation files</b></p>	
<p><b>83. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</b></p>	<p>0</p>
<p><b>84. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p><b>85. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p><b>Sexual Harassment Investigation Files Selected for Review</b></p>	
<p><b>86. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>87. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p><b>Inmate-on-inmate sexual harassment investigation files</b></p>	
<p><b>88. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b></p>	<p>1</p>
<p><b>89. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</b></p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p><b>90. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</b></p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

<b>Staff-on-inmate sexual harassment investigation files</b>	
<b>91. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</b>	0
<b>92. 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>93. 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>94. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</b>	No text provided.
<b>SUPPORT STAFF INFORMATION</b>	
<b>DOJ-certified PREA Auditors Support Staff</b>	
<b>95. 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.</b>	<input type="radio"/> Yes <input checked="" type="radio"/> No

## Non-certified Support Staff

96. 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

97. 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

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<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>	
<b>Auditor Discussion Instructions</b>	
<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>	

<b>115.211</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Correctional Solutions Group Organizational Chart, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random residents</li> <li>2. Targeted residents</li> <li>3. Security Monitors</li> </ol>

4. Facility Director

5. Re-Entry Service Manager

Through interviews with residents and staff and review of resident and staff files, it is evident that this facility interweaves requirements of PREA in their daily protocols. Both residents and staff could speak to facility PREA practices and protocols being used as is described in the agency's PREA policy. The Facility Director could attest to having the required time to implement PREA protocols.

Site Review Observation:

During the tour of the facility audit notices and No Mean No flyers with information on the agency zero tolerance policy, multiple and internal reporting options, information on resident rights and the address and phone number to the local sexual abuse advocacy center was observed to be posted throughout the facility to include the entry to the facility, hallways, near resident phones, in day rooms and in the dining hall.

During formal interviews with residents the following unsolicited comments were provided.

- 95% of residents stated they feel sexually safe in the facility.
- Resident who reported sexual harassment stated the facility responded quickly, took statements from female residents and no longer make them go down that hallway for the medications anymore.
- The daytime lady is good staff here. When she did my intake she said, 'seriously, report anything' she's very thorough.
- They stay on it; we have a town meeting once a month.
- They are very respectful
- Even though this is a coed facility they look out for us, they protect us.
- We can email resident requests.
- They take PREA very seriously.
- Day staff is the hardest working person here - we can tell her anything - she makes us feel safe
- Highly respectable to females - very relatable - treat us like humans
- They provide us with mental health counseling.

During formal interviews with staff the following unsolicited comments were provided.

- We have monthly team meetings and we always talk about PREA.
- I feel comfortable doing searches on male or female residents.
- Transgender and intersex residents are searched by the staff of their preference.
- We consistently make sure they are aware of mental health services that are available to them.
- We provide transgender and intersex residents with accommodations within 48 hours of admission and follow up with them every two weeks on how they are doing.

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 2, section Prevention and Planning states, "Zero-Tolerance of Sexual Abuse and Sexual Harassment: CSG has instituted a zero-tolerance policy toward all forms of Sexual Harassment and Sexual Abuse in all of its facilities. All CSG, Employees, Contractors, and Volunteers have a responsibility to report all allegations or knowledge of Sexual Abuse, Sexual Harassment, romantic, or sexual contact that takes place within a CSG operated facility or other offender program. An investigation is conducted for all allegations of sexual misconduct. If sexual misconduct is substantiated, appropriate disciplinary actions will be taken against the Employee, Contractor, or individuals in a Correctional Solutions Group Facility or Program, including possible criminal prosecution."

(b) The Wichita Transitional Center 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

	<p>position of the PREA Coordinator in the agency's organizational structure who reports to the Chief Operating Officer.</p> <p>The facility provided a Correctional Solutions Group Organization Chart demonstrating the PREA Coordinator reports directly to the Chief Operating Officer.</p> <p>Through such reviews, the facility met the standards requirements.</p>
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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>1. Wichita Transitional Center PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The interview with the Facility Director demonstrated the facility does not have privatized contracts.</p> <p>(a) The Wichita Transitional Center PAQ states agency does not contract with private agencies for confinement services of their residents.</p> <p>Through such reviews, the facility meets this standards requirements.</p>

115.213	Supervision and monitoring
	<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. Wichita Transitional Center PAQ</li> </ol>

2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025

3. Wichita Transitional Center Staffing Plan, dated 12.12.2024

Interviews:

1. Security Monitors

2. Facility Director

Interviews with Security monitors demonstrated they conduct rounds at least three times per shift; however, each try to complete rounds each hour. Each of the Security Monitors stated they announce their gender every time they enter opposite gender dorm areas.

Site Review Observations:

During the tour the Guardian system was observed to have entry points in every dorm, hallway, bathroom, day room and dining hall. Cross gender announcements were made each time we entered male and female dorm areas/rooms.

(a) The Wichita Transitional Center 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 64. 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 67.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy page 3, section Supervision and Monitoring a-d, state,

a. Each facility operated by CSG shall develop, document, and make its best efforts to comply with staffing plan that provides for adequate levels of staffing, and where applicable, video monitoring, to protect residents against sexual abuse.

b. CSG's Staffing Plans and corresponding Facility Layout are designed specifically for each of its facility locations. The staffing requirements are specific to each location and minimum requirements are stated in the contract. In addition to contractual staffing requirements, safety for staff and residents and prevention of sexual abuse/harassment is the main objective of the Plan. Adequate supervision and staff oversight of all activities and areas of the facility are key elements of the plan.

c. In developing Staffing Plans for Jail and Prison facilities, the following items are considered:

- i. Generally accepted detention and correctional practices;
- ii. Any judicial findings of inadequacy;
- iii. Any findings of inadequacy from Federal Investigative agencies;
- iv. Any findings of inadequacy from internal or external oversight bodies;
- v. All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- vi. The composition of the inmate population;
- vii. The number and placement of supervisory staff;
- viii. Institutional programs occurring on a particular shift;
- ix. Any applicable State or local laws, regulations, or standards; and
- x. The prevalence of substantiated and unsubstantiated incidents of sexual abuse.
- xi. Each jail operated by CSG shall develop and implement both policy and procedure of having intermediate-level or higher-level supervisor conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy and practice shall be implemented for all shifts. Staff are prohibited from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility.

d. In developing staffing plans, each community confinement center operated by CSG shall consider:

- i. The physical layout of each facility;
- ii. The composition of the resident population;
- iii. The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- iv. Any other relevant factors.

	<p>The facility provided a Wichita Transitional Center Staffing Plan. The staffing plan includes the following components.</p> <ol style="list-style-type: none"> <li>1. The physical layout of the facility</li> <li>2. The composition of the resident population</li> <li>3. Accountability of residents</li> <li>4. Annual review of the staffing plan procedures</li> <li>5. Camera placement and video monitoring</li> <li>6. All other relevant factors</li> </ol> <p>The staffing plan is signed by the Facility Director and the PREA Coordinator on 12.12.2024.</p> <p>(a) The Wichita Transitional Center PAQ states the facility documents each time the staffing plan is not complied with, the facility documents and justifies deviations. The PAQ states “There has been zero deviation from staffing plan in the past twelve months”</p> <p>(c) The Wichita Transitional Center 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.</p> <p>Through such reviews of the facility completing multiple rounds throughout each shift, the facility exceed the standard requirements.</p>
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<b>115.215</b>	<b>Limits to cross-gender viewing and searches</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> </ol>

2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated
3. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025
4. 20 Certificates for Cross Gender and Transgender Pat Searches.
5. Guidance in Cross-Gender and Transgender Pat Search Curriculum, dated 2.2015

Interviews:

1. Random residents
2. Targeted residents
3. Security Monitors

Interviews with eight random and eight targeted residents demonstrated 15 of those residents stated the pat search and urinalysis testing processes are conducted professionally by staff. The one staff who stated no he was disrespected by staff and asked to strip down to his boxers and jump up and down in front of cameras in the vestibule. The cognitively delayed resident could not provide names of both staff, dates when this occurred, time of day or any other relevant information regarding the event.

Interviews with Security Monitors demonstrated each had been trained on pat searches and would search transgender or intersex residents by their preference.

Site Review Observation:

During the tour the search area was observed to be at the entrance to the facility, under camera view in front of large windows to the outside of the facility and hallway to the interior of the facility. The urine screening testing bathroom was observed to be in two private bathrooms in the hallway. Both bathrooms have full restroom doors with no access to camera view.

(a) Wichita Transitional Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their Residents. In the past 12 months the facility has conducted zero cross-gender strip or cross-gender visual body cavity searches of residents.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 21, section 115.215 a. states, "The facility shall not conduct cross-gender strip 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."

(b) Wichita Transitional Center PAQ states the facility does not permit cross-gender pat-down searches of female residents, absent exigent circumstances.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 21, section 115.215 b., states, "As of August 20, 2015, or August 20, 2017, for a facility whose rated capacity does not exceed 50 residents, the facility shall not permit cross-gender pat-down searches of female residents, absent exigent circumstances. Facilities shall not restrict female residents' access to regularly available programming or other outside opportunities in order to comply with this provision."

(a) Wichita Transitional Center 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 PAQ states, "There is always male and female staff on duty 24/7."

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 21, section 115.215 c., states, "The facility shall document all cross-gender strip searches and cross-gender visual body cavity searches and shall document all cross-gender pat-down searches of female residents."

(d) Wichita Transitional Center PAQ states the facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page

21, section 115.215 d., states, “The facility shall implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Such policies and procedures shall 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.”

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

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 4, section 1. d. states, “The facility shall not search or physically examine a transgender or intersex resident for the sole purpose of determining the resident’s genital status. If the resident’s genital status is unknown, it may be determined during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner.”

(f) The Wichita Transitional Center PAQ states 100 percent 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.

The facility provided Guidance in Cross-Gender and Transgender Pat Search Curriculum demonstrating appropriate facility personnel have been educated on developing skills for performing cross-gender pat searches and searches of transgender and intersex inmates and residents per PREA Standards §115.215.

The facility provided 20 training completion certificates for Cross Gender and Transgender Pat Searches.

Through such reviews, the facility exceeds this standards requirements.

**proficient**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025
3. Language Line Interpreting Services

Interviews:

1. Security Monitors

Interviews with Security Monitors demonstrated each would utilize a staff or the language line for all interpreting services.

(a) The Wichita Transitional Center 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. The PAQ states, "The Wichita Transitional Center is handicap accessible and the staff is bilingual. Communication with residents has not been an issue and translations are done upon request from the resident. Residents' rights are reviewed annually by all WTC staff and include PREA practices for residents with disabilities."

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5, section 2. a. Residents with Disabilities and Residents Who are Limited English Proficient states, "CSG is responsible for ensuring that each facility takes appropriate steps to ensure that residents with disabilities (including, for example, residents who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), 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. Such steps shall include, when necessary to ensure effective communication with residents who are deaf or hard of hearing, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary."

	<p>The facility provided a LanguageLine Application demonstrating the facility has an account and pin number once these services may need to be utilized.</p> <p>(b) The Wichita Transitional Center 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.</p> <p>(c) The Wichita Transitional Center 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. 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.</p> <p>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5, section 2. c. states, "CSG shall 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, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary."</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.217</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1,</li> </ol>

dated 1.31.2025

Interviews:

1. Accounting Clerk – Human Resources

The interview with the Accounting Clerk demonstrated applicants all applicants and contractors must clear a criminal background check before having access to residents. The Bureau of Prisons continuously keeps the facility aware of information on background information Administrative adjudication questions are completed during the application, interview and promotional processes and sexual harassment is reviewed and considered on a case-by-case basis. The Facility Director completes and answers institutional reference questions for applicable personnel and affirmative duty must be reported immediately and the facility is mandated to report to the Bureau of Prisons.

Site Review Observation:

By utilizing the PREA Community Confinement Documentation Review Employee File/Records template, 20 employee files reviewed demonstrated each had background checks upon hire. The facility was able to demonstrate administrative adjudication questions were asked during the application and promotion processes and institutional reference checks are completed for applicable applicants.

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5, section 3. a. Hiring and Promotion Decisions, states, “The Company shall not hire or promote anyone who may have contact with residents, and shall not enlist the services of any contractor who may have contact with residents, who:

i. 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);

- ii. 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
- iii. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (1)(b) of this section.”

(b) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5, section 3. b. states, “The Company shall consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor who may have contact with residents.”

(c) The Wichita Transitional Center 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 eight.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5, section 3. c. states, “Before hiring new employees, who may have contact with residents, the Company shall:

- I. Perform a criminal background records check; and
- II. 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.
- III. The agency shall also perform a criminal background record check before enlisting the services of any contractor who may have contact with residents.”

(d) The Wichita Transitional Center 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 zero. Policy compliance can be found in provision (c) of this standard.

(e) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5-6, section 3. e. states, "The Company shall 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."

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

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 5-6, section 3. f. states, "Material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination."

Through such reviews, the facility meets this standards requirements.

<b>115.218</b>	<b>Upgrades to facilities and technology</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review:  1. Wichita Transitional Center PAQ  Interviews:

	<p>1. Facility Director</p> <p>The interview with the Facility Director demonstrated the facility has not acquired a new facility, made any substantial expansions, modifications or added cameras since the last PREA audit.</p> <p>Site Review Observation:</p> <p>During the tour cameras were observed in the hallways, janitor closets, kitchen, dining hall, washrooms, day rooms, lobby, and the exterior of the building. The facility has multiple cameras providing coverage in every area of the facility except dormitories where multiple mirror placement was observed.</p> <p>(a) The Wichita Transitional Center 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 Advantage Treatment Center Montrose PAQ states the agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.221</b>	<b>Evidence protocol and forensic medical examinations</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Ascension Letter, dated 4.22.2025</li> <li>4. Wichita Area Sexual Assault Center Letter of Assistance, dated 5.16.2025</li> <li>5. Post Audit: Memorandum of Understanding Wichita Area Sexual Assault Center,</li> </ol>

dated 4.21.2025

6. Law Enforcement MOU Attempt, dated 5.15.2025

Interviews:

1. Facility Director

The interview with the Facility Director demonstrated he is aware of signs and symptoms of sexual abuse and would immediately report allegations of sexual abuse to law enforcement and plan to send inmates to the Ascension Via Christi St. Joseph Emergency Department.

Site Review Observation:

The facility has not received an investigation of sexual abuse in the past 12 months.

(a) The Wichita Transitional Center 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).

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

(c) The Wichita Transitional Center 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 facility will send victims of sexual abuse to Ascension Via Christi St. Joseph Emergency Department.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 6, section 1. Evidence Protocol and Forensic Medical Examination: c. states, "Each facility operated by CSG shall offer all victims of sexual abuse access to forensic medical exam without financial cost, where evidentiarily or medically appropriate. Such exams shall be performed by Sexual Assault Forensic Examiners (SAFE) or Sexual Assault Nurse Examiners (SANEs) where possible."

The facility provided a letter from Ascension Via Christi St. Joseph stating the program serves patients who have been victimized by physical and/or sexual violence and patients who have been sexually assaulted can have a forensic exam completed at the emergency department at 3600 E. Harry St., Wichita, KS 67218.

(d) The Wichita Transitional Center 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.

The facility provided a Wichita Area Sexual Assault Center Letter of Assistance. The letter of assistance is current and does not have an expiration date. The letter is signed by the advocacy agency and the WTC Facility Administrator on 5.16.2025.

Post audit the facility provided a Memorandum of Understanding between the Wichita Transitional Center and the Wichita Area Sexual Assault Center. The memorandum is current and does not have an expiration date. The memorandum is signed and dated by an advocacy agency representative and the WTC Facility Administrator.

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

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 24, section 115.221 e., states, "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 medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information, and referrals."

	<p>(f) The Wichita Transitional Center PAQ states the agency is not responsible for investigating allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.221.</p> <p>The facility provided an email communication to the Wichita Police Department requesting a memorandum of understanding that the Wichita Police Department will follow all policies related to PREA standards 115.271 and 115.273.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.222</b>	<b>Policies to ensure referrals of allegations for 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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Lead Case Manager / Investigator</li> </ol> <p>The interview with the Investigator demonstrated allegations of sexual abuse are referred to the Wichita Police Department and herself or the Program Director would serve as a liaison during any external investigation.</p> <p>(a) The Wichita Transitional Center PAQ states the agency ensures that an administrative or criminal investigations are completed for all allegations of sexual abuse and sexual harassment. In the past 12 months the facility has had zero allegations of sexual abuse and one allegation of sexual harassment that were received. In the past 12 months one allegation resulted in an administrative investigation.</p>

(b) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 24, section 115.222 (b) states, “(b) The agency shall have in place a policy to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior. The agency shall publish such policy on its website or, if it does not have one, make the policy available through other means. The agency shall document all such referrals.” Let it be known the law enforcement memorandum of understanding will be utilized as the facility procedure, once established.”

(c) Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 25, section 115.222 c., states, “If a separate entity is responsible for conducting criminal investigations, such publication shall describe the responsibilities of both the agency and the investigating entity.”

The agency PREA Community Confinement Standards, Policy and Procedure Manual is posted on the agency website at [f35ce3\\_168242c293c7461ab89f4b99aad85090.pdf](https://www.correctionalsolutionsgroup.com/f35ce3_168242c293c7461ab89f4b99aad85090.pdf) (correctionalsolutionsgroup.com)

Through such reviews the facility meets this standards requirements.

<b>115.231</b>	<b>Employee training</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review:  <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> </ol>

3. PREA PowerPoint Presentation
4. Wichita Transitional Center, In-Service Training, dated 2021
5. 20 PREA Training Certificates

Interviews:

1. Security Monitors

Interviews with Security Monitors demonstrated each were aware of and received initial, monthly and annual PREA training through the agency learning management system and monthly team meetings.

Site Observation:

Utilization of the PREA Audit Community Confinement Documentation Review Employee File / Records Review template and the facility training spreadsheet demonstrated 20 of 20 employee training files demonstrate annual training had been completed in 2023, 2024 or 2025.

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 25, section 115.231 a., states, "The agency shall train all employees who may have contact with residents on:

- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Residents' right to be free from sexual abuse and sexual harassment;
- (4) The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;
- (6) The common reactions of sexual abuse and sexual harassment victims;

- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with residents;
- (9) How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.”

The facility provided a Relias PREA Introduction and Overview Booklet.

- The Purpose of PREA
- Complying with PREA Standards
- Zero Tolerance Policy
- Sexual Misconduct Under the Law
- What is Sexual Abuse
- Voyeurism
- Sexual Harassment
- Staff Reporting Duties
- How to Report
- Staff First Responder Duties
- Opposite Gender Announcements
- Emergency Action Plan
- Exigent Circumstances
- Professional Boundaries

(b) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 25, section 115.231 b., states, “Such training shall be tailored to the gender of the residents at the employee’s facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male residents to a

	<p>facility that houses only female residents, or vice versa.”</p> <p>(c) The Wichita Transitional Center PAQ states between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements annually.</p> <p>(d) The Wichita Transitional Center PAQ states the agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification.</p> <p>The facility provided 20 training certificates demonstrating these staff members have completed 4.5 hours of PREA education.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Prison Rape Elimination Act (PREA) Notice to Contractors/Volunteers, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The facility does not have any contractors or volunteers</p>

(a) The Wichita Transitional Center PAQ states all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and 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 one.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.232 a., states, "The agency shall ensure that all volunteers and Wichita Transitional Centers 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."

The facility provided a Prison Rape Elimination Act (PREA) Notice to Contractors/Volunteers training acknowledgment. The Acknowledgment includes the following discussion topics:

- The Prison Rape Elimination Act of 2003
- Correctional Solutions Group Zero Tolerance Policy
- Definitions
- Contractor/Volunteer Requirements
- Reporting Sexual Abuse/Sexual Harassment

The acknowledgement is to be signed by the Contractor or Volunteer with the following affirmation. "By my signature below, I acknowledge receipt of a copy of this document and that it was explained to me by the staff member below."

(b) The Wichita Transitional Center PAQ states the level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with residents. All volunteers and contractors who have contact with residents have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.232 b., states, "The level and type of training provided to volunteers and Wichita Transitional Centers shall be based on the services they provide and level of contact they have with residents, but all volunteers and Wichita Transitional

	<p>Centers who have contact with residents shall be notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.”</p> <p>(c) The Wichita Transitional Center PAQ states the agency maintains documentation confirming that volunteers and contractors who have contact with residents understand the training they have received.</p> <p>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.232 c., states, “The agency shall maintain documentation confirming that volunteers and Wichita Transitional Centers understand the training they have received.”</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.233</b>	<b>Resident education</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Wichita Transitional Center Residential Re-entry Center Resident Handbook, not dated</li> <li>4. Wichita Transitional Center PREA Acknowledgement, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random Residents</li> <li>2. Targeted Residents</li> <li>3. Case Manager</li> </ol> <p>Interviews with eight random and eight targeted residents demonstrated 75% had</p>

received PREA education within the first three days of intake, mostly the first day of arrival. Residents were able to articulate they were made aware of the agency zero tolerance policy, their rights and how to report internally and externally.

The interview with the Case Manager demonstrated residents are educated on the agency zero tolerance policy how to report internally or externally by review of poster posted by the resident phones, watching the PREA video and given information on the local sexual abuse victim advocate.

Site Observation:

Utilizing the PREA Audit - Community Confinement Facilities Documentation Review - Resident Files/Records template demonstrated 16 of residents were admitted in the past 12 months and each signed a PREA acknowledgment within one to three days of admission. During the tour, QR codes are posted throughout the facility which results in residents being given access to the facility PREA policy.

Recommendation:

1. Explain all reporting options to residents. Four of 16 residents were not aware or could not remember reporting options provided to them. Facility Response: "We go over the reporting systems at both intake of a new resident and during orientation. We will continue to do that. We will start to encourage and strongly emphasize the reporting options to residents."

(a) The Wichita Transitional Center 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 136.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.233 a., states, "During the intake process, residents shall receive information explaining the agency's zero- tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicions of sexual abuse or sexual 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 facility provided a Wichita Transitional Center Residential Re-entry Center Resident Handbook. Page 6-9, section Prison Rape Elimination Act (PREA) includes the following topics.

- Agency Zero Tolerance Policy
- Prison Rape Elimination Act
- What is Sexual Assault
- Definitions Related to Sexual Abuse
- Sexual Abuse by an Employee, Contractor, or Volunteer
- Sexual Harassment
- Voyeurism by an Employee, Contractor, or Volunteer
- Examples of Sexual Abuse
- Examples of Sexual Harassment
- Reporting Sexual Assaults - internally and externally
- Reporting Allegations
- Administrative Remedies Procedures

(b) The Wichita Transitional Center 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 zero. The number of residents transferred from a different community confinement facility, during the past 12 months, who received refresher information was 134.

(c) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.233 c, states, "The agency shall provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled as well as residents who

have limited reading skills.”

(d) The Wichita Transitional Center PAQ states the agency maintains documentation of resident participation in PREA education sessions.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.233 d, states, “The agency shall maintain documentation of resident participation in these education sessions.”

The facility provided a Wichita Transitional Center PREA Acknowledgement demonstrating the following is documented.

- Resident Name
- REG#
- Acknowledgment
- Resident Signature / Date
- Witness Signature / Date

(e) The Wichita Transitional Center PAQ states the agency ensures that key information about the agency’s PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

The facility provided a No Means No posting. The posting includes the following information.

- Right to Report
- How to Report
- Victim Support Services

Through such reviews, the facility meets this standards requirements.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025
3. One NIC Investigating Sexual Abuse in a Confinement Setting Certificate, dated 4.11.2025

Interviews:

1. Lead Case Manager / Investigator

Interviews with the Investigator demonstrated she completed specialized investigator training on the National Institute of Corrections website.

Site Observation:

During the preaudit phase the facility provided the Investigator certificate from the National Institute of Corrections. During the onsite review the facility provided annual training dates for the investigator for the years 2023, 2024 and 2025.

Recommendation:

Train an additional staff member as a facility investigator to ensure standards 115.252 and 115.271 are in constant compliance. Facility response: This recommendation has been taken to mind and we are looking into having another staff member trained as a facility investigator in the very near future.

(a) The Wichita Transitional Center PAQ states agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 26, section 115.234 Specialized training: Investigators a-b. state,

- a. "In addition to the general training provided to all employees pursuant to § 115.231, the agency shall ensure that, to the extent the agency itself conducts

	<p>sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings.</p> <p>b. Specialized training shall include techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral.”</p> <p>(b) “Specialized training includes techniques for interviewing sexual abuse victims, Miranda and Garrity warnings, evidence collection in confinement settings and criteria and evidence required to substantiate a case for administrative action or prosecution referral.</p> <p>(c) The Wichita Transitional Center 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 an investigator training certificate demonstrating one facility member has completed the required specialized training.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.235</b>	<b>Specialized training: Medical and mental health care</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Program Director</li> </ol> <p>The interview with the Program Director demonstrated the facility does not have</p>

	<p>medical and or mental health staff or contractors.</p> <p>(a) The Wichita Transitional Center PAQ states the facility does not have medical and or mental health staff or contractors.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.241</b>	<b>Screening for risk of victimization and abusiveness</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>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> <li>4. Wichita Transitional Center PREA Risk Assessment, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random residents</li> <li>2. Targeted residents</li> <li>3. Case Manager</li> </ol> <p>Interviews with eight random and eight targeted residents demonstrated 95% remembered being asked risk screening questions on the day of arrival and again by their case managers. Residents stated they were offered mental health services if they so choose and many could attest to receiving services.</p> <p>The interview with the Case Manager demonstrated risk screening questions are completed before residents are assigned a dorm in the privacy of his office. The Case Manager stated residents are assessed on their height, age, weight, first time</p>

in this setting, if LGBTI, prior offenses against an adult or child, violent offenses and acts in an institution. The Case Manager stated residents are reassessed every 30 days, as needed, if they are involved in a PREA incident at the facility or if the facility has a concern. The Case Manager stated he makes residents aware of mental health services when they disclose and or if they want such services.

Site Observation:

Utilization of the PREA Community Confinement Documentation Review Resident File / Records Review template, 16 of 16 offenders have been in the facility under 12 months. 15 of 16 risk screenings reviewed demonstrated completion within the 72-hour time frame and 15 of 16 assessments were completed within 30 days of admission.

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 8, section Screening for Risk of Sexual Victimization and Abusiveness 1. a-f., state,

a. All residents/inmates arriving at either a transitional or detention center are assessed for their risk of being sexually abused and risk of being sexually abusive toward other residents, no later than 72 hours of arrival at the facility, and upon transfer to another facility.

b. Intake screenings shall be conducted within 72 hours of arrival at the facility.

c. The PREA Risk Assessment is conducted by using an objective screening instrument, is utilized for determining a resident's risk of sexual victimization and being a perpetrator.

d. The following criteria, required by the PREA Standards, to assess residents for risk of sexual victimization:

i. Whether the resident has a mental, physical, or developmental disability;

ii. The age of the resident;

iii. The physical build of the resident;

iv. Whether the resident has previously been incarcerated;

v. Whether the resident's criminal history is exclusively nonviolent;

vi. Whether the resident has prior convictions for sex offenses against an adult or child;

vii. Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;

viii. Whether the resident has previously experienced sexual victimization; and

ix. The resident's perception of vulnerability.

x. Whether the inmate is being detained solely for civil immigration purposes. (Jails and Prisons Only)

e. The following criteria is considered in assessing a resident's risk of being a sexual predator:

- i. Prior acts of sexual abuse;
- ii. Prior convictions for violent offenses;
- iii. History of prior institutional violence or sexual abuse as known.

f. Regardless of whether the assessment is conducted through a computer program or by hand, staff are required to include their own observations, as well as the resident's/inmate's observations in the assessment. For example, instead of assuming a 20-year-old male would be sexually safe in the facility, make notes if he may appear frail or sickly. Just because he's young, he may not be safe."

(b) The Wichita Transitional Center 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 135. Policy compliance can be found in provision (a) of this standard.

(c) The Wichita Transitional Center PAQ states the risk assessment is conducted using an objective screening instrument.

The facility provided a Wichita Transitional Center PREA Risk Assessment. The risk assessment considers the following areas:

Date of Intake / Date of Reassessment / Date of Reassessment Based on Need

Risk of Sexual Victimization Factors

1. Has the Client previously experienced sexual victimization?
2. Is the Client under 21 years of age or over 65 years of age?
3. Is the Clients height less than 5'6" and weight less than 140 lbs?
4. Is this the Clients first incarceration that has lasted longer than 30 days?
5. Is the Clients criminal history exclusively non-violent?
6. Does the Client have prior convictions for sex offenses against an adult or child?
7. Is the Client perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?
8. Does the Client have mental, physical, or developmental disability?
9. Does the client perceive himself/herself as vulnerable?

Risk of Sexual Predator Factors

1. Does the Client have a history of institutional predator sexual behavior within the past 10 years?
2. Does the Client have a history of prior sexual abuse (regardless of conviction)?
3. Does the Client have a history of convictions for violent offenses within the past 10 years?
4. Has the Client committed acts of violence within an institution during the past 10 years?
5. Has the Client committed an act of sexual behavior while incarcerated within the last years (no evidence of coercion or force)?

The risk screening instrument is weighed for an outcome of Known Victim or Known Predator and if housing considerations are needed.

(e) The Wichita Transitional Center PAQ states the policy requires that the facility reassess each resident's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the resident's arrival at the facility, based upon any additional, relevant information received by the facility since the intake

screening. The number of residents entering the facility (either through intake or transfer) within the past 12 months whose length of stay in the facility was for 30 days or more who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake was 135.

(f) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 28, section 115.241 g., states, "A resident's risk level shall be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness."

(g) The Wichita Transitional Center PAQ states the policy prohibits disciplining residents for refusing to answer (or for not disclosing complete information related to) the questions regarding: (a) whether or not the resident has a mental, physical, or developmental disability; (b) whether or not the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) Whether or not the resident has previously experienced sexual victimization; and (d) the resident's own perception of vulnerability.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 28, section 115.241 h., states, "Residents may not be 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."

(h) Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 28, section 115.241 i., states, "The agency shall implement 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."

Through such reviews, the facility meets this standards requirements.

<b>115.242</b>	<b>Use of screening information</b>
	<p data-bbox="280 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p data-bbox="280 264 564 297"><b>Auditor Discussion</b></p> <p data-bbox="280 340 544 374">Document Review:</p> <ol data-bbox="280 412 1410 557" style="list-style-type: none"> <li data-bbox="280 412 798 445">1. Wichita Transitional Center PAQ</li> <li data-bbox="280 483 1410 557">2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> </ol> <p data-bbox="280 669 437 703">Interviews:</p> <ol data-bbox="280 741 616 846" style="list-style-type: none"> <li data-bbox="280 741 616 775">1. Targeted residents</li> <li data-bbox="280 813 555 846">2. Case Manager</li> </ol> <p data-bbox="280 884 1461 1043">Interviews with one disabled, four residents with medical issues, two cognitive, one gay residents demonstrated each were able to reach resident phones, forms and were happy with their dormitories, understood the PREA education delivered to them and were respected by their peers and staff.</p> <p data-bbox="280 1155 1473 1520">The interview with the Case Manager demonstrated vulnerable residents are never housed with aggressive residents. The facility has specific dorms for vulnerable residents and although the female residents only have one dorm a case manager office can be refurbished if females need to be separated. The Case Manager stated he meets with all transgender or intersex residents within 48 hours of arrival and provides them accommodations for showers. The Case Manager stated individual shower times are achieved by placing a schedule on the bathroom door for all residents and transgender or intersex residents can shower when others are not allowed in and or during count times.</p> <p data-bbox="280 1632 1461 1832">(a) The Wichita Transitional Center 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.</p> <p data-bbox="280 1944 1453 2018">Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 9, section 2. Use of Screening Information a-c., state,</p> <ol data-bbox="280 2056 1426 2089" style="list-style-type: none"> <li data-bbox="280 2056 1426 2089">a. "Each facility will use information from the risk screening to inform housing,</li> </ol>

	<p>bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive.</p> <p>b. The facility must make individualized determinations about how to ensure for the safety of each inmate.</p> <p>c. Factors to include in deciding where to assign housing and programming for a transgender or intersex resident/inmate include:</p> <ul style="list-style-type: none"> <li>i. On a case-by-case basis whether a placement would ensure the resident/inmate’s health and safety;</li> <li>ii. Whether the placement would present management or security problems; and</li> <li>iii. The resident/inmate’s own views with respect to his or her own safety.”</li> </ul> <p>(b) The Wichita Transitional Center PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each resident. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Wichita Transitional Center PAQ states the agency/facility makes housing and program assignments for transgender or intersex residents in the facility on a case-by-case basis. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. No Means No Flyer, English and Spanish, not dated</li> </ol>

4. Post Audit: Revised No Mean No Flyer
5. Post Audit: Resident External PREA Reporting Options Training Roster, dated 5.22.2025
6. Post Audit: Memorandum, RE: 115.251, dated 5.22.2025

Interviews:

1. Random residents
2. Targeted residents
3. Security Monitors

Formal interviews with eight targeted and eight random residents demonstrated 75% were aware of external reporting options to include the PREA hotline, hotline numbers posted throughout the facility and internal reporting options to include QR codes, telling any staff or completing a grievance.

Site Observations:

When testing the posted hotline from a resident phone it was found the hotline rings to the RAIN the national advocacy agency which will connect the caller to the local advocacy agency which will only report back to the facility with the approval of the resident caller.

Corrective Action Plan:

- Facility to provide residents with an external reporting option where the agency will immediately report back to the facility.
- Facility to provide documented training to residents on the external reporting line.
- Facility to remove current postings of the RAIN reporting option and provide the Residents and Auditor with documentation of the updated external agency information.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will ensure all requirements of §115.251 are met and sustained. Memorandum to be addressed to the DOJ PREA Auditor, date and author of the memorandum and standard in question.
- Email Auditor documentation with this Issue Log once completed

Post audit the facility provided a No Means No flyer demonstrated the RAIN hotline number has been removed from the flyer and current external reporting information now consists of 'Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling (316)263-0185.'

Post audit the facility provided a Resident External PREA Reporting Options Training roster demonstrating 41 residents signed the roster and were educated on a revised external reporting agency to include address and phone number information.

Post audit the facility provided a memorandum from the Facility Director addressed to the DOJ PREA Auditor stating, "Wichita Transitional Center / Correctional Solutions Group has assigned Bookkeeper, A. Kilpatrick and Quality Control Kacie Cunningham to maintain and sustain all requirements of §115.251. they will ensure that the phone numbers listed are current and in working order. If any of the telephone number change, they will make the necessary adjustments to the "Contacts to Report Sexual Harassment and Sexual Abuse" document. (See attachment). These telephone numbers will be verified at a minimum of four (4) times per year."

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 28, section 115.251 a., states, "The agency shall provide multiple internal ways for residents to privately report sexual abuse and sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents."

The facility provided a No Means No flyer with information on the following.

- Right to Report
- How to Report
- Victim Support Services

(b) The Wichita Transitional Center 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.

(c) The Wichita Transitional Center PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 9-10, section 3. Resident / Inmate Reporting d. states, "CSG staff will not reject any reports of sexual abuse or sexual harassment, whether the report is made to them verbally, in writing, anonymously, or from third parties. Any verbal reports of sexual abuse or sexual harassment will be documented by the staff person receiving the verbal report. Any reports received or documentation of a verbal report will be forwarded to the Facility Director immediately (by phone notification if during non-business hours). The Facility Director will immediately review all reports and documentation of verbal reports with the PREA Coordinator to determine the appropriate course of action."

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

Through such reviews, the facility meets this standards requirements.

115.252	Exhaustion of administrative remedies
	<b>Auditor Overall Determination:</b> Exceeds Standard
	<b>Auditor Discussion</b>
	Document Review:  1. Wichita Transitional Center PAQ  2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025

Interviews:

1. Random Residents
2. Targeted Residents
3. Facility Director

Interviews with eight random and eight targeted residents demonstrated 75% were aware of being able to report through the grievance process and they could retrieve grievances on their own.

The interview with the Facility Director demonstrated grievance boxes are checked seven days a week.

Site Observation:

Grievance boxes were observed near the Case Manager office, in the dining hall, near the Administrative Office suite door and grievance forms were available on the wall.

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

(b) The Wichita Transitional Center PAQ states the agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 29, section 115.252 b., states,

1. "The agency shall not impose a time limit on when a resident may submit a grievance regarding an allegation of sexual abuse.
2. The agency may apply otherwise-applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse.
3. The agency shall not require a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse.
4. Nothing in this section shall restrict the agency's ability to defend against a lawsuit filed by a resident on the ground that the applicable statute of limitations

has expired.”

(c) The Wichita Transitional Center PAQ states the agency's policy and procedure allows a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure requires that a resident grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint.

(d) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 29, section 115.252 d., states, “

1. The agency shall 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.
2. Computation of the 90-day time period shall not include time consumed by residents in preparing any administrative appeal.
3. The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision. The agency shall notify the resident in writing of any such extension and provide a date by which a decision will be made.
4. 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, the resident may consider the absence of a response to be a denial at that level.

(e) The Wichita Transitional Center PAQ states agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of residents. Agency policy and procedure requires that if a resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline. The number of grievances alleging sexual abuse filed by residents in the past 12 months in which the resident declined third-party assistance, containing documentation of the resident's decision to decline was zero.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 29, section 115.252 e., states, “

1. Third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, shall be permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of residents.
2. If a third-party file such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.
3. If the resident declines to have the request processed on his or her behalf, the agency shall document the resident’s decision.”

(f) The Wichita Transitional Center PAQ states the agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 29, section 115.252 f., states, “

1. The agency shall establish procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse.
2. After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, the agency shall 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, shall provide an initial response within 48 hours, and shall issue a final agency decision within 5 calendar days. The initial response and final agency decision shall document the agency’s determination whether the resident is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.”

	<p>(g) The Wichita Transitional Center PAQ states the agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. In the past 12 months, the number of resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith was zero.</p> <p>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 29, section 115.252 f., states, “The agency may discipline a resident for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the resident filed the grievance in bad faith.</p> <p>Through such reviews of the residents being allowed to retrieve grievance forms without having to be asked, the facility exceed this standards requirements.</p>
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<b>115.253</b>	<b>Resident access to outside confidential support 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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> <li>3. Wichita Area Sexual Assault Center Letter of Assistance, dated 5.16.2025</li> <li>4. Post Audit: Memorandum of Understanding Wichita Area Sexual Assault Center, dated 4.21.2025</li> <li>5. No Means No Posting</li> </ol> <p>Site Observations:</p> <p>During the tour No Means No flyers were observed to be posted near resident phones and in areas throughout the facility with local rape crisis phone and address information. Since the facility had not yet established a current memorandum of understanding during the onsite review residents were not questioned if they were</p>

aware of the local sexual abuse victim advocates.

During the onsite review the advocate was contacted. After proper introductions and the reason for the call the volunteer/advocate stated it would be up to the resident if they wanted to report; however, the agency would take the callers' name and contact information, would accompany the victim through a forensic exam, provide ongoing emotional support either in person or over the phone depending on the victim needs and each advocate completes a 40 hour training class and annual training classes to 'keep up to speed on trauma informed practices'.

(a) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 30, section 115.253 Resident access to outside confidential support services. a., states, "The facility shall 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, and by enabling reasonable communication between residents and these organizations, in as confidential a manner as possible."

(b) The Wichita Transitional Center 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 Wichita Transitional Center 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 a Wichita Area Sexual Assault Center Letter of Assistance. The

	<p>letter of assistance is current and does not have an expiration date. The letter is signed by the advocacy agency and the WTC Facility Administrator on 5.16.2025.</p> <p>Post audit the facility provided a Memorandum of Understanding between the Wichita Transitional Center and the Wichita Area Sexual Assault Center. The memorandum is current and does not have an expiration date. The memorandum is signed and dated by an advocacy agency representative and the WTC Facility Administrator.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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115.254	Third party reporting
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. No Means No Flyer, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Random residents</li> <li>2. Targeted residents</li> <li>3. Security Monitors</li> </ol> <p>Interviews with residents demonstrated an awareness of reporting to their parole officers, the hotline, their friends or family members or through a letter.</p> <p>Interviews with Security Monitors demonstrated they would accept reports from third parties and report any information to their supervisor or the PREA Compliance Manager.</p>

	<p>Site Observation:</p> <p>During the tour the No Means No flyer was observed to be posted throughout the facility with multiple internal and external reporting information.</p> <p>(a) The Wichita Transitional Center 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>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 30-31, section 115.254 Third Party Reporting states, "The agency shall establish a method to receive third-party reports of sexual abuse and sexual harassment and shall distribute publicly information on how to report sexual abuse and sexual harassment on behalf of a resident."</p> <p>The facility provided a No Means No posting with internal and external reporting options for staff, volunteers, contractors, residents, family, friends and legal counsel.</p> <p>The agency web address is <a href="http://www.csgprograms.com">www.csgprograms.com</a></p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> </ol> <p>Interviews:</p>

1. Security Monitors
2. Facility Director
3. PREA Coordinator
4. Re-Entry Service Manager

Interviews with the random and specialized staff demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment.

Site Observations:

The facility has not received a sexual abuse report in more than 12 months. The facility did receive one sexual harassment allegation and the facility responded by changing procedures so female residents no longer needed to travel to the male hallway for medication administration.

(a) The Wichita Transitional Center PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy retaliation against residents or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 31, section 115.261 Staff and agency reporting duties a-e., state,

(a) "The agency shall require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

(b) Apart from reporting to designated supervisors or officials, staff shall not reveal 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.

(c) Unless otherwise precluded by Federal, State, or local law, medical and mental health practitioners shall be required to report sexual abuse pursuant to paragraph (a) of this section and to inform residents of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services.

(d) If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person’s statute, the agency shall report the allegation to the designated State or local services agency under applicable mandatory reporting laws.

(e) The facility shall report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility’s designated investigators.”

(b) The Wichita Transitional Center 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.

Through such reviews, the facility meets this standards requirements.

115.262	Agency protection duties
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review:  <ol style="list-style-type: none"><li>1. Wichita Transitional Center PAQ</li><li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, dated 1.31.2025</li></ol> Interviews:

	<p>1. Facility Director</p> <p>The interview with the Facility Director demonstrated victims would be immediately separated from aggressors and placed in a safe place until administrative personnel or law enforcement could arrive.</p> <p>(a) The Wichita Transitional Center PAQ states when the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident. In the past 12 months, the 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 style="text-align: center;">Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 31, section 115.262 Agency protection duties states, “When an agency learns that a resident is subject to a substantial risk of imminent sexual abuse, it shall take immediate action to protect the resident.</p> <p>Through such reviews the facility meets this standards requirements.</p>
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<b>115.263</b>	<b>Reporting to other confinement facilities</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The interview with the Facility Director demonstrated that he was aware that upon receiving an allegation that a resident was sexually abused while confined at another facility, he had the responsibility to notify the head of the facility where the allegation occurred within 72 hours; however, the Director stated he would call the head of the facility immediately.</p>

(a) The Wichita Transitional Center PAQ states the agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. During the past 12 months, the number of allegations the facility received that a resident was abused while confined at another facility was zero. The PAQ states, "The Wichita Transitional Center has (0) cases where abuse occurred while confined at another facility for fiscal year 2022, 2023, 2024"

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 31, section 115.263 a-d. state,

- a. "Upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred.
- b. Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation.
- c. The agency shall document that it has provided such notification.
- d. The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards."

(b) The Wichita Transitional Center 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.

(a) The Wichita Transitional Center PAQ states the agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

(b) The Wichita Transitional Center 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.

Through such reviews the facility meets this standards requirements.

<b>115.264</b>	<b>Staff first responder duties</b>
	<p data-bbox="280 188 983 221"><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <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 1442 560" style="list-style-type: none"> <li data-bbox="280 412 799 445">1. Wichita Transitional Center PAQ</li> <li data-bbox="280 483 1442 560">2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> </ol> <p data-bbox="280 672 437 705">Interviews:</p> <ol data-bbox="280 739 600 772" style="list-style-type: none"> <li data-bbox="280 739 600 772">1. Security Monitors</li> </ol> <p data-bbox="280 817 1461 1019">Interviews with Security Monitors demonstrated each were aware of first responder steps to include separating victims and perpetrators, making sure evidence is not disturbed by not allowing washing, changing, brushing teeth, eating, urinating, or smoking. Security Monitors stated they would clear the crime scene and keep eyes on parties involved until supervisory staff or law enforcement arrived.</p> <p data-bbox="280 1131 528 1164">Site Observation:</p> <p data-bbox="280 1198 1477 1310">The facility has not received a sexual abuse allegation in more than 12 months. The facility received one sexual harassment allegation and the facility responded quickly and swiftly by implementing new facility procedures.</p> <p data-bbox="280 1422 1477 2083">(a) The Wichita Transitional Center PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be required to request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating. The policy requires that, upon learning of an allegation that a resident was sexually abused and the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report shall be</p>

required to ensure that the alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 32, section 115.264 Staff first responder duties a., states, "Upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report shall be required to:

1. Separate the alleged victim and abuser;
2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating."

(b) The Wichita Transitional Center PAQ states the facility's' policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 32, section 115.264 b., states, "If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff."

Through such reviews, the facility meets this standards requirements.

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

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Sexual Harassment, Sexual Activity, & Sexual Abuse Emergency Action Plan, not dated

Interviews:

1. Facility Director

The interview with the Facility Director demonstrated Security Monitors have first responder cards and the Emergency Action Plan is maintained at the front desk and in the staff copy room.

(a) The Wichita Transitional Center 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.

Sexual Harassment, Sexual Activity, & Sexual Abuse Emergency Action Plan that documents the following.

- Order of Responsibility
- Command Post
- Lines of Authority During Emergencies
- Preparedness
- Sexual Activity, Sexual Harassment, Sexual Abuse
- Staff Responsibilities – Responsibilities for Reporting All Allegations
- Responsibilities When Sexual Activity is Observed
- Responsibilities When Sexual Abuse is Discovered In Progress
- Responsibilities For Evidence Protocol – Medical
- Responsibilities For Involving Mental Health Professionals
- Responsibilities When Allegation of Sexual Abuse Is Reported

	<ul style="list-style-type: none"> <li>· Responsibilities For Confidentiality of Information</li> <li>· Required Reporting To Company and Customer Entities</li> <li>· Deactivation Phase</li> <li>· Posting</li> </ul> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Re-Entry Service Manager</li> </ol> <p>The interview with the Re-Entry Service Manager demonstrated the facility is not responsible for collective bargaining.</p> <p>(a) The Wichita Transitional Center 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>Through such reviews, the facility meets this standards requirements.</p>

<b>115.267</b>	<b>Agency protection against retaliation</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated
3. Protection Against Retaliation PREA Monitoring Form, not dated

Interviews:

1. Lead Case Manager / PREA Compliance Manager

The interview with the Lead Case Manager demonstrated she would meet with the victim upon receipt of the allegation of sexual abuse and explain retaliation monitoring and the investigation process. The Lead Case Manager stated she would check in with the resident for any issues, ensure there were no unwarranted room checks, the resident was not allowed to go to work, or frivolous disciplinary reports. The Case Manager stated she would document periodically at least monthly for 90 days or as long as necessary. The Case Manager stated she has not yet had to do monitoring as there has never been a sexual abuse allegation during her employ of five years.

(a) The Wichita Transitional Center PAQ states the agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff. The agency designates staff member(s) or charges department(s) with monitoring for possible retaliation. Monitoring is completed by the Program Director.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 32, section 115.267 Agency protection against retaliation a., states, "The agency shall establish 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 and shall designate which staff members or departments are charged with monitoring retaliation."

(c) The Wichita Transitional Center 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.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 33, section 115.267 c., states, "For at least 90 days following a report of sexual abuse, the agency shall monitor the conduct and treatment of residents or staff who reported the sexual abuse and 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 and shall act promptly to remedy any such retaliation. Items the agency should monitor include any resident disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. The agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

The facility provided a Protection Against Retaliation PREA Monitoring form demonstrating the following is documented.

- Month / Year
- Name of Monitor
- 30 day
- 60 day
- 90 day
- Date / Time / Comments
- Name of Resident of Staff being monitored

Through such reviews, the facility meets this standards requirements.

115.271	Criminal and administrative agency investigations
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	Document Review: <ol style="list-style-type: none"><li>1. Wichita Transitional Center PAQ</li><li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1,</li></ol>

not dated

Interviews:

1. Lead Case Manager / Investigator

The Investigator stated she would begin an investigation immediately upon receipt if not at the end of the day. The investigator stated steps in her investigation process include making copies of all reports, interviewing, reviewing camera footage and preparing her report for the Director to review.

Site Observation:

The facility had one sexual harassment investigation in the past 12 months demonstrating investigation steps were completed in compliance with each provision of this standard.

(a) The Wichita Transitional Center PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 33, section 115.271 Criminal and administrative agency investigations a. states, "These standards are required for internal administrative and internal criminal PREA investigations. CSF/Wichita Transitional Center only conducts internal Administrative PREA Investigations. Criminal PREA investigations are referred to law enforcement to follow the standards if you refer out for them to conduct the criminal investigations, as 115.222 does. Therefore, these standards are not listed as responsibilities of law enforcement in the MOU; references to law enforcement MLU in this section only refers to CSG/Wichita Transition Center centers' responsibilities that will be included in the MOU in conducting their administrative investigation.

a. When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports."

(h) The Wichita Transitional Center 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.

	<p>(i) The Wichita Transitional Center PAQ states the agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Investigator</li> </ol> <p>The interview with an Investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>(a) The Wichita Transitional Center 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>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 34, section 115.272 Evidentiary standard for administrative investigation states, "The agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p>

Through such reviews, the facility meets this standards requirements.

**115.273 Reporting to residents**

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated
3. Notification Letter

Interviews:

1. Lead Case Manager/Facility Investigator

Interviews with the Investigator demonstrated notification requirements to victims would be provided in writing with documentation of each notification.

(a) The Wichita Transitional Center PAQ states the agency has a policy requiring that any resident who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. 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 zero. The PAQ states, "The Wichita Transitional Center has (0) alleged sexual abuse complaints for fiscal years 2022, 2023, 2024."

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 34, section 115.273 Reporting to residents a., states, "Following an investigation into a resident's allegation of sexual abuse suffered in an agency facility, the agency shall inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded."

The facility provided a CSG notification letter providing the victim with the outcome of the investigation.

(b) The Wichita Transitional Center 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.

(c) The Wichita Transitional Center PAQ states following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency has determined that the allegation is unfounded) whenever: (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.

(d) The Wichita Transitional Center PAQ states following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever: (a) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or (b) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

(e) The Wichita Transitional Center PAQ states the agency has a policy that all notifications to residents described under this standard are documented. In the past 12 months, there has been zero notifications to a resident, pursuant to this standard.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 35, section 115.273 e., states, "All such notifications or attempted notifications shall be documented."

Through such reviews, the facility meets this standards requirements.

**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated

Interviews:

1. Facility Director

The interview with the Director demonstrated staff would not be allowed to return to the facility, the Bureau of Prisons (who would complete the investigation), law enforcement and any applicable licensing agencies would be notified.

(a) The Wichita Transitional Center PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 35, section 115.276 Disciplinary sanctions for staff a-d., state,

- a. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.
- b. Termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.
- c. Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than engaging in sexual 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.
- d. 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, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. "

(b) The Wichita Transitional Center PAQ states in the last 12 months, there has

been zero staff from the facility that had violated agency sexual abuse or sexual harassment policies. The PAQ states, "The Wichita Transitional Center has (0) cases of termination, resignation, or other sanctions against staff for violating agency sexual abuse or sexual harassment policies for the past 3 years."

(c) The Wichita Transitional Center PAQ states disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months there have zero staff requiring discipline for sexual abuse or sexual harassment. Policy compliance can be found in provision (a) of this standard.

(d) The Wichita Transitional Center PAQ states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, zero staff have been terminated for sexual abuse or harassment. Policy compliance can be found in provision (a) of this standard.

Through such reviews, the facility meets this standards requirements.

115.277	<b>Corrective action for contractors and volunteers</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The interview with the Director demonstrated contractors and volunteers would not</p>

be allowed to return to the facility, law enforcement, the associated agency and any applicable licensing agencies would be notified.

(a) The Wichita Transitional Center PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies (unless the activity was clearly not criminal) and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents. In the past 12 months, 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. The PAQ states, "The Wichita Transitional Center has (0) cases of sexual abuse of residents by contractors or volunteers for the past 3 years."

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 35-36, section 115.277 Corrective action for Wichita Transitional Centers and volunteers a-b., state,

a. Any Wichita Transitional Center or volunteer who engages in sexual abuse shall be prohibited from contact with residents and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

b. The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with residents, in the case of any other violation of agency sexual abuse or sexual harassment policies by a Wichita Transitional Center or volunteer."

(b) The Wichita Transitional Center 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.

Through such reviews, the facility meets this standards requirements.

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

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025

Interviews:

1. Facility Director

The interview with the Facility Director demonstrated the Bureau of Prisons and law enforcement would be notified, residents would be taken into custody and appropriately charged.

(a) The Wichita Transitional Center 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. The PAQ states, "The Wichita Transitional Center has (0) disciplinary actions dealing with resident for sexual conduct with other residents."

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 36, section 115.278 Disciplinary sanctions for residents a. states, "Residents shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse or following a criminal finding of guilt for resident-on-resident sexual abuse."

(b) The Wichita Transitional Center PAQ states All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, are reported to law enforcement agencies (unless the activity was clearly not criminal) and to any relevant licensing bodies. In the past 12 months, the number of staff from the facility that have been reported to law enforcement or licensing boards following their termination has been zero.

	<p>(e) The Wichita Transitional Center PAQ states the agency disciplines residents for sexual conduct with staff only upon finding that the staff member did not consent to such contact.</p> <p>(f) The Wichita Transitional Center PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>(g) The Wichita Transitional Center PAQ states the agency prohibits all sexual activity between residents. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.”</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1 not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The interview with the Facility Director demonstrated residents would be immediately be provided medical and mental health services upon receipt of a sexual abuse allegation.</p> <p>(a) The Wichita Transitional Center PAQ states resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by</p>

medical and mental health practitioners according to their professional judgment.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 36, section 115.282 Access to emergency medical and mental health services a. states, "Resident victims of sexual 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."

(c) The Wichita Transitional Center PAQ states, resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 37, section 115.282 c., states, "Resident victims of sexual abuse while incarcerated 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."

(d) The Wichita Transitional Center PAQ states, treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 37, section 115.282 g., states, "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."

Through such reviews, the facility meets this standards requirements.

<b>115.283</b>	<b>Ongoing medical and mental health care for sexual abuse victims and abusers</b>
	<b>Auditor Overall Determination:</b> Meets Standard

**Auditor Discussion**

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, not dated

Interviews:

1. Facility Director

The interview with the Facility Director demonstrated residents would be provided ongoing and medical and mental health care immediately and ongoing by local medical and mental health providers.

(a) The Wichita Transitional Center PAQ states the facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 37, section 115.283 a., states, "The facility shall 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."

(d) The Wichita Transitional Center PAQ states female victims of sexually abusive vaginal penetration while incarcerated are offered pregnancy tests.

(f) The Wichita Transitional Center PAQ states resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

(h) This Wichita Transitional Center PAQ states the facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

	<p>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy 6-A-1, page 37, section 115.283 h., states, “The facility shall 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.”</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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115.286	Sexual abuse incident reviews
	<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. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> <li>3. Correctional Solutions Group PREA Investigational Summary Report, not dated</li> </ol> <p>Interviews:</p> <ol style="list-style-type: none"> <li>1. Facility Director</li> </ol> <p>The interview with the Facility Director demonstrated the incident abuse review team consists of the Investigator, Facility Director, and Security personnel. The Director stated the team reviews staffing patterns, steps to prevent what they could do to ensure another incident of this type or in the same place doesn't occur again, the age, size or identification of the victim.</p> <p>(a) The Wichita Transitional Center PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months there has been seven criminal and or administrative investigations of alleged sexual abuse completed at the facility,</p> <p>Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 15, section Data Collection and Review, 1. Sexual abuse incident review a-d.,</p>

state,

- a. Each facility shall 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.
- b. Such review shall ordinarily occur within 30 days of the conclusion of the investigation.
- c. The review team shall include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.
- d. The review team shall:
  - i. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse;
  - ii. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
  - iii. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
  - iv. Assess the adequacy of staffing levels in that area during different shifts;
  - v. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
  - vi. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to paragraphs (4)(a)-(e) and (5) of this section, and any recommendations for improvement, and submit such report to the Facility Director and PREA Coordinator, and when applicable, the PREA Manager.
- e. The facility shall implement the recommendations for improvement or shall document its reasons for not doing so.”

The facility provided a Correctional Solutions Group PREA Investigational Summary Report documenting the following information.

- Resident Name / Admission Date
- Investigation Start Date / Conclusion Date
- Investigation Staff / Name, Title, CSG
- Report completed by / Name, Title
- Report Distribution
- Relevant PREA Standard
- Allegation
- Summary of Investigation

	<ul style="list-style-type: none"> <li>· Conclusion</li> <li>· Resident access to confidential outside support services; Offering mental health care for sexual abuse victims</li> <li>· Attach Supporting Documentation</li> <li>· Lead Warden / ADO signature / Date</li> <li>· Private Facilities Director / Date</li> </ul> <p>(b) The Wichita Transitional Center PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, 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.</p> <p>(c) The Wichita Transitional Center PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.</p> <p>(d) The Wichita Transitional Center PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA Coordinator.</p> <p>(e) The Wichita Transitional Center PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.287</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>

Document Review:

1. Wichita Transitional Center PAQ
2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025
3. Correctional Solutions Group, LLC PREA Annual Report 1.21.2024

(a) The Wichita Transitional Center PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, page 16, section 2., Data collection a-f., state,

- a. "Each facility shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.
- b. Each facility shall aggregate the incident-based sexual abuse data at least annually.
- c. 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 Victimization conducted by the Department of Justice.
- d. The facility shall maintain, review, and collect data as needed from all available incident- based documents including reports, investigation files, and sexual abuse incident reviews.
- e. Effective January 2023, such data must be submitted to the PREA Coordinator and The CSG Executive Director by January 31st.
- f. Upon request, the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30."

The agency provided an PREA Annual Reports for 2024. The report captures the following data for all four of their programs:

- Sexual Harassment Resident on Resident
- o Facility/Substantiated/Unsubstantiated/Unfounded outcomes
- Staff Sexual Harassment

- o Facility/Substantiated/Unsubstantiated/Unfounded outcomes
  - Sexual Abuse-Resident on Resident Nonconsensual Sexual Acts
- o Facility/Substantiated/Unsubstantiated/Unfounded outcomes
  - Sexual Abuse Resident on Resident Abuse Sexual Contact
- o Facility/Substantiated/Unsubstantiated/Unfounded outcomes
  - Staff Sexual Misconduct
- o Facility/Substantiated/Unsubstantiated/Unfounded outcomes

(b) The Wichita Transitional Center PAQ states the agency aggregates the incident-based sexual abuse at least annually.

(c) The Wichita Transitional Center PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

(d) The Wichita Transitional Center PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

(e) The Wichita Transitional Center PAQ states the agency obtains incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents.

(f) The Wichita Transitional Center PAQ states the agency provided the Department of Justice (DOJ) with data from the previous calendar year upon request.

Through such reviews, the facility meets this standards requirements.

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

	<p><b>Auditor Discussion</b></p> <p>Document Review:</p> <ol style="list-style-type: none"> <li>1. Wichita Transitional Center PAQ</li> <li>2. Correctional Solutions Group Prison Rape Elimination Act (PREA) Policy P-1, dated 1.31.2025</li> </ol> <p>(a) The Wichita Transitional Center 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.</p> <p>(b) The Wichita Transitional Center PAQ states the annual report includes a comparison of the current year’s data and corrective actions to those from prior years. The annual report provides an assessment of the agency’s progress in addressing sexual abuse.</p> <p>(c) The Wichita Transitional Center 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.</p> <p>Annual reports can be found on the agency web site at Reporting Prison Rape   -corsol (correctionalsolutionsgroup.com).</p> <p>(d) The Wichita Transitional Center PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.289</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard

	<p><b>Auditor Discussion</b></p> <p>Document Review:</p> <p>1. Wichita Transitional Center PAQ</p> <p>(a) The Wichita Transitional Center PAQ states the agency ensures that incident-based and aggregate data are securely retained. The PREA Coordinator retains all facility PREA documentation.</p> <p>During the preaudit phase the facility provided a memorandum stating the following. “During the PREA investigation from reporting until conclusion, all PREA files are maintained and kept on a secured computer with restricted access. Any printed files are kept in a double locked office with limited access. All PREA reports will be kept until the end of the contract. FBOP#15BRRC20D000000204, approximately 5 years. Once the contract is over, all printed files will be shredded by Wichita Shredding Company, Wichita, KD. All computer files will be disposed of permanently.”</p> <p>(b) The Wichita Transitional Center PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p>(c) The Wichita Transitional Center PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p>Through such reviews, the facility meets this standards requirements.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p>

	<p>(b) This is the fourth audit cycle for Wichita Transitional Center and the third year of the fourth audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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<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>Through such reviews, 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.)	yes
	Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
<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>	
	Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status?	yes
	If the resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
<b>115.215 (f)</b>	<b>Limits to cross-gender viewing and searches</b>	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
<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 benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
<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 expressively, using any necessary specialized vocabulary?	yes
<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	yes

	force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	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</b>	<b>Hiring and promotion decisions</b>	

<b>(f)</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 contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<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	na

	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.)	
<b>115.221 (a)</b>	<b>Evidence protocol and forensic medical examinations</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 advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
<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.)	yes
<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 investigation is completed for all allegations of sexual harassment?	yes
<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	yes

	residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes
	Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents?	yes
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
<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,	yes

	does the agency provide refresher information on current sexual abuse and sexual harassment policies?	
<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 resident is transferred to a different facility?	yes
<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	yes

	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)).	
<b>115.234 (b)</b>	<b>Specialized training: Investigations</b>	
	Does this specialized training include: Techniques for interviewing sexual abuse victims?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings?(N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of criminal or administrative sexual abuse investigations. See 115.221(a)).	yes
<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.)	na

	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.)	na
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	na
	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.)	na
<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.)	na
<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.)	na
	Do medical and mental health care practitioners contracted by	na

	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.)	
<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 toward other residents?	yes
	Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents?	yes
<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:	yes

	Whether the resident's criminal history is exclusively nonviolent?	
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability?	yes
<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 (h)</b>	<b>Screening for risk of victimization and abusiveness</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>	
	When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems?	yes
<b>115.242 (d)</b>	<b>Use of screening information</b>	
	Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
<b>115.242 (e)</b>	<b>Use of screening information</b>	
	Are transgender and intersex residents given the opportunity to shower separately from other residents?	yes
<b>115.242</b>	<b>Use of screening information</b>	

<b>(f)</b>		
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I residents pursuant to a consent decree, legal settlement, or legal judgement.)	yes
<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?	no
<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.)	yes
<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	yes

	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
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
<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</b>	<b>Data collection</b>	

<b>(c)</b>		
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<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.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	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.)	yes
<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	yes

	same manner as if they were communicating with legal counsel?	
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes