Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails ☐ Interim ☑ Final

Date of Interim Audit Report: If no Interim Audit Report, select N/A Date of Final Audit Report:	Click or tap here to enter text. N/A 04/19/20		
Auditor In	formation		
Name: Dorothy Xanos	Email: dxconsultants@gmail.com		
Company Name: DX Consultants LLC			
Mailing Address: 701 77th Avenue N, PO Box 55372	City, State, Zip: St. Petersburg, Florida 33702		
Telephone: (813) 918-1088	Date of Facility Visit: 03/10/20 - 03/13/20		
Agency In	formation		
Name of Agency: Nebraska Department of Corre	ectional Services		
Governing Authority or Parent Agency (If Applicable): Click or	tap here to enter text.		
Physical Address: Folsom & West Prospector Place Building 1	City, State, Zip: Lincoln, NE 68509		
Mailing Address: P.O. Box 94661	City, State, Zip: Lincoln, NE 68509-4661		
The Agency Is:	☐ Private for Profit ☐ Private not for Profit		
☐ Municipal ☐ County			
Agency Website with PREA Information: http://corrections.nebraska.gov			
Agency Chief E	xecutive Officer		
Name: Scott Frakes			
Email: scott.frakes@nebraska.gov	Telephone: (402) 471-2654		
Agency-Wide PREA Coordinator			
Name: Danielle Reynolds			
Email: danielle.reynolds@nebraska.gov	Telephone: (402) 479-5660		
PREA Coordinator Reports to: Mark Rumery – Agency Security Administrator	Number of Compliance Managers who report to the PREA Coordinator:		

Facility Information				
Name of Facility: Lincoln C	orrectional Center			
Physical Address: 3216 Wes	t Van Dorn St	City, State, Zi	ip: Lincoln, N	E 68522
Mailing Address (if different fro	m above):	City, State, Zi	ip: Lincoln, N	E 68542
The Facility Is:	☐ Military	☐ Private	for Profit	☐ Private not for Profit
☐ Municipal	☐ County	⊠ State		☐ Federal
Facility Type:	⊠ Prison			lail
Facility Website with PREA Info	ormation: http://correction	s.nebraska.	gov	
Has the facility been accredited	within the past 3 years?	res 🗌 No		
If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years): ACA NCCHC CALEA Other (please name or describe: Click or tap here to enter text. N/A If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe: PREA Audit - 2017 Warden/Jail Administrator/Sheriff/Director Name: Taggart Boyd Email: taggart.boyd@nebraska.gov Telephone: (402) 479-6165				
	Facility PREA Cor		ınager	
Name: Tammy Kluver Email: tammy.kluver@n	ehraska gov	Telephone:	(402) 479-6	165
Email: tarminy.Ridver@n	Email: tammy.kluver@nebraska.gov Telephone: (402) 479-6165 Facility Health Service Administrator N/A			
Name: John Wright				
Email: john.wright@neb	raska.gov	Telephone:	(402) 471-280	61
	Facility Cha	racteristics		
Designated Facility Capacity:		308		
Current Population of Facility:		521		

Average daily population for the past 12 months:		514		
Has the facility been over capacity at any point in the past 12 months?		⊠ Yes □ No		
Which population(s) does the facility hold?		☐ Females ☒ Mal	es Both Females and Males	
Age range of population:		19 and older		
Average length of stay or time under supervision:		10.5 months to 7.5	years	
Facility security levels/inmate custody levels:		Medium/Maximum		
Number of inmates admitted to facility during the past	12 mont	hs:	279	
Number of inmates admitted to facility during the past in the facility was for 72 hours or more:	12 mont	hs whose length of stay	268	
Number of inmates admitted to facility during the past in the facility was for 30 days or more:	12 mont	hs whose length of stay	268	
Does the facility hold youthful inmates?		☐ Yes No		
Number of youthful inmates held in the facility during facility never holds youthful inmates)	the past	12 months: (N/A if the	Click or tap here to enter text. N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?			☐ Yes No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):		 ☐ Federal Bureau of Prisons ☐ U.S. Marshals Service ☐ U.S. Immigration and Customs Enforcement ☐ Bureau of Indian Affairs ☐ U.S. Military branch ☐ State or Territorial correctional agency ☐ County correctional or detention agency ☐ Judicial district correctional or detention facility ☐ City or municipal correctional or detention facility (e.g. police lockup or city jail) ☐ Private corrections or detention provider ☐ Other - please name or describe: Click or tap here to enter text. ☐ N/A 		
Number of staff currently employed by the facility who may have contact with inmates:		ve contact with inmates:	298	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:		who may have contact	76	
Number of contracts in the past 12 months for services have contact with inmates:	s with co	ontractors who may	31	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:		es, currently authorized	31	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:		y authorized to enter the	8	

Physica	al Plant			
Number of buildings:				
Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.		5		
Number of inmate housing units:				
Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.		5		
Number of single cell housing units:		0		
Number of multiple occupancy cell housing units:		4		
Number of open bay/dorm housing units:		0		
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):		16		
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)		Yes	□ No	⊠ N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?		⊠ Yes	□ No	
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?		⊠ Yes	□ No	
Medical and Mental Health Servi	ces and Forensic Med	dical Exan	ıs	
Are medical services provided on-site?	⊠ Yes □ No			
Are mental health services provided on-site?	⊠ Yes □ No			

		☐ On-site		
Where are sexual assault forensic medical exams provi Select all that apply.	ided?	Rape Crisis Center		
		Other (please name or describe: Click or tap here to enter		
		text.)		
ı	Investig	ations		
Crir	minal Inv	estigations		
Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment: 2 NDCS & State Police			2 NDCS & State Police	
When the facility received allegations of sexual abuse of	or sovual	harassmont (whother	☐ Facility investigators	
staff-on-inmate or inmate-on-inmate), CRIMINAL INVES			□ Agency investigators	
Select all that apply.			An external investigative entity	
	Loca	al police department		
	Local sheriff's department			
Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no	⊠ State police			
external entities are responsible for criminal	A U.S. Department of Justice component			
investigations)	Other (please name or describe: Click or tap here to enter text.)			
	□ N/A			
Admin	istrative	Investigations		
Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?			22	
When the facility receives allegations of sexual abuse of	or covual	harassmont (whother	☐ Facility investigators	
staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE			☐ Agency investigators	
conducted by: Select all that apply			☐ An external investigative entity	
Salast all automal antitics recognished for	Loca	al police department		
Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that	Local sheriff's department			
apply (N/A if no external entities are responsible for administrative investigations)	☐ State police			
	□ A U.	S. Department of Justice c	omponent	
	Othe	er (please name or describe	e: Click or tap here to enter text.)	
	⊠ N/A			

Audit Findings

Audit Narrative (including Audit Methodology)

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

The PREA audit of the Lincoln Correctional Center (Lincoln CC) was conducted on March 10-13, 2020 by Dorothy Xanos, US DOJ Dual Certified PREA Auditor. The audit begins with the notification of the on-site audit was posted on January 21st and 22nd, 2020, six weeks prior to the date of the on-site audit. The facility's last PREA audit was on July 10-11, 2017. The posting of the audit notices both English and Spanish versions was verified during the tour and verified by photographs received in a flash drive from the Administrative Assistant III/PREA Compliance Manager (PCM). The audit notices explained correspondence would be treated as legal mail to ensure confidentiality and privacy. The photographs indicated notices in both English and Spanish versions were posted in various locations throughout the facility including the administrative lobby, administrative office (Major), medical area, mental health area, education area, religious center, multipurpose room/visitation, gymnasium, kitchen/dining hall, library, security office, laundry shop, wood shop, print shop, canteen, Turnkey area and five (5) housing units including restrictive housing. Throughout all the audit phases, the auditor did not receive any communication from the staff or from inmates as a result of the posted notices.

The auditor completed a documentation review using the Pre-Audit Questionnaire, policies, procedures, internet research, and supporting documentation for all forty-three (43) standards. The information necessary for the audit was provided on a secure USB flash drive received by February 4, 2020. The format enabled the auditor to easily review relevant information. The documentation uploaded to the secure USB flash drive was set up with folders for each standard and the information was organized, highlighted and easy to navigate, however the information in-regards to the Pre-Audit Questionnaire and supporting documentation did not sufficiently address nineteen (19) standards. Also, additional documentation reviewed included the agency's and facility's mission statements, daily population reports for the past twelve (12) months, and the facility's schematic. The supporting documentation for the nineteen (19) standards was provided to the auditor during the on-site and after the facility's on-site visit to the facility.

A conference call was conducted on February 24, 2020 with the Lincoln CC Corrections Warden, Administrative Assistant III/PREA Compliance Manager (PCM) and Diagnostic & Evaluation Center (DEC) Unit Case Manager/PCM to review the schedule for the on-site visit, discuss the auditor's results of the Pre-Audit Questionnaire and supporting documentation provided on the secure USB flash drive, and review information to be sent to the auditor prior to the on-site visit to the facility. DEC's Unit Case Manager/PCM sent the documentation (staff roster, staff schedule for random and specialized staff) to the auditor prior to arrival to the facility. Also, supporting documents were provided during the on-site visit to address the deficiencies and are summarized in this report under the related standards.

The on-site audit was conducted on March 10-13, 2020. An entrance briefing was conducted with the Corrections Warden, Corrections Deputy Warden, Corrections Assistant Warden, Administrative Assistant III/PCM, Corrections Unit Administrator, and NDCS PREA Coordinator. During the entrance briefing, the audit process was explained and a tentative schedule for four (4) days to include facility tour, conducting interviews with the staff and inmates and reviewing the documentation. A complete guided tour of the entire facility was conducted including administrative lobby, administrative offices, central control, medical area (exam rooms and offices), mental health area (lobby and offices),

education area, religious center, multipurpose room/visitation with administrative offices and conference room, gymnasium, food service prep room and storages, central dining hall and storage, library, security office, maintenance area, laundry shop, wood shop, print shop, canteen, Turnkey area, outdoor recreation areas, weight area, garden area, and five (5) housing units (with two pods in each wing). During the tour, there were nine (9) blind spots identified in the food service prep room (freezer area), education area (staff offices), laundry chemical tote area, laundry clothing pulling area, laundry main floor, lower laundry area, upper laundry area, print shop and wood shop area. Two (2) of the nine (9) areas (freezer and education area) were corrected during the on-site visit and the other areas were corrected after the on-site visit. The auditor was provided with the documentation (pictures) by the NDCS PREA Coordinator confirming the corrections had been completed prior to the submission of the report.

Also, during the tour, inmates were observed to be under constant supervision of the staff while involved in various activities. Notification of the PREA audit was posted in all locations throughout the facility as well as postings informing inmates of the telephone numbers to call and report sexual abuse and sexual harassment and to call the victim advocate for emotional support services. The auditor reviewed the logbooks containing PREA related documentation (unannounced rounds & cross gender announcements). During the tour, it was observed the shower areas in A1, A2 & C2 pods did not allow for privacy. This was corrected after the on-site visit, and the NDCS PREA Coordinator provided the auditor with the documentation (pictures) confirming the correction had been completed prior to the submission of the report.

During the four (4) day on-site visit, there were a total of five hundred and twenty-one (521) male inmates in the facility. Thirty-eight (38) male inmates were randomly selected from all ten (10) housing units including restrictive housing with an inmate list provided by the Correctional Lieutenant II/PCM for the interview process. However, twelve (12) inmates were formally interviewed and the other twenty-six (26) inmates refused, no show or unavailable to meet with the auditor. There were four (4) inmates who met three (3) of the identified categories from the required list of targeted inmate interviews. The required categories are inmates who identified as an inmate who is Limited English Proficient (LEP); Lesbian, Gay or Bi-sexual, Transgender or Intersex and inmate with a cognitive disability. The facility did not have any other inmates identified in the other required categories i.e. youthful inmate: inmate in restricted housing for high risk of sexual victimization, physical disability (Blind, Deaf or Hard of Hearing), who reported sexual abuse, and who reported sexual victimization during risk screening. All inmate interviews indicated they were well informed of their right to be free from sexual abuse and sexual harassment and how to report sexual abuse and sexual harassment using several ways of communication such as trusted staff, administrative staff but limited knowledge on external reporting telephone number (Inmate Reporting Sexual Abuse/Ombudsman's Office) and Nebraska Coalition to End Sexual & Domestic Violence (victim advocate services). Also, random file reviews of medical and inmate records and additional documentation were completed as well.

The community victims' advocacy service and telephone number are available to the inmates located throughout the facility. There is evidence of NDCS Director obtaining a Memorandum of Understanding with the Nebraska Coalition to End Sexual & Domestic Violence dated 9/3/19 to provide free confidential crisis intervention and emotional support services related to sexual abuse or sexual assault inmates. Any inmate seeking services can call the telephone number at no additional cost to the inmate. The auditor via telephone interviewed a representative from the Prison Advocacy Coordinator from the Coalition during the on-site visit at the facility. The representative indicated there have been no calls from inmates in the past twelve (12) months requesting emotional support services related to sexual abuse or sexual assault at the facility. The Coalition's Prison Advocacy Coordinator indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. Bryan West Medical Center (SANE certified) provides emergency services and forensic medical examinations at no financial cost to the victim. Also,

Brian West Medical Center's medical staff will contact Voices of Hope to provide a victim advocate upon request from the inmate during the forensic medical examination. The facility has available the PREA pamphlet "What You Need to Know About Sexual Assault" and identifies for the inmates to call or write the Ombudsman's Office or the Prison Advocacy Coordinator.

Thirty-five (35) staff were formally interviewed including (17) staff from three (3) shifts (supervisory and floor staff), Corrections Warden; Administrative Assistant III/PREA Compliance Manager; NDCS Criminal Investigator; (1) facility investigator; (2) upper level management; (1) non-medical/cross gender strip; (1) incident review team; (1) medical staff; (1) mental health staff; (1) human resources; (1) retaliation; (1) first responder; (1) risk screening staff; (1) intake; (1) supervise restrictive housing; (2) contractor (instructor & medical) staff were interviewed during the four (4) days of the on-site visit. Additionally, interviews were conducted via telephone with the NDCS Director's representative (Chief of Operations) and NDCS PREA Coordinator during the on-site visit. Overall, the interviews revealed the staff is knowledgeable of the PREA standards and were able to articulate their responsibilities and their mandated duty to report.

At the end of the fourth day, an exit briefing with a summary of the findings was conducted with the Corrections Warden, Corrections Deputy Warden, Corrections Assistant Warden, Administrative Assistant III/PCM, Diagnostic & Evaluation Center (DEC) Unit Case Manager/PCM, Corrections Major, and NDCS PREA Coordinator. At the exit debriefing, the auditor gave an overview of the audit and commented on the on-site observations, interviews, and summarized the strengths and weaknesses after completing the Pre-Audit and On-Site Audit phases. Based on the findings during the Pre-Audit and On-Site Audit phases, the auditor needed to complete the full evaluation during the evidence review phase of the PREA audit by reviewing all evidence collected, including policies and procedures, observations of routine practices in the facility, what the auditor learned in the course of interviewing staff and inmates, and documentation obtained while on-site in order to make a compliance determination for each standard resulting in a final report.

Also, during the exit briefing there was a discussion to send the auditor additional documentation for five (5) standards and the information would be sent to the auditor within the next two (2) weeks for compliance with all the previous standards. The requested information was sent to the auditor by the NDCS PREA Coordinator prior to the submission of this report. The auditor reviewed all requested information and the facility is in full compliance with the PREA Standards.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Lincoln Correctional Center (Lincoln CC), is a medium/maximum security adult male prison with a design capacity of 308 inmate beds governed by the Nebraska Department of Correctional Services. Located on the land west of the city of Lincoln, Nebraska, Lincoln CC was originally a minimum/medium security institution and the Diagnostic & Evaluation Center was a maximum security facility that opened in August of 1979. Both facilities were constructed near the site of the original institution called the Men's Reformatory. In July 1986, both facilities were administratively combined into a single institution known as the Lincoln Correctional Center. As part of an institutional reorganization, the two facilities were again separated into two distinct institutions in October of 1993. Presently, the facilities are beginning the process of combining once again as they continue to employ the extensive use of shared services including food service, maintenance, inmate records, training, safety and sanitation, clothing issue, emergency preparedness, laundry, mail and perimeter security. The new addition to the facility will be the Reception and Treatment Center (RTC). Both facilities will be once again combined by the year of 2022.

The Reception and Treatment Center (RTC) project is underway. The project will combine the Diagnostic and Evaluation Center (DEC) and the Lincoln Correctional Center (Lincoln CC) with a state of the art medical and mental health facility. The new construction is being built between Lincoln CC and DEC and will connect the two facilities. Two sections are already in the construction phase: the new parking lot and new sally-port. The third phase of construction (began in August 2019) will involve a new facility that will connect the two existing institutions. The new facility will have thirty-two (32) skilled mental health beds and thirty-six (36) medical beds including hospice, bariatric, and negative air flow rooms. It will also have a new intake area, administrative area, workout area for staff, one central control center, three (3) new dining halls, a new kitchen, a new medical clinic, and a new visiting area. As part of the project, both existing facilities will receive upgrades in equipment and renovations in some existing sections. The project will also expand space to increase the size of areas like the education, library, and canteen, and provide additional office/storage space for staff. The Lincoln Correctional Center has been accredited by the American Correctional Association since 1981. There were five hundred and twenty-one (521) inmates at the facility at the time of the on-site visit and no youthful inmates.

The prison is comprised of a single two-story building surrounded by perimeter security fence. The perimeter of the facility, which is shared with DEC, consists of a double chain link fence, enhanced razor ribbon and an electronic detection system. The upper level consists of administrative lobby, administrative offices, central control, mailroom, food service prep room and storages, property control, multipurpose room/visitation with administrative offices and conference room. The lower level consists of medical/dental area (exam rooms and offices), mental health area (lobby and offices), education area, religious center, central dining hall and storage, library, law library, security and staff offices, canteen with storage, maintenance area, intake area with three (3) holding cells, gymnasium, hair care services, conference room, outdoor recreation areas, weight area, garden area, and five (5) housing units (with two pods in each wing). The pods consist of varied population groups: protective management, general population, limited movement housing, chronic care mental health, acute care mental health unit, mental health unit, sex offender unit, general population, and restrictive housing. Also, the pods have a dayroom, tables, chairs, staff office, telephones, shower area and bulletin boards with facility and PREA information.

The Cornhusker State Industries' shops, wood shop, print shop, laundry, and warehouse annex are located within the perimeter of the institution adjacent to the recreation yard. On the west external perimeter (outside the confines) is the maintenance storage and CERT building. The farm shop is located approximately a half-mile east of the institution. The tunnel between Lincoln Correctional Center and Diagnostic & Evaluation Center is also located on the lower level. Also, the records department for Lincoln CC is located at the Diagnostic & Evaluation Center.

Lincoln Correctional Center (Lincoln CC) is staffed with two hundred and ninety-eight (298) full-time, part-time, and contracted employees including medical, mental health staff and various groups of volunteers providing religious services to inmates. The staff consisted of: Corrections Warden, (1) Corrections Deputy Warden, (1) Deputy Director, (1) Corrections Assistant Warden II, (1) Corrections Unit Administrator, Administrative Assistant III/PREA Compliance Manager (PCM), Corrections Major, (2) Corrections Captains, (6) Corrections Lieutenants, (14) Corrections Sergeants, (93) Corrections Corporals, (5) Corrections Unit Managers, (9) Corrections Unit Case Managers, (32) Corrections Unit Case Workers, (1) Library Coordinator, (1) Recreation Manager, (5) Recreation Specialists, (2) Religious Coordinator, (35) medical and mental health staff, (42) other staff (accounting, administrative, food service, canteen, warehouse, maintenance and technology) and forty-four (44) vacancies.

The medical staff providing services at the facility consisted of: Associate Director of Nursing, (2) Registered Nurses, (3) Physician Assistants, Nurse Practitioner, Administrative Nurse, Secretary II and (6) medical interns providing nursing services on-site twenty-four (24) hours a day, seven (7) days a week and an on-call physician. The physician assistants are at the facility five (5) days a week and the physician at a minimum once a month. Also, the Associate Director of Nursing has access to contracted medical staff to provide medical services at the facility. All inmates are seen by a physician assistant upon arrival to the facility. Additionally, all nurses are supervised by the Associate Director of Nursing who is responsible for coordination of the medical services. The medical staff provides medical care to include: completing the initial intake assessment, routine and additional lab work as ordered, STD testing and treatment as indicated, updating immunization records, seasonal flu vaccinations, routine eye exams (optical lab), dietary services and referrals, administration of medications/treatments as prescribed, assessments of inmate injuries and treatment as required, medical assessments and monitoring with any restraint or segregation, assessments of somatic health complaints with treatment as indicated, develop treatment plans and provide medical discharge plans. The contracted dental staff consisted of a dentist, dental assistant and dental hygienist who provide dental services located in the medical area with two dental chairs and dental equipment. Dental services are provided Monday through Thursday consisting of dental care, cleaning, education, and treatment fillings to extractions. All inmates at this facility are seen by the dental staff four (4) days a week. All inmates are seen by the dentist at least annually for a wellness check. Emergency services and forensic examinations are conducted at Bryan West Medical Center. There is a physical therapist at least once a week at the facility and an optometrist who provides routine eye exams.

Lincoln CC has both outpatient and residential services in their mental health department. There are two Mental Health (MH) therapists who are assigned to the Protective Management/General Population (PM/GP) units (A1,A2,B1,B2,E1,E2) who provide mental health/counseling services both 'as needed' and based upon their level of care (LOC), which is based upon diagnoses and/or level of functioning. The GP inmates are also provided opportunity (based upon prior evaluation) to participate in Violent Offender Programming (VRP) and Anger Management. Also, both therapists conduct the follow-up on any PREA claims within PM/GP.

Housing Unit C Pod #C1 is composed of the Limited Movement Unit (LMU) and Restrictive Housing (RH). The LMU is a special management unit, typically those inmates going to and from Protective Management. The RH side of the unit has Immediate Segregation (IS) and Long-Term-Restrictive Housing (LTRH) inmates. Mental Health does not provide clinical programming for C1, but the mental

health staff conduct regular rounds for this unit and provide any individual services on an out-patient basis, based upon need and their level of care. There is one (1) psychologist is assigned to this pod.

Housing Unit C Pod #C2 is a combination of the Acute Mental Health Unit (ACMHU) and the Chronic Care Mental Health Unit (CCMHU). These are residential MH programming beds. The inmates on C2 have an opportunity for residential MH services based upon individual need. There is daily programming for C2 inmates every day of the week. The types of groups/programming changes periodically, but examples include: Current Events, DBT, Health/Wellness, Social Work Discharge Planning, structured Day Room time, group Library, structured exercise/walking groups, and Creative Expressions. There are three (3) therapists and four (4) Behavioral Health Caseworkers (BHCW) assigned to this pod.

Housing Unit D Pod #D1 and #D2 is also a residential MH programming unit and is called the Mental Health Unit (MHU). However, these inmates are typically more stable than the inmates on Pod #C2 and is considered as part of General Population. The MHU inmates have opportunities for residential MH services based upon individual needs and daily programming similar to Pod #C2. Other groups offered on the MHU are: Symptom Awareness, Caseload Group, Introduction to MH, Relaxation/ Mindfulness Group, Life Skills, Personal Safety, Relapse Prevention, and various psycho-educational/ non-clinical programming. There are five (5) therapists and two (2) BHCW's assigned to both pods.

Academic and vocational education is provided at the facility. Inmates are assigned a part-time job as a student through the Adult Education program which includes Adult Educational (AE) instruction for the GED test, Adult Basic Education (ABE/ASE), English Language Learners (ESL/ELL). Inmates 22 and under, who do not have a verified educational degree, are required to attend High School or Adult Education. Also, college credit classes, correspondence courses, and the Acellus tablets are offered as additional educational programs.

Inmates can participate in a variety of programs provided at the facility consisting of: in "Inside Out Dads" and "Common Sense Parenting"; "Success Prep", "Trade Program" and Wrap (vocational and life skills programs); "Writers Block and "The Inner Circle". Also, the Domesti-PUPS program utilizes inmate volunteer trainers, to provide service dogs for individuals with disabilities and various programs. All the programs identified above provides inmates with developing vocational skills, enhance decision-making abilities and increase person responsibility and self-esteem. Inmates can request to participate in Self-Improvement (substance abuse treatment, religious programming, and self-betterment activities) and Support Services (medical/dental, athletics & recreation, and recreation library/law library).

Cornhusker State Industries (CSI) operates a laundry, wood shop, and print shop at the facility. Inmates launder for various hospitals and other prisons through the state. The woodshop produces furniture for government, school, and non-profit organizations. Primary work assignments include food service, recreation, housing units, laundry, or grounds crew. There are inmates assigned to maintenance crews responsible for minor repairs, painting and general upkeep.

Summary of Audit Findings

The summary should include the number and list of standards exceeded, number of standards met, and number and list of standards not met.

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

Standards Exceeded

Number of Standards Exceeded: 2

List of Standards Exceeded: 115.11 & 115.31

Standards Met

Number of Standards Met: 41

Standards Not Met

Number of Standards Not Met: 0

List of Standards Not Met: Click or tap here to enter text.

PREVENTION PLANNING

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

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

115.11	(a)	
•		he agency have a written policy mandating zero tolerance toward all forms of sexual and sexual harassment? $\;\boxtimes\;$ Yes $\;\square\;$ No
•		he written policy outline the agency's approach to preventing, detecting, and responding all abuse and sexual harassment? $\ oxdot \ Yes \ oxdot \ No$
115.11	(b)	
•	Has the	e agency employed or designated an agency-wide PREA Coordinator? ⊠ Yes □ No
•	Is the F	PREA Coordinator position in the upper-level of the agency hierarchy? $oxtimes$ Yes $oxtimes$ No
•	overse	he PREA Coordinator have sufficient time and authority to develop, implement, and e agency efforts to comply with the PREA standards in all of its facilities? $\hfill\square$ No
115.11	(c)	
•	If this a	agency operates more than one facility, has each facility designated a PREA compliance er? (N/A if agency operates only one facility.) \boxtimes Yes \square No \square NA
•	facility'	he PREA compliance manager have sufficient time and authority to coordinate the s efforts to comply with the PREA standards? (N/A if agency operates only one facility.) \square No \square NA
Audito	r Overa	all Compliance Determination
	\boxtimes	Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's

conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Policy #200.02 (NDCS Agency: Administration, Organization and Management) revised 8/31/17 outlines how each facility implements its approach to preventing, detecting and responding to all approaches of sexual abuse and harassment, including the definitions of prohibited behaviors as well as sanctions for staff, contractors, volunteers and inmates who had violated those prohibitions. Also, the policy provided comprehensive guidelines and a training foundation for implementing each facility's approach to include the zero tolerance towards reducing and preventing sexual abuse and harassment of inmates. Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 reflects the facility's specification of how they will respond to sexual allegations and the notification procedures followed for reports of sexual allegations.

Nebraska Department of Correctional Services (NDCS) has a designated PREA Coordinator and she reports directly to the NDCS Agency Security Administrator. The PREA Coordinator works statewide to implement the PREA Standards and she indicated having sufficient time and authority to develop, implement and oversee the agency's efforts toward PREA compliance of ten (10) facilities with the support of the Department. The PREA Coordinator is responsible for coordinating comprehensive PREA responses including training, technical and administrative guidance, creation of supporting policies and practices, interpretation relative to PREA implementation, design and modification of training, programming, investigation and analysis, ensuring proper reporting, trend evaluation and provision of recommendations for improvement and compliance.

Lincoln CC's Administrative Assistant III and Unit Manager are designated as the primary and secondary PREA Compliance Managers at the facility. The Administrative Assistant III indicated she has sufficient time, authority to develop, implement and to oversee the facility's PREA compliance efforts to comply with the PREA standards and perform other duties as assigned. The agency's, facility's organizational chart and operational memorandum support the requirement of this standard.

Based on the randomly selected and specialized staff and inmate interviews, the extensive staff training, the resources available to the facilities, it is evident, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the inmates in their care throughout the State of Nebraska. Also, during the facility's site review, the observation of bulletin boards, posters, reviews of staff and inmate handbooks, training curriculums confirmed the facility's commitment and dedication to create a PREA compliant culture.

The facility has a PREA reference binder located in facility's central control containing the reporting process and forms for the facility staff in the event of an incident. Overall, the auditor has determined the agency and the facility have substantially exceeded the requirements of this standard.

Policy and Supporting Documents Reviewed, Interviews and Observations:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #200.02 (NDCS Agency: Administration, Organization and Management)
- Lincoln CC/Diagnostic and Evaluation Center's Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist

- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- PREA Coordinator Designation and Qualifications
- Facility PREA Compliance Manager Designation and Qualifications
- NDCS Organization Chart
- Lincoln CC's Organization Chart
- NDCS website
- PREA Program Coordinator interview
- PREA Compliance Manager Interview
- Lincoln CC's facility tour

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

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

1	15.	12	(a)

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

115.12 (b)

Does any new contract or contract renewal signed on or after August 20, 2012 provide for
agency contract monitoring to ensure that the contractor is complying with the PREA standards?
(N/A if the agency does not contract with private agencies or other entities for the confinement
of inmates.) ⊠ Yes □ No □ NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 describes when the department contracts for the confinement of inmates with other entities, including other government agencies, any new contract or contract renewal will include the contractor's obligations to adopt and comply with all federal, state, and local laws, regulations and ordinances including the Prison Rape Elimination Act (PREA).

A review of the documentation confirmed NDCS has seven (7) contracts for the confinement of inmates the agency entered into with private entities or other government agencies on or after August 20, 2012. NDCS has entered into/renewed seven (7) County Jail agreements for the confinement of inmates (committed felons and misdemeants) in the past twelve (12) months and effective through June 30, 2020. A review of all seven (7) County Jail agreements contained the contractor's obligations to adopt and comply with the DOJ PREA Standards. Also, the agreements contained the information the County will ensure a PREA Audit is conducted by a certified DOJ PREA auditor and a copy of the report will be provided to NDCS. An interview with the NDCS PREA Coordinator confirmed the County Jails are monitored on a scheduled basis by NDCS to ensure compliance with the PREA standards.

Therefore, based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, and Interview:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Agreements for confinement
- PREA Coordinator interview

Standard 115.13: Supervision and monitoring

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

115.13 (a)

	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies? \boxtimes Yes \square No

•	staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies? ⊠ Yes □ No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift? \boxtimes Yes \square No \square NA
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? \boxtimes Yes \square No
•	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? \boxtimes Yes \square No
•	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? $\ \ \ \ \ \ \ \ \ \ \ \ \ $
115.13	(b)
•	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) \boxtimes Yes \square No \square NA
115.13	(c)
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? \boxtimes Yes \square No
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? \boxtimes Yes \square No
•	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? \boxtimes Yes \square No

115.13 (d)

level supervisors conduct and document unannounced rounds to identify and deter staff sexu abuse and sexual harassment? ⊠ Yes □ No			
policy and practice implemented for night shifts as well as day shifts? $oximes$ Yes \odots No			
es the facility/agency have a policy prohibiting staff from alerting other staff members that see supervisory rounds are occurring, unless such announcement is related to the legitimate erational functions of the facility? \boxtimes Yes \square No			
Auditor Overall Compliance Determination			
Exceeds Standard (Substantially exceeds requirement of standards)			
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
Does Not Meet Standard (Requires Corrective Action)			

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19; Policy #112.09 (Personnel Review) revised 4/30/19 and Lincoln CC's (Annual PREA Assessment) dated 1/31/2020 contained the required information identifying requirements for the facility to develop a staffing plan to provide for departmental adequate staffing levels to ensure the safety and custody of inmates against sexual abuse or sexual harassment, physical plant, video monitoring, and addressed all eleven (11) categories as identified per the standard. Also, the policies contained information identifying the facility shall comply with staffing requirements including exigent circumstances and supervisory staff conducting unannounced rounds on a daily basis during all shifts documenting the information in log books that contains observations of all areas of the facility.

NDCS's staff review, approve, and sign annual staffing plans for all facilities statewide. Lincoln CC's staffing plan was reviewed, approved, and signed on 1/31/2020. Documentation indicated the staffing plan is reviewed on an annual basis and the facility did not have any deviations from the staffing plan during the past twelve (12) months, their critical positions are always filled, it is a mandate. The review shall assess, determine, and document whether adjustments are needed to the facility's established staffing plan, the facility's deployment of video monitoring systems and other monitoring technologies and the resources the facility has available to commit to ensure adherence to the staffing plan. Identified the requirement of unannounced rounds to be conducted by an intermediate-level and higher-level supervisor and conduct these unannounced rounds on a daily basis. The unannounced rounds must be conducted during all shifts. Supervisors are prohibited from notifying staff of unannounced

rounds. Staff assigned to any post is prohibited from alerting other employees that a Supervisor is conducting rounds to identify and deter sexual abuse and sexual harassment.

The Corrections Warden's and Administrative Assistant III/PCM interviews and documentation confirmed the Warden is responsible to conduct an annual review of the staffing plan to ensure all areas were addressed including components such as the facility's physical plant, composition of the inmate population, number and placement of supervisory staff, programming schedules, video monitoring, training, to name a few. Also, the Corrections Warden's interview indicated he had reviewed and approved of the process for all supervisory staff (Captains, Lieutenants and Sergeants) to conduct unannounced rounds on all shifts and in all areas of the facility to monitor and deter staff sexual abuse and harassment on a daily basis and document the information in the essential staffing reports and log books. He conducts daily reviews of the staffing rosters for deviations, as well as making regular rounds, unannounced rounds, and reviews the logbooks located in all ten (10) housing units. The Administrative Assistant III/PCM and high-level staff interviews indicated unannounced rounds are conducted daily on all shifts in all areas of the facility to observe staff and inmate interactions, isolated areas, and deter staff from sexual abuse and sexual harassment. The unannounced rounds are documented in the logbooks.

During the facility tour, the auditor observed and reviewed the logbooks, where unannounced rounds were documented including the staff identification, date, and time. A review of the samples provided by the Administrative Assistant III/PCM of random dates and random housing units showed there is a minimum of one (1) unannounced round conducted weekly by upper or middle management staff; however, the majority show unannounced rounds conducted daily. Also, during the tour, there were nine (9) blind spots identified in the food service prep room (freezer area), education area (staff offices), laundry chemical tote area, laundry clothing pulling area, laundry main floor, lower laundry area, upper laundry area, print shop and wood shop area. Two (2) of the nine (9) areas (freezer education area) were corrected during the on-site visit and the other areas were corrected after the on-site visit. A procedure will need to be implemented as to how these areas will be supervised or utilize some form of enhanced supervision. The auditor was provided with the documentation (pictures) confirming the correction had been completed prior to the submission of the report.

After the onsite visit, the Administrative Assistant III/PCM and the NDCS PREA Coordinator sent the appropriate supplemental documentation (pictures) to the auditor demonstrating corrective actions have been taken with this standard prior to the submission of the report.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #112.09 (Personnel Review)
- 2020 Lincoln CC's Annual PREA Assessment (staffing analysis/plan)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Lincoln CC's Staff Work Schedules
- Daily Population Report for the past twelve (12) months
- The facility's video monitoring and logbooks
- Corrections Warden and Administrative Assistant III/PCM interviews
- Intermediate or higher level facility staff interviews

- Lincoln CC's facility tour
- Supplemental documentation for the corrective action (pictures)

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report			
115.14 ((a)		
s	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful nmates [inmates <18 years old].) \square Yes \square No \boxtimes NA		
115.14 ((b)		
)) • 1	n areas outside of housing units does the agency maintain sight and sound separation between outhful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA nareas outside of housing units does the agency provide direct staff supervision when youthful		
	nmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have routhful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA		
115.14 ((c)		
V	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA		
ϵ	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A f facility does not have youthful inmates [inmates <18 years old].) \Box Yes \Box No \boxtimes NA		
p	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) \square Yes \square No \boxtimes NA		
Auditor	Overall Compliance Determination		
[Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 identified the requirement that a youthful inmate shall not be placed in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. Direct supervision by facility staff is always required when a youthful inmate and an adult inmate have sight, sound, or physical contact with one another. All placements of youthful offenders/inmates are placed at the Nebraska Correctional Youth Facility.

Lincoln CC's Corrections Warden's and Administrative Assistant III/PCM interviews and memorandum dated 1/17/20 confirmed the facility has not housed youthful inmates under the age of eighteen for the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Interviews and Supporting Documents Reviewed:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Corrections Warden and Administrative Assistant III/PCM interviews
- Administrative Assistant III/PCM memorandum

Standard 115.15: Limits to cross-gender viewing and searches

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

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

115.15 (b)

115.15 (a)

•	Does the facility always refrain from conducting cross-gender pat-down searches of female
	inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)

•	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.) \square Yes \square No \boxtimes NA
115.15	(c)
•	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? \boxtimes Yes $\ \square$ No
•	Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) \square Yes \square No \boxtimes NA
115.15	(d)
-	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? \boxtimes Yes \square No
•	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? \boxtimes Yes \square No
•	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? \boxtimes Yes $\ \square$ No
115.15	(e)
•	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? \boxtimes Yes \square No
•	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? \boxtimes Yes \square No
115.15	(f)
•	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? \boxtimes Yes \square No
•	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? \boxtimes Yes \square No

□ Exceeds Standard (Substantially exceeds requirement of standards) □ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

Auditor Overall Compliance Determination

 \Box

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires inmates shall be permitted 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 incident to routine dormitory checks. Requires cross gender frisk searches of transgender and intersex inmates will be conducted in a professional and respectful manner and in the least intrusive manner consistent with security needs. Requires that the opposite gender staff shall announce their presence when entering an inmate housing unit. Also, the policy indicated any cross-gender searches are required to be documented.

Random staff interviews confirmed the staff of the opposite gender entering the housing units did not always announce themselves when entering the housing units. Also, random inmate interviews indicated the female staff do not consistently announce their presence when entering the housing units. A review of the training documentation (curriculum and staff rosters) and staff interviews confirmed the annual training on pat down searches, cross-gender pat searches and searches of transgender and intersex inmates are conducted in a respectful and professional manner and prohibiting cross-gender strip or cross-gender visual body cavity searches of inmates. All staff interviews were able to describe what an exigent circumstance would be and were knowledgeable of the procedures for securing authorization to conduct such a search as well as the requirements for justifying and documenting those searches

Random staff and inmate interviews confirmed inmates can shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. Staff interviews could identify the NDCS policy on prohibiting staff from searching or physically examining a transgender or intersex inmate for the purpose of determining that inmate's genital status. During the tour, it was observed the shower areas in A1, A2 & C2 housing units did not allow for privacy. This was corrected after the on-site visit, and the NDCS PREA Coordinator provided the auditor with the documentation (pictures) confirming the correction had been completed prior to the submission of the report.

Interviews with the Corrections Warden and Administrative Assistant III/PCM confirmed there has been no cross-gender pat down searches, cross-gender strip or cross-gender visual body cavity searches of inmates at the facility in the past twelve (12) months. Also, the Administrative Assistant III/PCM's memorandum dated 1/17/20 indicated there have been no exigent circumstances of cross-gender pat

down, strip or visual body cavity searches conducted of inmates at the facility in the past twelve (12) months.

After the on-site visit, the NDCS PREA Coordinator sent the appropriate supplemental documentation (pictures and training) to the auditor demonstrating corrective actions had been taken with this standard prior to the submission of the report. Also, all staff were retrained on NDCS policy on when entering the housing units, the opposite gender should always announce themselves.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Facility Staff Tour Logs
- NDCS Staff Training Academy Outline Searches
- NDCS Trainer Power Point (Searches) including how to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates
- 2018 2019 Training Transcripts
- Facility Shift Rosters
- Pre-Audit Questionnaire review In the past 12 months, the number of cross-gender strip or cross gender visual body cavity searches of inmates reported was zero
- Pre-Audit Questionnaire review In the past 12 months, the number of cross-gender strip or cross-gender visual body cavity searches of inmates that did not involve exigent circumstances or were performed by non-medical staff reported was zero
- Pre-Audit Questionnaire review In the past 12 months, the number of transgender or intersex residents search or physically examine for the sole purposes of determining the resident's genital status was zero
- Lincoln CC's facility tour
- Corrections Warden and Administrative Assistant III/PCM interviews
- Random staff interviews
- Random inmate interviews
- Supplemental documentation for the corrective action (pictures and training)

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

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

115.16 (a)

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

•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? \boxtimes Yes \square No
•	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? \boxtimes Yes \square No
•	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? \boxtimes Yes \square No
•	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? \boxtimes Yes \square No
•	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind on have low vision? \boxtimes Yes \square No
115.16	6 (b)
•	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? \boxtimes Yes \square No

•	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? \boxtimes Yes \square No			
15.16	(c)			
• Audito	types obtaini respor	the agency always refrain from relying on inmate interpreters, inmate readers, or other of inmate assistance except in limited circumstances where an extended delay in ing an effective interpreter could compromise the inmate's safety, the performance of first use duties under §115.64, or the investigation of the inmate's allegations? Yes No all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Does Not Meet Standard (Requires Corrective Action)

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19; Policy #004.01 (ADA Policy) revised 12/31/19 and Lincoln CC/ Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 contained procedures to be taken to ensure inmates with disabilities or who are limited English proficient have an equal opportunity to participate in or are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and sexual harassment. Efforts shall include the use of interpreters, written material, or other formats or methods that ensure effective communication with inmate's disabilities, including inmates who have intellectual disabilities, limited reading skills, who are blind or have low vision, deaf, or are Limited English Proficient (LEP). Also, the policy prohibits any facility to rely on inmate interpreters, inmate readers or any kind of inmate assistants except in limited circumstances when an extended delay in obtaining interpreter's services could compromise an inmates' safety, the performance of first-responder duties or the investigation of the inmate's allegations.

Lincoln CC's Corrections Unit Case Managers have access to a Spanish speaking staff member and interpreter services through the Department to provide inmates with disabilities and inmates who are limited English proficient with various interpreter services on an as needed basis. Interviews with the Corrections Unit Case Managers confirmed when services are required, they would make the necessary accommodations beginning at the intake and orientation phase and throughout the inmate's length of stay. There are postings throughout the facility in English and Spanish. Staff training documentation, power point, brochure, and inmate PREA orientation packet contained information on providing appropriate explanations regarding PREA to inmates based upon their individual needs. The

П

facility's intake staff provides the PREA education at intake, during orientation and documents the information on a classification form. During the on-site visit, there were no inmates who were blind, deaf, or hard of hearing, or who had a cognitive disability. The auditor had access to an interpreter during the on-site visit, but it was not needed while interviewing inmates. All randomly selected inmates did not require interpreter services and were able respond to the questions verbally to the auditor.

Random staff interviews confirmed their knowledge of the Spanish speaking staff and the Department's interpreter services providing services to the facility and indicated they would not rely on the use of inmate assistants in relation to reporting allegations of sexual abuse or sexual harassment except in limited circumstances when an extended delay in obtaining interpreter's services could compromise an inmates' safety, the performance of first-responder duties or the investigation of the inmate's allegations.

Interviews with the Corrections Warden and Administrative Assistant III/PCM confirmed in the past twelve (12) months, the facility did not have any instances of inmate interpreters, inmate readers or inmates disabled being used for reporting allegations of sexual abuse or sexual harassment. Also, the Corrections Warden and Administrative Assistant III/PCM indicated if an inmate exhibits such a disability, arrangements will be made to provide the necessary and required assistance.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews, review of documentation and the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Language Line services
- 2018 2019 Training Transcripts
- 2018 & 2019 NDCS PREA Training power point & study guide & test
- NCDS PREA Refresher Training curriculum
- NDCS What You Need To Know About Sexual Assault brochure (English and Spanish)
- NDCS Sexual Assault Awareness brochure
- NDCS PREA Inmate Orientation Information
- Inmate In-House Rules and General Information Handbook
- Corrections Warden and Administrative Assistant III/PCM interviews
- Corrections Unit Case Managers interviews
- Random staff interviews
- Lincoln CC's facility tour

Standard 115.17: Hiring and promotion decisions

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

115.17 (a)

	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ⊠ Yes □ No
•	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? \boxtimes Yes \square No
•	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? \boxtimes Yes \square No
•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? \boxtimes Yes \square No
•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? \boxtimes Yes \square No
•	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? \boxtimes Yes \square No
115.17	7 (b)
_	Does the agency consider any incidents of covered barecoment in determining whether to him or
•	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates? \boxtimes Yes \square No
•	
	promote anyone who may have contact with inmates? \boxtimes Yes \square No Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
	promote anyone who may have contact with inmates? \boxtimes Yes \square No Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? \boxtimes Yes \square No
115.17	promote anyone who may have contact with inmates? ⊠ Yes □ No Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? ☒ Yes □ No 7 (c) Before hiring new employees, who may have contact with inmates, does the agency perform a
115.17 •	promote anyone who may have contact with inmates? ☑ Yes ☐ No Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates? ☑ Yes ☐ No 7 (c) Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? ☑ Yes ☐ No Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, 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 ☐ No

•	current	the agency either conduct criminal background records checks at least every five years of temployees and contractors who may have contact with inmates or have in place an for otherwise capturing such information for current employees? ⊠ Yes □ No	
115.17	' (f)		
•	about p	the agency ask all applicants and employees who may have contact with inmates directly previous misconduct described in paragraph (a) of this section in written applications or ews for hiring or promotions? \boxtimes Yes \square No	
•	about p	the agency ask all applicants and employees who may have contact with inmates directly previous misconduct described in paragraph (a) of this section in any interviews or written raluations conducted as part of reviews of current employees? \boxtimes Yes \square No	
•		the agency impose upon employees a continuing affirmative duty to disclose any such nduct? $oxed{\boxtimes}$ Yes $oxed{\square}$ No	
115.17	' (g)		
•		the agency consider material omissions regarding such misconduct, or the provision of ally false information, grounds for termination? \boxtimes Yes \square No	
115.17	' (h)		
Audito	or Over	all Compliance Determination	
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	
Instru	ctions f	for Overall Compliance Determination Narrative	

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

115.17 (e)

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19; Policy #112.03 (Employee Selection Policy) revised 9/30/18; Policy #110.01 (Engineering Project Procedures) revised 4/30/19; Policy #010.06 (Teletype Operations) revised 12/31/19; Policy #112.31 (Code of Ethics) effective 12/31/19 and Nebraska Classified System Personnel Rules and Regulations prohibits NDCS staff to hire or promote anyone for a position that may have inmate contact who has been engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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 civilly or administratively adjudicates to have engaged 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. NDCS shall consider any incidents of sexual abuse in determining whether to hire or promote anyone who may have contact with incarcerated inmates. All background checks are conducted initially on new employees, current and promotion decisions of employees and contractors.

NDCS must ask all applicants and employees who may have contact with inmates directly about previous misconduct noted above in written applications or interviews for hiring or promotions. Requires the information on substantiated allegations of sexual abuse or sexual harassment involving a former employee shall be furnished to any institutional employer in which the employee has applied to work provided the request is written. Requires that a criminal background shall be conducted before hiring new employees who may have contact with inmates and will 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. Requires a continuing affirmative duty for employees to disclose any such conduct. Requires that a criminal background records check is completed prior to enlisting services of any contractor who may have contact with inmates and a criminal background records check is completed at least every five (5) years for current employees and contractors, and annually for sensitive specialist assignments.

NDCS has extensive initial background screening requirements that include the screening for criminal record checks (NCIC, NCJIS & CLEIN), possible checks on criminal convictions and pending criminal charges, access to local, state and federal criminal databases to conduct background checks, checking intelligence files, inmate telephone and visiting records, driving records check, and best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse and any resignation during a pending investigation or an allegation of sexual abuse. The agency conducts 5-year background checks for all employees and contractors. There is an affirmative duty to disclose any arrests or previous misconduct. Material omission by an employee is subject to termination.

An interview with the facility's Personnel Manager confirmed the process on the facility performing criminal background checks to consider the pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates, all employees who are considered for promotion and every five (5) years. She advised that personnel staff at the central office have a tracking system to ensure the five (5) year background screening is conducted of all facility employees. Also, the Personnel Manager indicated new employees documented criminal background checks and the three (3) questions (NDCS Non-Scored Interview Questions) regarding past conduct were asked and responded to during the hiring process. The agency provides information to requests from institutional employers where an employee has applied for work.

A sample review of staff's, volunteer's, and contractor's HR files confirmed the process for the facility performing criminal background checks to consider the pertinent civil or administrative adjudications for all newly hired employees who may have contact with inmates, all employees who are considered for promotion and every five (5) years. HR files reviewed contained documentation on staff completing varied forms containing the questions regarding past misconduct (NDCS Personnel Information for

Security Check, NDCS Non-Scored Interview Questions, and Professional Reference Check) that are completed during the hiring process. The HR staff complete the criminal background information (Security Check Sheet) and receives an email on whether an individual is approved or disqualified. Once an individual is approved for hire, the new employee begins the training/orientation process and is provided with an NDCS Employee Handbook. However, seven (7) contracted HR files reviewed did not contain the three (3) questions regarding sexual abuse or sexual activity in an institutional setting, community or if the staff had been civilly or administratively adjudicated for the same (NDCS non scored interview questions). A review of the five (5) year background checks of the employees' documentation contained the three (3) questions regarding sexual abuse or sexual activity in an institutional setting, community, or if the staff has been civilly or administratively adjudicated for the same (NDCS Non-Scored Interview Questions). Also, the auditor reviewed the NDCS external website for employment available to staff and potential applicants.

After the on-site visit, the HR staff provided documentation of the seven (7) contracted staff completing the three (3) questions regarding sexual abuse or sexual activity in an institutional setting, community or if the staff had been civilly or administratively adjudicated for this same (NDCS Non-Scored Interview Questions). The NDCS PREA Coordinator sent the appropriate supplemental documentation to the auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews, review of documentation, and the follow-up documentation the facility has demonstrated compliance with this standard.

Interview, Policy and Supporting Documents Reviewed:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #112.03 (Employee Selection Policy)
- Nebraska Department of Correctional Services (NDCS) Policy #110.01 (Engineering Project Procedures)
- Nebraska Department of Correctional Services (NDCS) Policy #010.06 (Teletype Operations)
 Nebraska Department of Correctional Services (NDCS) Policy #112.31 (Code of Ethics)
- Nebraska Classified System Personnel Rules and Regulations
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Background checks (NDCS Personnel Information for Security Check)
- NDCS Non-Scored Interview Questions
- NDCS Professional Reference Check
- NDCS Non-Scored Interview Questions
- NDCS website
- Pre-Audit Questionnaire review In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal background checks: 76
- Pre-Audit Questionnaire review In the past 12 months, the number of contract for services where criminal background record checks were conducted on all staff covered in the contract that might have contact with inmates: 31
- NCDS PREA Coordinator and Personnel Manager interviews
- Additional supplemental documentation for the corrective action

Standard 115.18: Upgrades to facilities and technologies

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

11	5.	1	8 ((a)	١
----	----	---	-----	-----	---

•	modifice expansification agent facilities	gency designed or acquired any new facility or planned any substantial expansion or cation of existing facilities, did the agency consider the effect of the design, acquisition, sion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A cy/facility has not acquired a new facility or made a substantial expansion to existing is since August 20, 2012, or since the last PREA audit, whichever is later.) □ No □ NA
115.18	(b)	
•	other nagency update techno	gency installed or updated a video monitoring system, electronic surveillance system, or nonitoring technology, did the agency consider how such technology may enhance the z's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or a video monitoring system, electronic surveillance system, or other monitoring logy since August 20, 2012, or since the last PREA audit, whichever is later.) □ No □ NA
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
		Control of the Contro

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires all designing or acquiring new facilities and in planning substantial expansion or modification of existing facilities to consider the effect of the design, acquisition, expansion, or modification upon the facility's ability to protect inmates from harm, including sexual abuse. Requires any installing or updating of video monitoring systems, electronic surveillance systems, or other monitoring technology to be considered how such changes may enhance the facility's ability to protect inmates from harm, including sexual abuse.

An interview with the NDCS PREA Coordinator, Warden and documentation indicated both Lincoln Correctional Center and Diagnostic & Evaluation Center is currently undergoing a massive construction

project in order to combine the two facilities into one as well as adding a new housing unit. Spring of 2020 is the projected completion of the construction project for the combination of both facilities. Also, the facility had an upgrade to the video monitoring system in the past twelve (12) months. During the tour, the video surveillance system was observed at the Warden's desktop. The system will enhance their capabilities to assist in monitoring blind spots and the review of incidents. Also, this enables the staff to monitor inmates more efficiently throughout the physical plant of the facility. The administrative staff is continually evaluating the electronic surveillance system and video monitoring.

Based on the review of the agency policy and procedures, observations and information obtained through the interview and documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Surveillance System Schematic and Diagrams
- Corrections Warden interview and documentation (work orders)
- Lincoln CC's facility tour

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

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

•	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.) \boxtimes Yes \square No \square NA
115.21	(b)
•	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) \boxtimes Yes \square No \square NA
•	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) \boxtimes Yes \square No \square NA
	investigations.) 🖾 res 🗆 No 🗀 NA

115.21	(c)		
•	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? \boxtimes Yes \square No		
•	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? \boxtimes Yes \square No		
•	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? \boxtimes Yes \square No		
•	Has the agency documented its efforts to provide SAFEs or SANEs? $oximes$ Yes \oximin No		
115.21	(d)		
•	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? \boxtimes Yes $\ \square$ No		
•	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency <i>always</i> makes a victim advocate from a rape crisis center available to victims.) \boxtimes Yes \square No \square NA		
•	Has the agency documented its efforts to secure services from rape crisis centers? $\ \ \ \ \ \ \ \ \ \ \ \ \ $		
115.21 (e)			
•	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? \Box Yes \Box No		
•	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? \boxtimes Yes $\ \square$ No		
115.21	(f)		
•	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.) \boxtimes Yes \square No \square NA		
115.21	(g)		
•	Auditor is not required to audit this provision.		
115.21	(h)		

•	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency <i>always</i> makes a victim advocate from a rape crisis center available to victims.) ⋈ Yes ⋈ No ⋈ NA			
Auditor Overall Compliance Determination				
		Exceeds Standard (Substantially exceeds requirement of standards)		
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	П	Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires, when requested by the victim, a victim advocate, qualified agency staff member, or qualified community-based organization staff member to accompany and support the victim through the forensic medical examination process and investigatory interviews and shall provide emotional support, crisis intervention, information and referrals. A qualified mental health/counseling staff member or qualified community-based staff member includes an individual who has been screened for appropriateness to serve in this role and has received education concerning sexual assault and forensic examination issues in general. Requires a history be taken by a health care professional who will conduct a forensic medical examination to document the extent of physical injury.

Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible. There will be no financial cost to the inmate for this examination. Requires an administrative or criminal investigation conducted in accordance with PREA standards shall be completed for all allegations of sexual abuse and sexual harassment. All staff is required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. Also, staff is required to comply with protocols for informed consent, confidentiality, reporting to law enforcement, and reporting to investigative agencies.

The community victims' advocacy service and telephone number are available to the inmates located throughout the facility. There is evidence of NDCS Director obtaining a Memorandum of Understanding with the Nebraska Coalition to End Sexual & Domestic Violence dated 9/3/19 to provide free confidential crisis intervention and emotional support services related to sexual abuse or sexual assault inmates. Any inmate seeking services can call the telephone number at no additional cost to the inmate. The auditor via telephone interviewed a representative from the Prison Advocacy Coordinator from the Coalition during the on-site visit at the facility. The representative indicated there have been no

calls from inmates in the past twelve (12) months requesting emotional support services related to sexual abuse or sexual assault at the facility. The Coalition's Prison Advocacy Coordinator indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. Bryan West Medical Center (SANE certified) provides emergency services and forensic medical examinations at no financial cost to the victim. Also, Brian West Medical Center's medical staff will contact Voices of Hope to provide a victim advocate upon request from the inmate during the forensic medical examination.

The facility has available the PREA pamphlet "What You Need to Know About Sexual Assault" and identifies for the inmates to call or write the Ombudsman's Office or the Prison Advocacy Coordinator. Documentation and an interview with the Corrections Warden confirmed Nebraska State Patrol (NSP) conducts the criminal investigations of allegations of sexual abuse and sexual harassment. In the past twelve (12) months, there has been four (4) allegations where a victim was sent to Bryan West Medical Center for a forensic medical examination. However, three (3) out of the four (4) inmates refused the forensic medical exam. Medical and mental health staff interviews indicated the facility will offer all victims access to forensic medical examinations without financial cost and the procedures to secure and obtain usable physical evidence when sexual abuse is alleged and confirmed in the event of an alleged sexual abuse occurrence. Also, the medical and mental health staff interviews confirmed inmates would be transported Bryan West Medical Center for emergency and forensic medical examinations. During the on-site visit, the auditor tested one of the telephones to ensure inmates have access to specify telephone numbers (external reporting and victim advocate services). Random staff interviews confirmed their knowledge on evidence protocol and their role as first responders and how to preserve evidence until local law enforcement officers arrived at the facility.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review In the past 12 months, the number of forensic medical exams conducted during the past 12 months reported was four
- Pre-Audit Questionnaire review In the past 12 months, the number of exams performed by SANE/SAFE during the past 12 months reported was one
- Pre-Audit Questionnaire review In the past 12 months, the number of exams performed by a
 qualified medical practitioner during the past 12 months reported was zero.
- Memo of Understanding with Nebraska Coalition to End Sexual and Domestic Violence
- PREA pamphlet "What You Need to Know About Sexual Assault"
- Coalition's Prison Advocacy Coordinator interview
- Corrections Warden interview
- Random staff interviews
- Medical and mental health staff interviews

Standard 115.22: Policies to ensure referrals of allegations for investigations

15.22 (a)					
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? $oxtime ext{Yes} \Box$ No				
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? $oxtimes$ Yes \oxtimes No				
15.22 (b)				
o c	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? \boxtimes Yes \square No				
	■ Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? \boxtimes Yes \square No				
• 0	Does the agency document all such referrals? $oxtimes$ Yes \oxtimes No				
15.22 (c)					
th	f a separate entity is responsible for conducting criminal investigations, does the policy describe he responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is esponsible for criminal investigations. See 115.21(a).) \boxtimes Yes \square No \square NA				
15.22 (d)				
• A	Auditor is not required to audit this provision.				
115.22	(e)				
• A	Auditor is not required to audit this provision.				
Auditor	uditor Overall Compliance Determination				
	Exceeds Standard (Substantially exceeds requirement of standards)				
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)				
	Does Not Meet Standard (Requires Corrective Action)				

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires that all 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, and to document all such referrals. Requires notification to local law enforcement of all verified incident of sexual abuse of an inmate by a staff member, contractor, or volunteer and sexual abuse between inmates/inmates shall be referred to the local law enforcement agency of jurisdiction for investigation and consideration of criminal prosecution. Requires that all investigators shall receive the general PREA training provided to all employees, and specialized training in conducting sexual abuse investigations in confinement settings that includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and criteria and evidence required to substantiate a case for administrative action or prosecution referral. Requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment.

All staff is required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. All staff is required to refer all alleged incidents of sexual abuse for investigation to the Nebraska State Patrol (NSP) for the determination of criminal charges. NSP provides services on a 24-hour basis that will include the responsibility of investigating allegations of sexual abuse by qualified staff who have received training concerning sexual abuse and forensic examination issues.

The staff refers all allegations of sexual abuse and sexual harassment to the NDCS PREA Coordinator to review the complaint and determine if the facility staff will conduct the investigation. If the allegation appears to be criminal in nature the NDCS PREA Coordinator will consult with the Agency Personnel Investigator for assignment to an NDCS Criminal Investigator. If referred to the facility, the NDCS PREA Coordinator will contact the facility's PREA Compliance Manager and assign the investigation a case number in the Investigator's Case Management Data Base for completion of an administrative investigation. The PREA policy can be found on the Nebraska state's website and information can be found in their PREA pamphlet "What You Need to Know About Sexual Assault" that is available in English and Spanish.

Interviews with the Corrections Warden, Administrative Assistant III/PCM and facility investigator confirmed that the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Also, any internal investigation that identifies criminal activity or involves a staff member would be immediately referred to the Nebraska State Patrol (NSP). The facility investigator would act in a liaison position and assist local law enforcement. The NSP investigator informs NDCS PREA Coordinator and Corrections Warden on the progress of a sexual abuse investigation. Also, the auditor interviewed via telephone a representative from Nebraska State Patrol (NSP) during the on-site visit. The representative indicated there had been several investigations in the past twelve (12) months for an alleged sexual assault at the facility and the investigations are pending.

The Administrative Assistant III/PCM tracks all the sexual abuse and sexual harassment investigations at the facility. An interview with the Administrative Assistant III/PCM confirmed there has been thirty-seven (37) allegations in the past twelve (12) months for sexual abuse and sexual harassment at the facility. Thirteen (13) of the allegations reviewed contained preliminary information. The other twenty-four (24) allegations resulted in four (4) criminal investigations pending with the Nebraska State Police, one (1) allegation was substantiated and referred to the county attorney, twelve (12) sexual abuse/assault allegations were unsubstantiated or unfounded, six (6) sexual harassment allegations were unsubstantiated or unfounded and one (1) allegation is currently in the review process. All staff interviews confirmed their knowledge on the reporting, referral process and policy's requirements but did not know the agency who conducts the administrative and criminal investigation in response to an allegation of sexual abuse and sexual harassment.

After the on-site visit, all staff were re-trained on who conducts the administrative and criminal investigations in response to an allegation of sexual abuse and sexual harassment. The NDCS PREA Coordinator sent the appropriate supplemental documentation to this auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews, review of documentation, and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review In the past 12 months, the number of allegations of sexual abuse and sexual harassment received during the past 12 months were: 37
- Pre-Audit Questionnaire review In the past 12 months, the number of allegations resulting in an administrative investigation during the past 12 months was: 17
- Pre-Audit Questionnaire review In the past 12 months, the number of allegations referred for criminal investigation during the past 12 months was: 4
- Special Investigator Receipt of PREA Training
- Investigative Case Log Report
- PREA Investigations
- Nebraska State Patrol representative interview
- Corrections Warden interview
- Administrative Assistant III/PCM interview
- Facility investigator interview
- Nebraska state's website
- Random staff interviews
- Supplemental documentation for the corrective actions (training and sign-in sheets)

TRAINING AND EDUCATION

Standard 115.31: Employee training

115.31	(a)						
•	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? \boxtimes Yes \square No						
•	■ Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ⊠ Yes □ No						
•	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? \boxtimes Yes \square No						
•	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? \boxtimes Yes \square No						
115.31	(b)						
•	Is such training tailored to the gender of the inmates at the employee's facility? $oximes$ Yes \odots No						
•	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? \boxtimes Yes \square No						
115.31	(c)						
•	Have all current employees who may have contact with inmates received such training? $\ \boxtimes$ Yes $\ \square$ No						

•	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? \boxtimes Yes \square No				
•	•	rs in which an employee does not receive refresher training, does the agency provide her information on current sexual abuse and sexual harassment policies? \boxtimes Yes \square No			
115.31	(d)				
•	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? \boxtimes Yes \square No				
Auditor Overall Compliance Determination					
	Exceeds Standard (Substantially exceeds requirement of standards)				
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
		Does Not Meet Standard (Requires Corrective Action)			

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires all staff to complete an in-depth PREA Training upon initially becoming an employee (entry level training) as well as refresher training annually. All the PREA training provided to employees statewide contains all ten (10) topics consistent with this standard's requirements and is tailored to all facilities with the gender of their inmate populations. These topics consist of: zero-tolerance policy, how to prevent, detect, report and respond to allegations of sexual abuse and sexual harassment, inmate's right to be free from sexual abuse and sexual harassment, staff and inmates rights to be free from retaliation for reporting sexual abuse and sexual harassment incidents, dynamics of sexual abuse and sexual harassment in confinement, common reactions of sexual abuse and sexual harassment victims, how to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between inmates, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with inmates, including LGBTI, and gender nonconforming inmates, and relevant laws related to mandatory reporting of sexual abuse to outside authorities. Also, the staff receives training on professional and ethical boundaries relating not only to PREA but to their role as an employee.

The staff training documentation including a power-point presentation and staff interviews confirmed staff receives PREA training during initial pre-service training and during refresher in-service training. All employees are trained as new hires regardless of their previous experience. All new employees

receive the NDCS Employee Handbook on prevention strategies to maintain a professional atmosphere and sign the "PREA Staff Acknowledgement Form" indicating they received the training and understand their responsibilities for all the different training modules and tested upon completion of the initial PREA training. Also, security staff receives training on conduct/ethics, security, safety, fire, medical, and emergency procedures and the supervision of inmates including training on the current the NDCS sexual abuse and sexual harassment policies and procedures.

A review of all staff and training education forms, including a power point presentation, lesson plan, and observation of the day-to-day operations as well as staff interviews confirmed staff receives PREA training during initial training and during refresher training. Also, the Administrative Assistant III/PCM and random staff interviews confirmed their comprehension of the PREA training on how staff and inmates can privately report sexual abuse and sexual harassment and their obligation in preventing, detecting and reporting any allegation of sexual abuse and/or sexual harassment. At the facility, the staff is trained continually about the PREA standards during shift briefings and the completion of various on-line trainings. Also, all staff is required to complete an annual in-service PREA training. Employee training records are maintained electronically, and certain training documents are maintained in their personnel file. New employees are provided handouts (Characteristics of Victims/Abusers & Common Reactions of Sexual Abuse/Assault) and a "Staff PREA Response Card" identifying specific PREA information i.e. first responder protocol.

At the facility, it was evident through documentation, interviews and observation of the day-to-day operations, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the inmates in their care throughout the State of Nebraska by providing extensive training to all employees who work at their facilities.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and the review of detailed documentation during the on-site visit and facility tour, the facility has demonstrated exceeding this standard. The agency requires all staff to receive formal PREA training annually.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- 2018 2019 Training Transcripts
- 2018 & 2019 NDCS PREA Training power point & study guide & test
- NCDS PREA Refresher Training curriculum (PREA Refresher: Prison and Jails PREA Basics)
- NDCS Employee Handbook
- Lincoln CC PREA Staff Acknowledgement Forms
- Staff PREA Response Card
- Administrative Assistant III/PCM
- Random staff interviews

Standard 115.32: Volunteer and contractor training

•	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures? \boxtimes Yes \square No					
115 22) (h)					
115.32	(D)					
•	agency how to contract	all volunteers and contractors who have contact with inmates been notified of the y 's zero-tolerance policy regarding sexual abuse and sexual harassment and informed report such incidents (the level and type of training provided to volunteers and ctors shall be based on the services they provide and level of contact they have with y Yes y No				
115.32	2 (c)					
•		he agency maintain documentation confirming that volunteers and contractors stand the training they have received? $oxtimes$ Yes \oxtimes No				
Audito	or Over	all Compliance Determination				
		Exceeds Standard (Substantially exceeds requirement of standards)				
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)				
		Does Not Meet Standard (Requires Corrective Action)				

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detention, and response policies and procedures. The level and type of training provided shall be based on the services they provide and the level of contact they have with inmates, but all volunteers and contractors who have contact with inmates shall be notified of the agency's zero tolerance policy regarding sexual abuse and sexual harassment and be informed how to report such incidents.

All volunteers and contractors receive the NDCS Volunteer Orientation, PREA and Employee Boundaries: Sexual Abuse Awareness training, and sign the "Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors" form upon completion of the PREA training. The training consists of a

115.32 (a)

power point presentation that includes policies, PREA definitions, reporting requirements and other required procedures. A review of the documentation confirmed volunteers and contractors are aware of the facility's requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment. Interview with an educational instructor (contract) confirmed her knowledge of the required PREA training and NDCS's zero tolerance of any form of sexual activity at the facility as well as her duty to report sexual abuse or sexual harassment. Also, the volunteer orientation handbook provided to all volunteers and contractors is a guide to prevention and undue familiarity and sexual abuse with offenders/inmates. A review of randomly selected individual volunteer and contractor files contained an acknowledgement that the volunteer and/or contractor completed and understood their requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment.

Based on the review of the agency policy and procedures, observations and information obtained through the educational instructor interview and documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- NDCS Volunteer Orientation, PREA and Employee Boundaries: Sexual Abuse Awareness training,
- Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors form
- NDCS Volunteer Orientation Handbook
- Contract (educational instructor) interview

Standard 115.33: Inmate education

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

•	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? \boxtimes Yes \square No
•	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? \boxtimes Yes \square No

115.33 (b)

115.33 (a)

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

 ✓ Yes

 ✓ No

•	person	30 days of intake, does the agency provide comprehensive education to inmates either in or through video regarding: Agency policies and procedures for responding to such ats? \boxtimes Yes \square No
115.33	(c)	
•	Have a	all inmates received the comprehensive education referenced in 115.33(b)? $oximes$ Yes \odots
•	and pr	nates receive education upon transfer to a different facility to the extent that the policies ocedures of the inmate's new facility differ from those of the previous facility? \Box No
115.33	(d)	
•	Does t	he agency provide inmate education in formats accessible to all inmates including those re limited English proficient? \boxtimes Yes \square No
•		he agency provide inmate education in formats accessible to all inmates including those re deaf? \boxtimes Yes $\ \square$ No
•		he agency provide inmate education in formats accessible to all inmates including those re visually impaired? $oximes$ Yes \oximin No
•		he agency provide inmate education in formats accessible to all inmates including those re otherwise disabled? \boxtimes Yes $\ \square$ No
•		he agency provide inmate education in formats accessible to all inmates including those ave limited reading skills? $oximes$ Yes $oximes$ No
115.33	(e)	
•		he agency maintain documentation of inmate participation in these education sessions? $\ \square$ No
115.33	(f)	
•	continu	ition to providing such education, does the agency ensure that key information is uously and readily available or visible to inmates through posters, inmate handbooks, or written formats? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard	(Requires Corrective Acti	on)
Does Not Meet Standard	(Requires Corrective Act	C

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires mandatory PREA information, both orally and in writing and in a form that is understandable to the inmate, that includes information about sexual misconduct, background information on PREA, prevention/intervention, self-protection, reporting and treatment/counseling, and confidentiality. Requires during the initial intake process, inmate education on the zero-tolerance policy and how to report incidents or suspicions of sexual abuse and sexual harassment. Requires within thirty (30) days inmates shall receive information regarding their right to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and all NDCS policies and procedures for responding to such incidents. Requires repeated education when an inmate is transferred to a different facility. Also, the facilities are required to provide the PREA information for Limited English Proficient inmates, and those with disabilities such as limited reading skills, deaf or visually impaired.

The assigned correctional staff provides and reviews with the inmates verbally this information (NDCS PREA pamphlet entitled "Sexual Assault Awareness") immediately upon arrival during their initial intake to the facility. Also, within 24 hours, the Unit Case Manager has the inmates observe the power point/video presentation on sexual abuse (available in both English & Spanish) and provides an orientation to the facility. The information consists of facility rules, their right to be free from sexual abuse and sexual harassment, how to report, their right to be free from retaliation for reporting sexual abuse or sexual harassment, prevention/intervention, self-protection, reporting and treatment/counseling and is available in Spanish. Each inmate signs a form ("Orientation Program") to verify the observation of the video and attending the orientation. Also, each inmate signs the "Inmate In-House Rules and General Information Handbook" form acknowledging receiving a copy of the handbook.

Interviews with the Correctional Case Managers confirmed inmates receive appropriate education information regarding safety, their rights to be free from sexual abuse, sexual harassment, retaliation, reporting and the agency's response to allegations upon arrival and again within several days. Upon arrival, the inmate will process through security, intake (intake PREA education), medical, mental health, and eventually meets with case management staff to conduct the screening and assessment process. The inmates are provided with the PREA pamphlet, narrative of the information being verbally presented is on how to report allegations and how to access emotional support services.

Documentation of inmate's signatures were reviewed and confirmed during inmate interviews. Also, a review was conducted of the inmate PREA education forms and the information was provided within the appropriate time frames as required by this standard. Most inmate interviews stated they received PREA education information the same day or several days after they arrived at the facility and identified the receipt of the pamphlet and confirmed receiving information about the facility's rules against sexual abuse and sexual harassment. PREA postings were observed during the facility tour in the housing units, common areas and inmates identified the postings as another source of information for them.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews, and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Sexual Assault Orientation power point presentation (English & Spanish)
- NDCS PREA pamphlet entitled "Sexual Assault Awareness" (English & Spanish)
- Orientation Program form
- Correctional Case Manager interviews
- Random inmate interviews

Standard 115.34: Specialized training: Investigations

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

	investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA
115.34	ł (b)
•	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \boxtimes Yes \square No \square NA
•	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \boxtimes Yes \square No \square NA
•	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \boxtimes Yes \square No \square NA
•	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ⊠ Yes □ No □ NA

In addition to the general training provided to all employees pursuant to §115.31, does the

115.34	(c)	
•	require	he agency maintain documentation that agency investigators have completed the ed specialized training in conducting sexual abuse investigations? (N/A if the agency does nduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) \Box No \Box NA
115.34	(d)	
•	Audito	r is not required to audit this provision.
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance: complies in all material wavs with the

Meets Standard (Substantial compliance; complies in all material ways with the

Instructions for Overall Compliance Determination Narrative

standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires the NDCS PREA Office to ensure all investigators are properly trained in conducting investigations in confinement settings. The required training includes: Techniques for interviewing sexual abuse victims; Proper use of Miranda and Garrity Warnings; Sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative or prosecution referral. All investigators under-go an extensive training developed by NDCS PREA Office prior to conducting criminal and administrative investigations which includes the NDCS PREA Specialized Investigative Training: PREA. At the facility level, the assigned investigator will conduct an initial inquiry into the alleged allegation of sexual abuse or sexual harassment, subsequently conduct an administrative investigation and when necessary refer the information to the Nebraska State Patrol (NSP) for further investigation for the determination of criminal charges.

The facility's PREA investigators when assigned conduct administrative investigations. There are twenty-two (22) staff at the facility who has completed the NDCS PREA Specialized Investigative Training: PREA and other required investigative training. Documentation and an interview with one of the facility investigators confirmed completing the required specialized investigator training as well as the annual PREA education. The facility investigator indicated the specialized investigation training consisted of interviewing techniques, Miranda warnings, Garrity warnings, sexual abuse evidence collection, and the criteria and evidence to substantiate a case for administrative or prosecution referral. Also, the facility indicator confirmed at the facility level, the assigned investigator will complete the initial inquiry into the alleged allegation of sexual abuse or sexual harassment, subsequently conduct an

administrative investigation and when necessary refer the information to the Nebraska State Patrol (NSP) for further investigation for the determination of criminal charges.

Based on the review of the agency policy and procedures, observations and information obtained through the investigator interview and documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting instructor outline
- Specialized Investigative Training: PREA power point presentation
- (22) Training certificates & training record (computerized printout)
- Facility investigator interview

Standard 115.35: Specialized training: Medical and mental health care

1	15	.3	5	(a)

•	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square 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.) \boxtimes Yes \square No \square NA

	` '	
•	receive facility	ical staff employed by the agency conduct forensic examinations, do such medical staff e appropriate training to conduct such examinations? (N/A if agency medical staff at the do not conduct forensic exams or the agency does not employ medical staff.) \Box No \Box NA
115.35	5 (c)	
•	receive the ag	the agency maintain documentation that medical and mental health practitioners have ed the training referenced in this standard either from the agency or elsewhere? (N/A if ency does not have any full- or part-time medical or mental health care practitioners who egularly in its facilities.) \boxtimes Yes \square No \square NA
115.35	5 (d)	
•	manda medica	edical and mental health care practitioners employed by the agency also receive training ated for employees by §115.31? (N/A if the agency does not have any full- or part-time all or mental health care practitioners employed by the agency.) \square No \square NA
•	also re does n	edical and mental health care practitioners contracted by or volunteering for the agency eceive training mandated for contractors and volunteers by §115.32? (N/A if the agency not have any full- or part-time medical or mental health care practitioners contracted by or eering for the agency.) \boxtimes Yes \square No \square NA
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
	4.	

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires PREA training and specialized training for medical and mental health staff. Also, requires that all full and part-time medical and mental health staff who work regularly in NDCS facilities receives specialized training in: How to detect and assess for signs of sexual abuse and sexual harassment; How to preserve physical

115.35 (b)

evidence of sexual abuse; How to respond effectively and professionally to victims of sexual abuse and sexual harassment and How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Documentation review and medical and mental health staff interviews confirmed they had received the basic PREA training provided to all staff and the specialized training offered by NDCS Director of Nursing. The documentation confirmed the mental health staff had received the basic PREA training provided to all staff and the specialized training offered by NIC Behavioral Health Care for Sexual Assault Victims in a Confinement Setting. All contracted medical and mental health staff signs the "Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors" form to acknowledge they received the training and understand their responsibilities in the event of an incident. The medical staff does not conduct forensic examinations.

Interviews with two (2) medical and a mental health staff confirmed their understanding of the requirement to complete the specialized training and verified completing the on-line course and participating in the annual basic PREA training for provided by the facility. Also, the medical and mental health staff interviews confirmed they had received the appropriate training in detecting/ assessing for signs of sexual abuse and sexual harassment; preservation of physical evidence of sexual abuse; responding effectively and professionally to victims of sexual abuse and sexual harassment, and how and to whom to report allegations or suspicious of sexual abuse or sexual harassment.

Based on the review of the agency policy and procedures, observations and information obtained through medical and mental health staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- National Institute of Corrections (NIC) PREA Behavioral Health Care for Sexual Assault Victims in a Confinement Setting
- NDCS Medical and Mental Health: PREA power point presentation
- Certificates of Completion & transcript
- Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors form
- Medical and mental health staff interviews

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41	11 (a)		
	(-)		
•	Are all inmates assessed during an intake so other inmates or sexually abusive toward other.	•	
•	Are all inmates assessed upon transfer to and by other inmates or sexually abusive toward of	•	•
115.41	11 (b)		
•	Do intake screenings ordinarily take place wit ⊠ Yes □ No	hin 72 hours of arriva	I at the facility?
115.41	41 (c)		
	•		
•	Are all PREA screening assessments conduc ⊠ Yes □ No	ted using an objective	e screening instrument?
115.41	41 (d)		
•	Does the intake screening consider, at a mini risk of sexual victimization: (1) Whether the ir disability? ⊠ Yes □ No		
•	Does the intake screening consider, at a mini risk of sexual victimization: (2) The age of the	_	
•	Does the intake screening consider, at a mini risk of sexual victimization: (3) The physical b		
•	Does the intake screening consider, at a minirisk of sexual victimization: (4) Whether the in \boxtimes Yes \square No		
•	Does the intake screening consider, at a minirisk of sexual victimization: (5) Whether the in \boxtimes Yes \square No	•	
•	Does the intake screening consider, at a minirisk of sexual victimization: (6) Whether the inagainst an adult or child? \boxtimes Yes \square No		
■ PREA Au	Does the intake screening consider, at a minimal risk of sexual victimization: (7) Whether the intersex bisexual, transgender, intersex, or gender not inmate about his/her sexual orientation and godetermination based on the screener's percelar or otherwise may be perceived to be LGBTI)?	mate is or is perceivenconforming (the facilender identity AND motion whether the inmate) ⊠ Yes □ No	ed to be gay, lesbian, ity affirmatively asks the akes a subjective

•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? \boxtimes Yes \square No
•	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? \boxtimes Yes \square No
115.41	(e)
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior acts of sexual abuse? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, prior convictions for violent offenses? \boxtimes Yes \square No
•	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency, history of prior institutional violence or sexual abuse? \boxtimes Yes \square No
115.41	(f)
•	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? \boxtimes Yes \square No
115.41	(g)
•	Does the facility reassess an inmate's risk level when warranted due to a referral? \boxtimes Yes \square No
•	Does the facility reassess an inmate's risk level when warranted due to a request? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse? \boxtimes Yes $\ \square$ No
•	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? \boxtimes Yes \square No
115.41	(h)
•	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? \boxtimes Yes \square No

11	5	.41	(i)

Audito	or Overall Compliance Determination	
•	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates? \boxtimes Yes \square	
_	The the common implemented appropriate controls on the discouring time within the facility of	c

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19; Policy #201.13 (Identification of Potential Aggressors and Victims) revised 12/15/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires prior to placement as part of the screening process each inmate is screened upon admission within seventy-two (72) hours of arrival with an objective screening instrument (NDCS Potential for Sexual Assault/Sexual Victimization Screening Instrument) for risk of victimization, potential vulnerabilities or sexual abusiveness tendencies to act out with sexually aggressive predatory behavior. Requires all inmates to be assessed during intake screening and upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Requires intake screening include: mental, physical or developmental disabilities, age, physical build, prior incarcerations, criminal history (violent and non-violent), prior convictions for sex offenses against an adult or child, prior acts of sexual abuse, prior convictions for violent offenses, history of prior institutional violence or sexual abuse, prior sexual victimization, perception of vulnerability, and if the inmate is or is perceived to be LGBTI or gender nonconforming. Prohibits discipline of the inmate for refusing to answer screening questions.

Random inmate interviews and a review of the documentation confirmed the risk screenings are being conducted within seventy-two (72) hours of their admission to the facility. Upon admission, each inmate is screened with an objective screening instrument for risk of victimization and sexual abusiveness called NDCS "Potential for Sexual Assault/Sexual Victimization Screening Instrument" and within seventy-two (72) hours a mental health practitioner will conduct an initial Mental Health Assessment. Interviews with two (2) Correctional Case Managers confirmed a screening is completed on each inmate upon admission to the program within seventy-two (72) hours upon arrival at the facility to determine placement and their special needs. Also, during the on-site visit, the auditor while interviewing asked the staff to explain the intake process. One of the Correctional Case Managers provided details to the intake process by explaining when an inmate is admitted to the facility. Both Correctional Case Managers confirmed the inmates are provided the information and made aware of their rights within the seventy-two (72) hours and in some cases within twenty-four (24) hours of admission. The inmates who

score vulnerable to victim or sexually aggressive are included into their alert system, as well as receiving further assessments, as identified.

The intake screening is used in combination with information about personal history, medical and mental health screenings, conversations, classification assessments as well as reviewed court records and case files. The screening that is conducted includes any disabilities, age, physical build, current and previous incarcerations, personal history, violent offenses, LGBTI status, mental illness, prior victimization and assaultive behaviors. Inmates reporting prior victimization, according to staff, are referred immediately for a follow-up with medical or mental health staff. These referrals to medical or mental health staff are documented. Inmates are reassessed at a minimum of thirty (30) days and throughout their stay at the facility. The facility's policies limit staff access to this information on a "need to know basis". Access to information is available only to the Corrections Warden, Corrections Assistant Warden, Deputy Warden, and Administrative Assistant III/PCM. The facility had two (2) transgender and no intersex inmates admitted to the facility within the past twelve (12) months. Both Correctional Case Manager interviews confirmed consideration is given to the inmate's own views of his safety in placement and programming assignments.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- NCDS Potential for Sexual Assault/Sexual Victimization Screening Instrument
- NCDS Intra-System Medical Screening
- NCDS Incident Report
- Random staff interviews
- Corrections Case Manager interviews
- Inmate interviews (random & targeted)

Standard 115.42: Use of screening information

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

of being sexually abusive, to inform: Bed assignments? ⊠ Yes □ No

115.42 (a)

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

keeping separate those inmates at high risk of being sexually victimized from those at high risk

-	keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? \boxtimes Yes \square No
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? \boxtimes Yes \square No
•	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? \boxtimes Yes \square No
115.42	2 (b)
•	Does the agency make individualized determinations about how to ensure the safety of each inmate? \boxtimes Yes $\ \square$ No
115.42	(c)
•	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? \boxtimes Yes \square No
•	When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? \boxtimes Yes \square No
115.42	2 (d)
•	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? \boxtimes Yes \square No
115.42	2 (e)
•	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? \boxtimes Yes \square No
115.42	2 (f)
•	Are transgender and intersex inmates given the opportunity to shower separately from other inmates? \boxtimes Yes $\ \square$ No
115.42	2 (g)

•	conservation bisexual lesbian such id the pla	in the decree is in a dedicated facility, unit, or wing established in connection with a connection with a connection with a contract the purpose of protecting lesbian, gay, and, transgender, or intersex inmates, does the agency always refrain from placing: an, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of dentification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for accement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal ment.) Yes No NA	
•	conservations bisexuatransg identification bisexuatransg	s placement is in a dedicated facility, unit, or wing established in connection with a nt decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, ial, transgender, or intersex inmates, does the agency always refrain from placing: ender inmates in dedicated facilities, units, or wings solely on the basis of such ication or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the nent of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal ment.) \boxtimes Yes \square No \square NA	
•	conservations bisexum intersection or state LGBT	s placement is in a dedicated facility, unit, or wing established in connection with a nt decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, al, transgender, or intersex inmates, does the agency always refrain from placing: ex inmates in dedicated facilities, units, or wings solely on the basis of such identification us? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) NA	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19; Policy #201.13 (Identification of Potential Aggressors and Victims) revised 12/15/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 prohibits gay, bi-sexual, transgender and intersex inmates being placed in a particular housing unit, beds or other assignments based solely on their identification or status. Also, the policy describes the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine an inmate's appropriate placement, housing and bed assignments, as well as work, education, and program

assignments with the goal of keeping all inmates safe and free from sexual abuse. The program staff utilizes various forms (Potential for Sexual Assault/Sexual Victimization Screening Instrument & Classification Form, Central Monitoring Checklist and Initial Classification Assignment of Living Location) and any other pertinent information during the inmate's admission process.

Placement and programming assignments for each transgender or intersex inmate shall be reassessed at least twice each year to review any threats to safety experienced by the inmate. The mental health staff will complete a six (6) month re-assessment of housing and programs for all transgender and intersex inmates. The staff member must meet with the inmate to discuss their program and housing needs and to ensure their current assignments are still appropriate. NDCS prohibits the placement of LGBTI inmates in dedicated facilities, units, or wings solely on their identification or status.

Administrative Assistant III/PCM and random staff interviews described how information from their risk assessment precludes gay, bi-sexual, transgender, and intersex inmates being placed in a particular housing unit, beds or other assignments based solely on their identification or status. In addition, they described the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine an inmate's appropriate placement, housing and bed assignments, as well as work, education, and program assignments with the goal of keeping all inmates safe and free from sexual abuse. The program staff have a tracking system for inmates who identify as high risk of victimization or abusiveness. The risk assessment information is reviewed within seventy-two (72) hours, if there is an incident of sexual abuse, upon request, or if there is receipt of additional information an inmate is at risk of sexual victimization or abusiveness. Also, staff indicated an inmate's perception of risk is addressed and provision will be made on a case-by-case basis for showering changes

Documentation review confirmed the risk assessment occurred within seventy-two (72) hours and the inmate received the rescreening as required within thirty (30) days. The facility does not have a designated housing unit for gay, bisexual, transgender or intersex inmates. During the on-site visit, an inmate list was provided by the Administrative Assistant III/PCM. The facility had two (2) inmates who identified as transgender during the on-site visit, but one refused to meet with the auditor. The auditor was able to ask questions concerning placement, a special unit just for LGB TI inmates, their safety and request to shower separately. The other inmate confirmed the facility does not have a designated housing unit for LGBTI inmates. Also, this inmate indicated she can shower separately from the other male inmates at designated times during the day and had no concerns with placement.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #201.13 (Identification of Potential Aggressors and Victims)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- NCDS Potential for Sexual Assault/Sexual Victimization Screening Instrument
- NCDS Central Monitoring Checklist and Initial Classification Assignment of Living Location

- Room and Job Assignment form
- Corrections Warden interview
- Administrative Assistant III/PCM interview
- Random staff interviews

Standard 115.43: Protective Custody

Δ

otaliaala i loi loi i lottotivo ouotouy
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.43 (a)
■ Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ⊠ Yes □ No
 If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? ☑ Yes □ No
115.43 (b)
■ Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ⊠ Yes □ No
■ Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ⊠ Yes □ No
■ Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ⊠ Yes □ No
■ Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ⊠ Yes □ No
■ If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility <i>never</i> restricts access to programs, privileges, education, or work opportunities.) ⊠ Yes □ No □ NA
If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility <i>never</i> restricts access to programs, privileges, education, or work opportunities.) ⊠ Yes □ No □ NA
If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility <i>never</i> restricts access to programs, privileges, education, or work opportunities.) ⊠ Yes □ No □ NA
115.43 (c)
• •

housir	the facility assign inmates at high risk of sexual victimization to involuntary segregated ng only until an alternative means of separation from likely abusers can be arranged? \Box No	
Does	such an assignment not ordinarily exceed a period of 30 days? $oxtimes$ Yes \odots No	
115.43 (d)		
section	involuntary segregated housing assignment is made pursuant to paragraph (a) of this in, does the facility clearly document the basis for the facility's concern for the inmate's \mathbb{Z}^2 Yes \mathbb{Z}^2 No	
section	nvoluntary segregated housing assignment is made pursuant to paragraph (a) of this n, does the facility clearly document the reason why no alternative means of separation e arranged? \boxtimes Yes \square No	
115.43 (e)		
risk of	case of each inmate who is placed in involuntary segregation because he/she is at high sexual victimization, does the facility afford a review to determine whether there is a uing need for separation from the general population EVERY 30 DAYS? Yes No	
Auditor Overall Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)	
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
	Does Not Meet Standard (Requires Corrective Action)	
Instructions	for Overall Compliance Determination Narrative	

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires institutional staff who identify inmates as high risk of sexual victimization or inmates alleged to have suffered sexual abuse should not normally be placed in restrictive housing without their consent unless it has been determined that there is no available alternative means of separation from likely abusers. Placement in restrictive housing must be clearly documented on the basis for the concern for the inmate's safety and the reason why no alternative means of separation can be arranged. Requires that involuntary assignment to restrictive housing shall only be long enough for alternative means of separation from likely abusers can be arranged, but no longer than thirty (30) days. Requires inmates placed in restrictive housing shall have access to programs, privileges, education, and work opportunities to the extent possible while ensuring their

safety. Any restrictions of programs, privileges, education and work opportunity, the duration of the limitation and the reasons for the limitation will be clearly documented.

Interviews with the Corrections Warden, Administrative Assistant III/PCM and another staff who works in restrictive housing confirmed there have been no inmates placed in involuntary restrictive housing in past twelve (12) months. Also, they indicated if an inmate is placed in involuntary restrictive housing for their own protection, he would have access to programs, privileges, education and work only if there is no safety concern. This information would be documented and reviewed by the case management staff on a weekly basis. Corrections Warden, Administrative Assistant III/PCM and another staff confirmed every thirty (30) days if an inmate is placed in involuntary restrictive housing, a meeting is held with Corrections Warden, Corrections Assistant Warden, Deputy Warden and Corrections Unit Administrator to determine if the inmate should continue in restrictive housing.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CCI's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Warden and Administrative Assistant III/PCM interviews
- Restrictive housing staff interview

	20	D,	TI	N	C
К	-U	7		IV	u

Standard 115.51: Inmate reporting

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

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? \boxtimes Yes \square No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?
 ✓ Yes
 ✓ No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents?

 ⊠ Yes □ No

115.51 (b)

■ Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?

✓ Yes

✓ No

•		private entity or office able to receive and immediately forward inmate reports of sexual and sexual harassment to agency officials? \boxtimes Yes \square No	
•		that private entity or office allow the inmate to remain anonymous upon request? \square No	
•	contac Securi	mates detained solely for civil immigration purposes provided information on how to st relevant consular officials and relevant officials at the Department of Homeland ty? (N/A if the facility <i>never</i> houses inmates detained solely for civil immigration purposes) \square No \square NA	
115.51	(c)		
•		staff accept reports of sexual abuse and sexual harassment made verbally, in writing, mously, and from third parties? $oxtimes$ Yes \oxtimes No	
•		staff promptly document any verbal reports of sexual abuse and sexual harassment? \Box No	
115.51	(d)		
•		the agency provide a method for staff to privately report sexual abuse and sexual sment of inmates? \Box Yes \Box No	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the department to provide multiple ways for inmates to report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. These various ways of reporting include: telephoning the hotline number, using the inmate calling system (ICS), a written complaint to the Ombudsman Office, advising an administrator, a staff member, placing a written complaint in the grievance box, and external complaint to a third party (i.e. family member). Requires that staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document verbal reports as an "Incident Reporting" form.

Requires an inmate method of reporting must include reporting to an outside public or private entity or office that is not part of the agency and is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Also, the department has provided a method for staff to privately report sexual abuse and sexual harassment of inmates.

Lincoln CC has multiple ways for inmate reporting of sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. During orientation, inmates are advised on how to report sexual abuse and sexual harassment verbally and in writing to staff members, interns, contractors or volunteers who are trained and required to report all allegations sexual abuse and sexual harassment. Also, inmates are advised on the grievance procedure and the Ombudsman Office as other ways to report sexual abuse and sexual harassment.

Random staff interviews confirmed they will accept allegations of sexual abuse or sexual harassment verbally, in writing, anonymously, and from third parties and report to their supervisor. Also, the staff is provided information for reporting sexual abuse or sexual harassment in a confidential manner through a separate phone number that is outside of the facility. While conducting the on-site visit of the entire facility, this auditor observed in all living areas postings of the PREA information (posters) informing inmates of the telephone numbers to call against sexual abuse and sexual harassment and to call the victim advocate, however, the victim advocate information was limited and unclear as to what services are provided. Reporting procedures are provided to inmates through NDCS PREA pamphlet entitled "Sexual Assault Awareness" and during the intake/orientation process. During the facility tour, the auditor tested the hotline number to confirm the inmate has access to report sexual abuse and sexual harassment to Nebraska Coalition to End Sexual & Domestic Violence. However, the telephones were not working, and the auditor advised the Corrections Warden and NDCS PREA Coordinator of the issue. This was addressed right away during the site-visit.

There is evidence of NDCS Director obtaining a Memorandum of Understanding with the Nebraska Coalition to End Sexual & Domestic Violence dated 7/20/18 to provide free confidential crisis intervention and emotional support related to sexual abuse or sexual assault inmates. Any inmate seeking services can call the telephone number at no additional cost to the inmate. The auditor interviewed a representative from the Prison Advocacy Coordinator from the Coalition during the on-site visit at the facility. The representative indicated there have been no calls from inmates in the past twelve (12) months requesting emotional support services related to sexual abuse or sexual assault at the facility. The Coalition's Prison Advocacy Coordinator indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. Bryan West Medical Center (SANE certified) provides emergency services and forensic medical examinations at no financial cost to the victim. Also, Brian West Medical Center's medical staff will contact Voices of Hope to provide a victim advocate upon request from the inmate during the forensic medical examination

Random inmate interviews indicated several ways to report sexual abuse and sexual harassment by telephoning the hotline, speak with a staff they trust, placing a written complaint in the secure inmate box, and about the anonymous reporting capability. During the intake and admission process inmates are advised of their rights and sign a form acknowledging they had been advised of these rights. Some inmates identified the inmate box as a means to report sexual abuse and sexual harassment. A review of the thirty-seven (37) allegations of sexual abuse and sexual harassment in the past twelve (12) months indicated the facility has established various methods of reporting including the external entity.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews, and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CCI's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Memo of Understanding with Nebraska Coalition to End Sexual and Domestic Violence
- PREA pamphlet "What You Need to Know About Sexual Assault" (English & Spanish)
- Grievance form
- PREA Postings (English & Spanish)
- Coalition's Prison Advocacy Coordinator interview
- Random staff interviews
- Random inmate interviews

Standard 115.52: Exhaustion of administrative remedies

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

115.52 (a)

•	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of
	explicit policy, the agency does not have an administrative remedies process to address sexual abuse. $oxed{\boxtimes}$ Yes \oxdot No
	N /L-V

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)

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

 ✓ Yes

 ✓ No
 ✓ NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)

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

 ☑ Yes □ No □ NA

115.52	(d)
•	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	If the agency claims the maximum allowable extension of time to respond of up to 70 days per $115.52(d)(3)$ when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempted from this standard.) \boxtimes Yes \square No \square NA
115.52	(e)
-	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
115.52	(f)
•	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA
•	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.). \boxtimes Yes \square No \square NA
•	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ⋈ Yes □ No □ NA

•	decisio	eceiving an emergency grievance described above, does the agency issue a final agency on within 5 calendar days? (N/A if agency is exempt from this standard.) \square No \square NA			
•	wheth	the initial response and final agency decision document the agency's determination er the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt his standard.) \boxtimes Yes \square No \square NA			
•	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA				
•		the agency's final decision document the agency's action(s) taken in response to the ency grievance? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA			
115.52	2 (g)				
•	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) \boxtimes Yes \square No \square NA				
Auditor Overall Compliance Determination					
		Exceeds Standard (Substantially exceeds requirement of standards)			
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
		Does Not Meet Standard (Requires Corrective Action)			

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Policy #217.02 (Inmate Grievance Procedures) revised 6/30/17 allows an inmate to submit a grievance regarding an allegation of sexual abuse with no time limit. This allows for third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and permitted to file such requests on behalf of inmates. It allows the facility to request the alleged victim to agree to third party grievances alleging sexual abuse. If an inmate declines to have the request processed, the facility will document the inmates' decision. Prohibits the requirement that an inmate must first use an informal grievance process, or to otherwise attempt to resolve with staff, when reporting an allegation of sexual abuse. It allows an inmate to submit a grievance without submitting to a staff member who is the subject of the complaint and prohibits the agency from referring the grievance to a staff member who is the subject of the complaint. Also, the policy describes the orientation inmates receive explaining how to use the grievance process to report allegations of abuse

and has administrative procedures/appeal process for dealing with inmate's grievances regarding sexual abuse or sexual harassment.

Requires a final agency decision within ninety (90) days on any portion of a grievance that alleges sexual abuse, and that the ninety (90) days shall not include time consumed by inmates preparing any administrative appeal. Allows the department to claim an extension of time to respond to a grievance, up to seventy (70) days, with notification to the inmate. Establishes an emergency grievance for an inmate that is subject to a substantial risk of imminent sexual abuse, including an initial response within 24 hours and a final response within five (5) days. Prohibits the discipline of an inmate for filing a grievance related to sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.

An interview with the Administrative Assistant III/PCM and her memorandum dated 3/6/20 confirmed there had been no grievances within the past twelve (12) months. She indicated emergency grievances are available and reports the staff must respond within twenty-four (24) hours and provide a final determination within five (5) days. Also, the Administrative Assistant III/PCM confirmed the inmates receive an explanation on how to use the grievance process to report allegations of sexual abuse and has administrative procedures/appeal process for dealing with inmate's grievances regarding sexual abuse or sexual harassment during orientation and they are provided with an inmate rule book. Inmates may place a written complaint (grievance) in the secured grievance box located in five (5) housing units (with two pods in each wing. Random inmate interviews and documentation confirmed there is a grievance process relating to sexual abuse or sexual harassment and a written complaint can be placed in the PREA/grievance box (mail). Also, the inmate would contact a trusted staff, telephone the hotline (posted number), facility's administration, in relation to sexual abuse or sexual harassment complaints.

Random staff interviews confirmed they will accept allegations of sexual abuse or sexual harassment verbally, in writing, anonymously, and identified the secure inmate boxes located in all housing units. Also, the staff indicated they would contact the supervisor immediately to begin an internal investigation.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #217.02 (Inmate Grievance Procedures)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review In the past 12 months, the number of grievances filed that alleged sexual abuse reported was 0
- Pre-Audit Questionnaire review In the past 12 months, the number of grievances alleging sexual abuse that reached a final decision within 90 days after being filed reported was 0
- The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of inmate's decision to decline, reported was 0
- Pre-Audit Questionnaire review In the past 12 months, the number of emergency grievances alleging substantial risk of imminent sexual abuse that were filed in the past 12 months reported was 0

- Pre-Audit Questionnaire review In the past 12 months, the number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions with five days reported was 0
- Pre-Audit Questionnaire review In the past 12 months, the number of inmate grievances alleging sexual abuse that resulted in disciplinary action by the agency against the inmate for having filed a grievance in bad faith reported was 0
- Grievance form
- Administrative Assistant III/PCM interview and memorandum
- Random staff interviews
- Random inmate interviews

Standard 115.53: Inmate access to outside confidential support services

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

115.53	(a)
-	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? \boxtimes Yes \square No
•	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility <i>never</i> has persons detained solely for civil immigration purposes.) \square Yes \square No \boxtimes NA
•	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? \boxtimes Yes \square No
115.53	s (b)
•	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? \boxtimes Yes \square No
115.53	5 (c)
•	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? \boxtimes Yes \square No
•	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? \boxtimes Yes \square No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/ Abuse) revised 4/30/19 requires the facilities provide to inmates outside victim advocate for emotional support services, access to confidential legal counsel and the facility to provide reasonable communication between inmates, these organizations and agency, in as confidential a manner as possible. The facility shall inform inmates prior to giving them access, of the extent to which such communication will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

There is evidence of NDCS Director obtaining a Memorandum of Understanding with the Nebraska Coalition to End Sexual & Domestic Violence dated 9/3/19 to provide free confidential crisis intervention and emotional support services related to sexual abuse or sexual assault inmates. Any inmate seeking services can call the telephone number at no additional cost to the inmate. The auditor via telephone interviewed a representative from the Prison Advocacy Coordinator from the Coalition during the on-site visit at the facility. The representative indicated there have been no calls from inmates in the past twelve (12) months requesting emotional support services related to sexual abuse or sexual assault at the facility. The Coalition's Prison Advocacy Coordinator indicated the victim would be provided with a victim advocate to accompany and support the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as needed. Bryan West Medical Center (SANE certified) provides emergency services and forensic medical examinations at no financial cost to the victim. Also, Brian West Medical Center's medical staff will contact Voices of Hope to provide a victim advocate upon request from the inmate during the forensic medical examination.

Random staff interviews indicated the program staff provides the PREA pamphlet "What You Need to Know About Sexual Assault" and identifies for the inmates to call or write the Ombudsman's Office or the Prison Advocacy Coordinator. The information consists of facility rules, their right to be free from sexual abuse and sexual harassment, how to report, their right to be free from retaliation for reporting sexual abuse or sexual harassment, prevention/intervention, self-protection, reporting and treatment/counseling and is available in Spanish. Outside services information is provided to the inmates during the orientation process. Random inmate interviews revealed limited knowledge of how to access outside services and what kind of services are provided to them. The staff will be providing additional education to future inmates on victim advocate services during their orientation process.

After the on-site visit, all staff were re-trained on who provides free confidential emotional support services (Nebraska Coalition to End Sexual & Domestic Violence) and to provide additional education to future inmates on outside advocate services during their orientation process. The postings were updated

to include access to free emotional support information provided by the outside advocate and placed in all the dayrooms. Also, the postings were in both English and Spanish. The NDCS PREA Coordinator sent the appropriate supplemental documentation to the auditor demonstrating corrective actions had been taken with this standard prior to the submission of this report.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews, review of documentation and the follow-up documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Polk Cl's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Memo of Understanding with Nebraska Coalition to End Sexual and Domestic Violence
- PREA pamphlet "What You Need to Know About Sexual Assault" (English & Spanish)
- PREA Postings (English & Spanish)
- Coalition's Prison Advocacy Coordinator interview
- Random staff interviews
- Random inmate interviews
- Supplemental documentation for the corrective actions (training and sign-in sheets)

Standard 115.54: Third-party reporting

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

115.54 (a	۱
----------	---	---

	- (/			
•		be agency established a method to receive third-party reports of sexual abuse and sexual sment? $oxtimes$ Yes \oxtimes No		
•	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? \boxtimes Yes \square No			
Audit	or Ove	all Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)		
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (Requires Corrective Action)		

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does

not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 identifies the Department's third party reporting process and instructs staff to accept third party reports from any source, provides information for anyone who sees or suspects sexual abuse, sexual harassment, or victimization of any kind to report it promptly. NDCS website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of an inmate. There are two (2) separate reporting options for the receipt of third-party reports of sexual abuse or sexual harassment. Inmates may contact the State-wide PREA Coordinator or the Ombudsman Office. The information is reported directly to the State-wide PREA Coordinator who will inform the Corrections Warden.

Random staff and facility investigator interviews confirmed they receive allegations of sexual abuse or sexual harassment from third party reporters and these are reported to investigators as if an inmate made the allegation. Third party reporters included fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates.

The auditor viewed the website, confirmed the information regarding third-party reporting and the link to send an e-mail directly to the NDCS PREA Coordinator. Also, an interview with the NDCS PREA Coordinator confirmed and described the process for third-party reporting sexual abuse or sexual harassment. Random inmate interviews confirmed their awareness of reporting sexual abuse or harassment to others outside of the facility. There are facility posters that identify a phone number for inmates to call if they wish to report sexual abuse or sexual harassment. This number goes directly to the NDCS, where the call is referred for investigation through a report to the individual facility.

Based on the review of the agency policy and procedures, observations and information obtained through staff and inmate interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- NDCS website
- NDCS PREA Coordinator interview
- Random staff interviews
- Facility investigator interview
- Random inmate interviews

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

115.61	(a)		
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? \boxtimes Yes \square No		
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? \boxtimes Yes \square No		
•	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? \boxtimes Yes \square No		
115.61	(b)		
•	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? \boxtimes Yes \square No		
115.61	(c)		
•	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☑ Yes □ No		
•	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? \boxtimes Yes \square No		
115.61	(d)		
•	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? \boxtimes Yes \square No		
115.61	(e)		
•	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? \boxtimes Yes \square No		
Audito	r Overall Compliance Determination		
	Exceeds Standard (Substantially exceeds requirement of standards)		
	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
	□ Does Not Meet Standard (Requires Corrective Action)		

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that all employees, volunteers, and contractors shall immediately report to their supervisor or the shift supervisor any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility, retaliation against inmates or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Information related to a sexual abuse report shall not be released to anyone other than to the extent necessary, as specific in the procedures, to make treatment, investigation, and other security and management decisions. All facility staff are mandated reporters and receive information on clear steps on how to report sexual abuse and to maintain confidentiality through the facility's protocol and/or training.

NDCS has identified the reporting process for all staff employed, contracted or who volunteer to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and sexual harassment, retaliation against inmates or staff who report any incidents or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Random staff interviews including medical and mental health staff confirmed the requirement to report any knowledge, suspicion or information of sexual abuse or sexual harassment and have received this training annually during in-service. The staff would complete an incident report with the details of any incidents that would occur in the facility in compliance with this standard and they are prohibited from sharing information with anyone who is not part of the investigation or reporting process. Also, there is a PREA reference/education binder located in the supervisor's office containing the policy, reporting process, victim advocate information, and forms for the facility staff in the event of an incident.

Interviews with medical and mental health staff confirmed their responsibility to inform inmates their duty to report and their limitations of confidentiality during the intake process. Both the Corrections Warden and Administrative Assistant III/PCM indicated that all alleged sexual abuse or sexual harassment reports, regardless of where the information came from, is reported immediately to the NDCS PREA Coordinator. A review of the thirty-seven (37) allegations of sexual abuse and sexual harassment revealed that the investigations began immediately upon receipt of the information.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Incident Reports
- Corrections Warden interview
- Administrative Assistant III/PCM interview
- Random staff interviews
- Medical and mental health interviews

Standard 115.62: Agency protection duties

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

115.62 (a)
----------	----

•	When the agency learns that an inmate is subject to a substantial risk of imminent sexua
	abuse, does it take immediate action to protect the inmate? $oximes$ Yes $oximes$ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 indicated the requirement of the facility to take immediate action if staff learn an inmate is at risk of imminent sexual abuse.

Interviews with the Corrections Warden and Administrative Assistant III/PCM indicated any information received that alleges an inmate is at substantial risk of imminent sexual abuse would require immediate removal of the inmate and to isolate the threat. The other randomly selected staff interviews indicated if an inmate was in danger of sexual abuse or at substantial risk of imminent sexual abuse, they would act immediately to ensure the safety of the inmate, separate from the alleged perpetrator and contact their immediate supervisor. The program staff has a process in place when identifying an inmate who may be subject to a substantial risk of imminent sexual abuse the information is documented and the inmate is placed on a watch status. Also, the inmate would be referred for mental health services.

An interview with the Corrections Warden confirmed there were no incidents involving an immediate action to protect an inmate that was a substantial risk of imminent sexual abuse in the past twelve (12) months at the facility.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Corrections Warden interview
- Administrative Assistant III/PCM interview
- Random staff interviews

Standard 115.63: Reporting to other confinement facilities

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

		,
115.63	(a)	
•	facility,	receiving an allegation that an inmate was sexually abused while confined at another does the head of the facility that received the allegation notify the head of the facility or oriate office of the agency where the alleged abuse occurred? \boxtimes Yes \square No
115.63	(b)	
•		n notification provided as soon as possible, but no later than 72 hours after receiving the ion? \boxtimes Yes $\ \square$ No
115.63	(c)	
	Does t	he agency document that it has provided such notification? $oxtimes$ Yes \odots No
115.63	(d)	
•		he facility head or agency office that receives such notification ensure that the allegation stigated in accordance with these standards? \boxtimes Yes \square No
Audito	r Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	П	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that an allegation made whereby an inmate was sexually

abused at another facility is required to be reported to the facility where the alleged sexual abuse occurred, that the notification will be made as soon as possible but no later than 72 hours, and shall be documented. Requires that any receipt of an allegation of sexual abuse from another facility that occurred while confined in that facility, the Warden or designee shall ensure an investigation is completed.

Interview with Corrections Warden indicated per policy an allegation made whereby an inmate was sexually abused at another facility is required to be reported to the facility where the alleged sexual abuse occurred, the notification will be made no later than 72 hours and shall be documented. Also, an interview with the Warden and Administrative Assistant III/PCM memorandum dated 3/6/20 indicated there had been no incidents reported that an inmate had been sexually abused or sexually harassed while confined at another facility during the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review During the past 12 months, the number of allegations the facility received that an inmate was abused while confined at another facility was 0
- Pre-Audit Questionnaire review During the past 12 months, the number of allegations the facility received from other facilities was 0
- Corrections Warden interview
- Administrative Assistant III/PCM memorandum

Standard 115.64: Staff first responder duties

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

115.64 (a)

•	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? \boxtimes Yes \square No
•	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? \boxtimes Yes \square No
•	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No

•	member actions changi	earning of an allegation that an inmate was sexually abused, is the first security staff er to respond to the report required to: Ensure that the alleged abuser does not take any is that could destroy physical evidence, including, as appropriate, washing, brushing teething clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred a time period that still allows for the collection of physical evidence? \boxtimes Yes \square No
115.64	(b)	
•	that the	rst staff responder is not a security staff member, is the responder required to request e alleged victim not take any actions that could destroy physical evidence, and then notify y staff? \boxtimes Yes \square No
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
		Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the first responding staff is to separate the alleged victim and alleged abuser, protect any physical evidence by requesting that the victim does not destroy evidence (through washing, brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating, protect any physical evidence by ensuring the alleged perpetrator does not destroy evidence (through washing, brushing teeth, changing clothing, urinating, defecating, smoking, drinking or eating), if the abuse took place within a time period that still allows for the collection of physical evidence and secure the crime scene. Requires a victim shall be taken to medical staff as soon as possible or if no medical or mental health are on staff, shall ensure they are notified. Requires a first responder who is not a security staff shall request the victim not to destroy evidence and to notify a security staff.

Random staff interviews and a first responder interview validated their technical knowledge of actions to be taken upon learning that an inmate was sexually abused and could describe all the action steps identified in the NDCS policies and procedures of their responsibilities as first responders. A review of the training documentation confirmed staff had been trained in their responsibilities as first responders and have been provided with all types of additional training. The Corrections Warden interview and Administrative Assistant III/PCM memorandum dated 3/19/20 indicated there have been no allegations an inmate was sexually abused with a staff responding as a first responder or were notified within a time period that allowed for the collection of physical evidence during the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through staff and first responder interviews, review of documentation and the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review During the past 12 months, the number of allegations the facility received that an inmate was sexually abused was 0
- Pre-Audit Questionnaire review of the allegations that a resident was sexually abused the number of times a non-security staff was the first responder were 0
- 2018 & 2019 NDCS PREA Training power point & study guide & test
- NCDS PREA Refresher Training curriculum (PREA Refresher: Prison and Jails PREA Basics)
- 2018 2019 Training Transcripts
- PREA Staff Acknowledgement Form
- Staff PREA Response Card
- Corrections Warden interview
- Administrative Assistant III/PCM memorandum
- Random staff interviews
- First responder interview

Standard 115.65: Coordinated response

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

115.65 (a)

•	Has the facility developed a written institutional plan to coordinate actions among staff first
	responders, medical and mental health practitioners, investigators, and facility leadership taker
	in response to an incident of sexual abuse? ⊠ Yes □ No

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does

not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 provides a written coordinated response system at the facility to coordinate actions taken in response to an incident of sexual abuse and the notification procedures among staff first responders, administration, executive staff, medical and mental health practitioners, investigators, contacting law enforcement, and victim advocate services.

Interviews with the Corrections Warden and other random staff validated their technical knowledgeable of their duties to coordinate actions taken in response to a sexual abuse allegation. Also, the staff carry a Staff PREA Response Card which details the steps to take in response to a sexual abuse allegation. The facility's staff has a system in place providing the staff with clear actions to be taken by each discipline for accessing, contacting administrative staff, medical and mental health staff, contacting law enforcement, victim advocate services, hospital and a number of other individuals in response to sexual abuse allegations. Also, the staff utilizes the "Facility Checklist for Incidents of Sexual Assault/Abuse" form to complete the documentation of the incident. Lincoln CC's Coordinated Response Plan was reviewed and includes a step-by-step instruction guide on security search/evidence collection, document preparedness and review, and notification of first responder, administration responsibility, medical and mental health staff, PREA Compliance Manager, investigator and other pertinent staff.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Facility Checklist for Incidents of Sexual Assault/Abuse form
- Staff PREA Response Card
- Corrections Warden interview
- Random staff interviews

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

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

115.66 (a)

• Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☐ Yes ☒ No

115.66 (b)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and the documentation of the labor contract between the State of Nebraska and The Health & Human Care Non-Professional Bargaining Unit; The Examining, Inspection and Licensing Bargaining Unit; The Health & Human Care Professional Bargaining Unit; The Engineering, Science & Resources Bargaining Unit; The Maintenance, Trades & Technical Bargaining Unit; The Social Services & Counseling Bargaining Unit; The Administrative Professional Bargaining Unit; The Administrative Support Bargaining Unit and The Protective Service Bargaining Unit represented by The Nebraska Association of Public Employees Local 61 of the American Federation of State, County and Municipal Employees (NAPE/AFSCME) dated July 1, 2019 through June 30, 2021 is in accordance with the PREA standards and can be found on the NDCS website. Also, documentation of another labor contract between the State of Nebraska and The Teachers Bargaining Unit represented by The State Code Agencies Teachers Association (SCATA) dated July 1, 2019 through June 30, 2021 is in accordance with the PREA standards and can be found on the NDCS website. NDCS does not allow an entity to restrict the Department's ability to terminate an employee or remove an alleged staff sexual abuser from contact with any inmates pending the outcome of an investigation or a determination of whether and to what extent to discipline is warranted. This was confirmed with NDCS's PRFA Coordinator's interview

Based on the information discovered in the documentation and an interview with the NDCS's PREA Coordinator, the auditor has determined the facility meets the requirements of the standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Labor contracts
- NDCS PREA Coordinator interview

Standard 115.67: Agency protection against retaliation

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

115.67	(a)
•	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? \boxtimes Yes \square No
•	Has the agency designated which staff members or departments are charged with monitoring retaliation? \boxtimes Yes $\ \square$ No
115.67	(b)
•	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? \boxtimes Yes \square No
115.67	(c)
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? \boxtimes Yes \square No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? \boxtimes Yes \square No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? \boxtimes Yes \square No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? \boxtimes Yes \square No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? \boxtimes Yes \square No
•	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? \boxtimes Yes \square No

	for at le	in instances where the agency determines that a report of sexual abuse is unfounded, east 90 days following a report of sexual abuse, does the agency: Monitor negative nance reviews of staff? \boxtimes Yes \square No
	for at le	in instances where the agency determines that a report of sexual abuse is unfounded, east 90 days following a report of sexual abuse, does the agency: Monitor reassignments ? \boxtimes Yes \square No
		he agency continue such monitoring beyond 90 days if the initial monitoring indicates a ling need? $oxed{\boxtimes}$ Yes $\oxed{\square}$ No
115.67	(d)	
•		case of inmates, does such monitoring also include periodic status checks?
115.67	(e)	
	the age	other individual who cooperates with an investigation expresses a fear of retaliation, does ency take appropriate measures to protect that individual against retaliation? $\hfill \square$ No
115.67	(f)	
	Auditor	is not required to audit this provision.
Audito	r Overa	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	tions f	or Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the protection and monitoring of inmates and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or sexual harassment investigation. NDCS policies and procedures prohibit retaliation against any staff or inmate for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. Requires multiple protections such as housing changes or transfers for inmate victims or abusers, removal of the alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or

staff who fear retaliation are available. Requires monitoring for a minimum of ninety (90) days, with periodic status checks, and provides protections for any other individual who cooperates with an investigation. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. This monitoring would include inmate disciplinary reports, housing and program changes, negative performance reports as well as reassignments of staff.

An interview with one of the Lieutenants confirmed his responsibility with monitoring the conduct or treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to determine if changes that may suggest possible retaliation exist. Also, he indicated this monitoring would include bi-weekly face-to-face meetings, review of inmate disciplinary reports, bed and program changes, negative performance reports as well as reassignments of staff. Also, the interviews with the Corrections Warden and one of the Lieutenants indicated that all alleged victims or reporters are met within twenty-four (24) hours, every two (2) weeks and after the first month every thirty (30) days thereafter. If retaliation should occur, the assigned staff would complete a "Protection Against Retaliation – Inmates" form whether it is a staff or inmate retaliation monitoring. There were no incidents of retaliation at the facility in the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Protection Against Retaliation Inmates form
- Corrections Warden interview
- Lieutenant interview

Standard 115.68: Post-allegation protective custody

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

115.68 (a)

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

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that inmates identified as victims of sexual abuse shall not be placed in involuntary restrictive housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers. Also, the policy contained information on post-allegation protective custody or guidelines for moving an inmate to another facility as a last measure to keep inmates who alleged sexual abuse safe and only until an alternative means for keeping the inmate safe can be arranged. It allows for the temporary holding, less than twenty-four (24) hours, in involuntary restrictive housing or in temporary protective custody only if the facility cannot conduct such an assessment immediately. If an inmate is placed in restrictive housing, the inmate is seen every seven (7) days by the mental health staff who documents the status. Placement in restrictive housing must be clearly documented, the basis for the concern for the inmate's safety and the reason why no alternative means of separation can be arranged.

An interview with the Corrections Warden and the documentation review of the investigative files indicated that no inmate of the alleged victim was placed in Restrictive Housing as a result of an allegation or as being identified as high risk for sexual victimization in the past twelve (12) months.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Corrections Warden interview

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

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

11	15.	71	(a)
----	-----	----	-----

•	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] \boxtimes Yes \square No \square NA
•	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of

criminal OR administrative sexual abuse investigations. See 115.21(a).] ⊠ Yes □ No □ NA

115.71	(b)
•	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? \boxtimes Yes \square No
115.71	(c)
•	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? \boxtimes Yes \square No
•	Do investigators interview alleged victims, suspected perpetrators, and witnesses? \boxtimes Yes $\ \square$ No
•	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? \boxtimes Yes $\ \square$ No
115.71	(d)
•	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? \boxtimes Yes \square No
115.71	(e)
•	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? \boxtimes Yes \square No
•	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? \boxtimes Yes \square No
115.71	(f)
•	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? \boxtimes Yes \square No
•	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? \boxtimes Yes \square No
115.71	(g)
•	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? \boxtimes Yes \square No
115.71	(h)
•	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? \boxtimes Yes \square No

115.71	(i)	
•		he agency retain all written reports referenced in 115.71(f) and (g) for as long as the d abuser is incarcerated or employed by the agency, plus five years? \boxtimes Yes \square No
115.71	(j)	
•	or conf	he agency ensure that the departure of an alleged abuser or victim from the employment trol of the agency does not provide a basis for terminating an investigation? \Box No
115.71	(k)	
	Audito	r is not required to audit this provision.
115.71	(I)	
•	investigan outs	an outside entity investigates sexual abuse, does the facility cooperate with outside gators and endeavor to remain informed about the progress of the investigation? (N/A if side agency does not conduct administrative or criminal sexual abuse investigations. See (a).) \boxtimes Yes \square No \square NA
Audito	or Over	all Compliance Determination
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires all staff to refer all alleged incidents of sexual abuse to Nebraska State Patrol (NSP) for criminal investigations. Staff refers all allegations of sexual abuse and sexual harassment to the NDCS PREA Coordinator to review the complaint and determine if the facility staff will conduct the investigation. If the allegation appears to be criminal in nature the NDCS PREA Coordinator will consult with the Agency Personnel Investigator for assignment to an NDCS Criminal Investigator. If referred to the facility, the NDCS PREA Coordinator will contact the facility's PREA Compliance Manager and assign the investigation a case number in the Investigator's Case Management Data Base for completion of an administrative investigation. Requires each facility to cooperate with the assigned investigator and shall remain informed as to the progress of the

investigation. The report shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

Also, the policies require investigations to be confidential and all interviews to be conducted in private; an investigation cannot terminate based on the department of the complaint's alleged victim or perpetration from the agency employment or control, or if the source of the allegation recants; the credibility of an alleged victim, subject or witness must be assessed on an individual basis and never be determined by the person's status as an inmate or staff; investigation records to include, but not limited to investigations reports, transcripts of statement, copies of documentation relevant to the investigation, and all related material from other agency incidents as applicable; investigations must include an effort to determine whether staff actions or failures to act contributed to the incident being investigated and must be documented in writing to include investigative facts and findings.

Requires the credibility of any person shall be assessed on an individual basis. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Requires both administrative and criminal investigations shall be documented in written reports that shall include a description of the physical and testimonial evidence, the reasoning behind credibility assessment, and the investigative facts and findings. Requires all allegations of criminal conduct be referred for prosecution. Requires an investigation not stop should the alleged abuser or victim depart from the employment or control of the facility or agency. Requires all case records associated with claims of sexual abuse or sexual harassment including all documentation be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five (5) years.

Requires that all investigators shall receive special training in sexual abuse investigations before conducting PREA investigations, and that all investigations of allegations of sexual abuse or sexual harassment shall be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports. Requires the gathering and preserving of direct and circumstantial evidence, including physical and DNA evidence and electronic monitoring data, interviews, and reviews of prior complaints and reports of sexual abuse involving the suspected perpetrator. Requires consultation with prosecutors before conducting compelled interviews and prohibits the use of a polygraph examination or other truth-telling device as a condition for proceeding with an investigation.

Documentation review and interviews with the NDCS Criminal Investigator and the facility's PREA Investigator confirmed they completed the required specialized investigator training as well as the annual PREA education. Both investigators indicated all allegations are investigated, regardless of how the information is initially obtained and reported that investigations begin immediately upon notification. All allegations of sexual abuse or sexual harassment receive an administrative investigation whether it was through the facility, victim, third party or law enforcement, depending on the type of allegation. An investigation begins with information regarding the allegation, a review of the incident report, interview with the victim, alleged perpetrator, witnesses, and evidence gathering. The evidence collected is not limited to videos, statements, and prior complaints. Also, if an allegation is determined to contain criminal elements, the investigation would be referred to Nebraska State Patrol (NSP).

Both investigator interviews confirmed the credibility of the victim is based on evidence found, and that no polygraph examination or truth-telling device is a condition for proceeding with an investigation. Also, both investigators indicated an investigation does not cease until completed, regardless if the alleged perpetrator is released or resigns employment, or if the victim leaves the facility prior to the completion of the investigation. Both investigators reported they would assist if the investigation was conducted by Nebraska State Patrol (NSP).

A review of twenty-four (24) of the thirty-seven (37) investigation files of alleged staff's or inmates sexual abuse or sexual harassment that occurred in this facility in the past twelve (12) months

contained the required information in accordance to NDCS policy and procedure. The other thirteen (13) investigation files reviewed contained preliminary information. Also, one (1) investigation was substantiated for allegation of conduct and appeared to be criminal, therefore was referred for prosecution in the past twelve (12) months. At the facility, there are twenty-two (22) staff who have completed the NCDPS PREA Specialized Training: Investigating Sexual Abuse and Sexual Harassment. It was evident, the staff reported incidents as required and reports are retained for five (5) years from the date the alleged abuser is released or employed by the facility, unless the abuse was committed by a juvenile and applicable laws require a shorter period of retention. The PREA data must be retained for ten (10) years

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Specialized Investigative Training: PREA Investigating Sexual Abuse in a Confinement Setting instructor outline
- Specialized Investigative Training: PREA power point presentation
- Special Investigator Receipt of PREA Training
- Investigative Case Log Report
- PREA Investigations
- (22) Training certificates & training record computerized printout
- NDCS Criminal Investigator interview
- Facility PREA Investigator interview

Standard 115.72: Evidentiary standard for administrative investigations

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

1	1	5.	7	2	(a)

•	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? \boxtimes Yes \square No				
Audito	or Over	all Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)			
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)			
		Does Not Meet Standard (Requires Corrective Action)			

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that a facility investigate the allegation and indicates a standard of a preponderance of the evidence or a lower standard of proof for determining if allegations are substantiated. The NDCS Criminal Investigator and/or the facility's PREA Investigator investigates the allegation and indicates a standard of a preponderance of the evidence or a lower standard of proof for determining if allegations are substantiated, unsubstantiated or unfounded.

Interviews with the Corrections Warden, NDCS Criminal Investigator and facility PREA Investigator indicated they conduct fact finding investigations and make conclusions following their investigations (which are administrative in nature) and provide the information to NDCS for consultation with legal and Human Resources to determine disciplinary actions to be imposed and the standard they would use is the preponderance of evidence.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Corrections Warden interview
- NDCS Criminal Investigator interview
- Facility PREA Investigator interview

Standard 115.73: Reporting to inmates

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

1	1	5	7	3	(a)

•	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an
	agency facility, does the agency inform the inmate as to whether the allegation has been
	determined to be substantiated, unsubstantiated, or unfounded? ⋈ Yes □ No

115.73 (b)

•	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an
	agency facility, does the agency request the relevant information from the investigative agency
	in order to inform the inmate? (N/A if the agency/facility is responsible for conducting
	administrative and criminal investigations.) \boxtimes Yes \square No \square NA

115.73 (c)
Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer posted within the inmate's unit? ⋈ Yes □ No
Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The staff member is no longer employed at the facility? ⋈ Yes □ No
Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ⋈ Yes □ No
Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ⋈ Yes ⋈ No
115.73 (d)
Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?
Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
115.73 (e)
■ Does the agency document all such notifications or attempted notifications? ⊠ Yes □ No
115.73 (f)
 Auditor is not required to audit this provision.
Auditor Overall Compliance Determination
☐ Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that any inmate who makes an allegation that he or she suffered sexual abuse is informed in writing contains the process for notifying inmates whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. The policy further requires that following an inmate's allegation a staff member has committed sexual abuse against the inmate, the facility informs the inmate unless the allegations are "unfounded" whenever the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; NDCS learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility. Investigations involving inmate-on-inmate allegations of sexual abuse, NDCS PREA Coordinator notifies the Administrative Assistant III/PCM who will then inform the inmate and the Corrections Warden whenever the facility learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the facility.

Interviews with the Administrative Assistant III/PCM, NDCS Criminal Investigator and facility PREA Investigator confirmed all investigation outcomes, whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation, are completed by the investigator and the documentation is maintained with the investigation. The staff utilizes an "Inmate PREA Notification" form to advise the inmate of the investigation outcome. Also, the Administrative Assistant III/PCM confirmed there has been thirty-seven (37) allegations in the past twelve (12) months for sexual abuse and sexual harassment at the facility. Thirteen (13) of the allegations reviewed contained preliminary information. The other twenty-four (24) allegations resulted in four (4) criminal investigations pending with the Nebraska State Police, one (1) allegation was substantiated and referred to the county attorney, twelve (12) sexual abuse/assault allegations were unsubstantiated or unfounded, six (6) sexual harassment allegations were unsubstantiated or unfounded and one (1) allegation is currently in the review process. Documentation review confirmed nine (9) of the twenty-four (24) allegations reviewed contained the victim's notification of the investigation outcome that occurred in the past twelve (12) months at the facility.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)

- Pre-Audit Questionnaire review The number of criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months was 37
- Pre-Audit Questionnaire review Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigation was 9
- Pre-Audit Questionnaire review The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months was 4
- Pre-Audit Questionnaire review Of the outside agency investigations of alleged sexual abuse
 that were completed in the past 12 months, the number of inmates alleging sexual abuse in the
 facility who were notified verbally or in writing of the results of the investigation was 4
- Pre-Audit Questionnaire review In the past 12 months, the number of notifications to inmates that were provided pursuant to this standard was 9
- (9) Inmate PREA Notification forms
- Administrative Assistant III/PCM interview
- NDCS Criminal Investigator interview
- Facility PREA Investigator interview

DISCIPLINE
Standard 115.76: Disciplinary sanctions for staff
All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.76 (a)
■ Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ⊠ Yes □ No
115.76 (b)
Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ⊠ Yes □ No
115.76 (c)
 Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions

115.76 (d)

imposed for comparable offenses by other staff with similar histories? \boxtimes Yes \square No

Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No

•	 Are all terminations for violations of agency sexual abuse or sexual harassment police resignations by staff who would have been terminated if not for their resignation, rep Relevant licensing bodies? ⋈ Yes □ No 	
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	П	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Does Not Meet Standard (Requires Corrective Action)

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 required staff who are terminated or who resign for a violation of the sexual abuse or sexual harassment policies shall be informed of the NDCS's reporting the employment action to any relevant licensing bodies and to law enforcement agencies, unless the activity was clearly not criminal. Requires that staff shall be subjected to the disciplinary sanctions up to and including termination for violation of NDCS sexual abuse or sexual harassment policies. Requires that termination shall be the presumptive disciplinary sanction for staff who had engaged in sexual abuse. Requires that violations of the NDCS policies relating to sexual misconduct or sexual harassment (other than actually 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. The policy also mandates that the violation be reported to the NDCS PREA Coordinator and law enforcement if criminal in nature. Also, staff may not escape sanctions by resigning. Staff who resign because they would have been terminated, are reported to the Nebraska State Police (NSP), unless the activities were not clearly criminal.

Interviews with the Corrections Warden, Personnel Manager and documentation review confirmed there had been no employee terminated in the past twelve (12) months for violation of the facility's sexual abuse or sexual harassment policies. All disciplinary sanctions are maintained in the employee's HR file in accordance with NDCS policy and procedures.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)

- Pre-Audit Questionnaire review In the past 12 months, the number of staff from the facility who
 have violated agency sexual abuse or sexual harassment policies was 0
- Pre-Audit Questionnaire review In the past 12 months, the number of staff from the facility who
 have been terminated (or resigned prior to termination) for violating agency sexual abuse or
 sexual harassment policies is 0
- Pre-Audit Questionnaire review In the past 12 months, the number of staff from the facility who
 have been disciplined, short of termination, for violation of agency sexual abuse or sexual
 harassment policies reported were 0
- Pre-Audit Questionnaire review In the past 12 months, the number of staff from the facility who
 have been reported to law enforcement or licensing boards following their termination (or
 resignation prior to termination) for violating agency sexual abuse or sexual harassment polices
 reported was
- Corrections Warden interview
- Personnel Manager interview

Standard 115.77: Corrective action for contractors and volunteers

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

115.77	' (a)		
•	•	contractor or volunteer who engages in sexual abuse prohibited from contact with es? $\ oxdot$ Yes $\ oxdot$ No	
•	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? \boxtimes Yes \square No		
•	•	contractor or volunteer who engages in sexual abuse reported to: Relevant licensing \mathbb{R}^2 Yes \mathbb{R}^2 No	
115.77	(b)		
•	• In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? ✓ Yes ✓ No		
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's

conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that any contractor or volunteer who engages in sexual abuse of inmates shall be prohibited from contact with inmates and shall be reported to the NDCS PREA Office, any relevant licensing bodies and to law enforcement agencies, unless the activity was clearly not criminal. Requires the facility to take appropriate remedial measures and shall consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a volunteer or contractor.

An interview with the Corrections Warden confirmed there was one (1) instance whereby a volunteer or contractor was alleged to have violated the sexual abuse or sexual harassment NDCS policies and procedures in the past twelve (12) months. All volunteers and contractors must sign the "Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors" form upon completion of the PREA training they received. This was verified with the documentation review of volunteer and contractor information.

Based on the review of the agency policy and procedures, observations and information obtained through staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review In the past 12 months, the number of volunteers who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of resident was 1
- Pre-Audit Questionnaire review In the past 12 months, the number of contractors who have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of a resident was 1
- Inmate Sexual Assault/Abuse Agreement for Volunteers and Contractors form
- Corrections Warden interview
- Documentation (HR record & investigation)

Standard 115.78: Disciplinary sanctions for inmates

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

115.78 (a)

Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ⋈ Yes □ No

115.78 (b)

•	inmate	nctions commensurate with the nature and circumstances of the abuse committed, the 's disciplinary history, and the sanctions imposed for comparable offenses by other s with similar histories? ⊠ Yes □ No
115.78	(c)	
•	When o	determining what types of sanction, if any, should be imposed, does the disciplinary s consider whether an inmate's mental disabilities or mental illness contributed to his or navior? ⊠ Yes □ No
115.78	(d)	
•	underly the offe	acility offers therapy, counseling, or other interventions designed to address and correct ving reasons or motivations for the abuse, does the facility consider whether to require ending inmate to participate in such interventions as a condition of access to mming and other benefits? \boxtimes Yes \square No
115.78	(e)	
•		he agency discipline an inmate for sexual contact with staff only upon a finding that the ember did not consent to such contact? \boxtimes Yes \square No
115.78	(f)	
-	upon a inciden	e purpose of disciplinary action does a report of sexual abuse made in good faith based reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an at or lying, even if an investigation does not establish evidence sufficient to substantiate egation? \boxtimes Yes \square No
115.78	(g)	
•	conside	gency prohibits all sexual activity between inmates, does the agency always refrain from ering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the does not prohibit all sexual activity between inmates.) \boxtimes Yes \square No \square NA
Auditor Overall Compliance Determination		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
Instruc	ctions f	or Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does

not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires an inmate who makes a report of inmate-on-inmate sexual violence or employee sexual abuse or sexual harassment that is determined to be false, may be charged with a disciplinary offense if it is determined the report was made in bad faith following consultation with the NDCS PREA Coordinator. Requires sanctions to be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

Requires consideration whether an inmate's mental disabilities or mental illness contributed to his behavior when determining what type of sanction, if any, should be imposed. Requires the consideration whether to require the offending inmate to participate in interventions as a condition of access to programming or other benefits when services, such as therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for abuse, are available. Inmates shall not be charged for reports of sexual abuse made in good faith, based upon a reasonable belief that the alleged conduct occurred. Such a report shall not constitute falsely reporting an incident or lying, even if an investigation does not establish sufficient evidence to substantiate the allegation.

An interview with Corrections Warden indicated sanctions are addressed at a formal disciplinary hearing and mental health staff is conferred with before sanctions are determined. He stated that disciplinary action can include a change in custody level, segregation time, loss of good time and law enforcement charges which may be referred for prosecution if the allegations were criminal, if applicable. The staff provides each inmate with a NDCS PREA pamphlet entitled "Sexual Assault Awareness" and Institutional Rules that includes their rights and responsibilities, a disciplinary list of violations, disciplinary procedures and transfers. Inmates will be offered therapy, counseling or other interventions designed to address and correct the underlining reasons for their conduct. Documentation review indicated there had been three (3) administrative findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility in the past twelve (12) months that resulted in disciplinary action.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Pre-Audit Questionnaire review In the past 12 months, the number of administrative findings of Inmate-on-Inmate sexual abuse that have occurred at the facility was 3
- Pre-Audit Questionnaire review In the past 12 months, the number of criminal findings of guilt for Inmate-on-Inmate sexual abuse that have occurred at the facility was 0
- Sexual Assault Awareness brochure and Institutional Rules
- (3) Disciplinary Misconduct Reporting Forms
- Corrections Warden interview

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

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

All Tes	Who Questions Must be Answered by the Auditor to Complete the Report
115.81	(a)
•	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) \boxtimes Yes \square No \square NA
115.81	(b)
•	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) \boxtimes Yes \square No \square NA
115.81	(c)
•	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? \boxtimes Yes \square No
115.81	(d)
•	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? \boxtimes Yes \square No
115.81	(e)
•	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? \boxtimes Yes \square No
Audito	r Overall Compliance Determination
	☐ Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Policy #115.23 (Mental Health Services) revised 12/31/19 requires medical and mental health evaluations and as appropriate, treatment is offered to all inmates victimized by sexual abuse and ensure confidentiality of information. Inmates who report prior sexual victimization or who disclose prior incidents of perpetrating sexual abuse, either in an institution or in the community, are required to be offered a follow-up with a medical or a mental health practitioner within 14 days of admission/screening. Limits access to the screening information to medical and mental health practitioners, and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by federal, state, or local law. Requires medical and mental health to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of eighteen (18).

Documentation review confirmed that Nebraska SP's medical staff had an intake process completing various admission screening forms (i.e. Intra-System Medical Screening, Intake Medical Screening, Patient Questionnaire and Health Screening) and mental health staff completes various forms (i.e. Behavior Suicide Assessment form, Potential for Sexual Assault/Sexual Victimization Screening Instrument, Mental Health Intake and Orientation Receipt, Mental Health Orientation Notes and PREA Screening form) during the initial intake process including informed consent disclosures. Medical and mental health staff interviews confirmed that although there were no disclosures, all inmates were offered follow-up meetings with medical and mental health providers. Also, medical and mental health staff confirmed the referral process for inmates who report sexual victimization or are identified as being sexually abusive at intake is reported within fourteen (14) days. Medical staff provides inmates with health education (including sexual abuse/assault) during the initial intake process and throughout their stay at the facility.

Interviews with both the Corrections Warden and Administrative Assistant III/PCM confirmed there are no inmates under the age of eighteen (18) housed at this facility. Documentation review confirmed medical and mental health staff conducts risk assessments during the initial intake process including informed consent disclosures. There were no inmates who disclosed prior victimization during their initial screening process within the past twelve (12) months.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #115.23 (Mental Health Services)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- Admission screening forms Intra-System Medical Screening, Intake Medical Screening, Patient Questionnaire and Health Screening)
- Medical and mental health staff interviews
- Corrections Warden and Administrative Assistant III/PCM interviews

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
l15.82 (a)
■ Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? ☑ Yes □ No
l15.82 (b)
• If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? ☑ Yes ☐ No
■ Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ⊠ Yes □ No
115.82 (c)
■ Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? ⊠ Yes □ No
l15.82 (d)
 Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☑ Yes □ No
Auditor Overall Compliance Determination
Exceeds Standard (Substantially exceeds requirement of standards)
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

	Does Not Meet Standard (Requires Corrective Action)
--	--

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the timely and unimpeded access to emergency medical treatment and crisis intervention services for victims of sexual abuse. If there are no qualified medical or mental health practitioners on duty at the time a report of sexual assault or sexual abuse is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the facility's designated medical and mental health practitioner. Requires that victims of sexual abuse while incarcerated shall be offered timely information about and access to emergency contraception and sexually transmitted infections prophylaxis. Requires that treatment services are provided free of cost and regardless of whether the victim identifies the abuser or cooperates with an investigation.

The medical staff had a protocol in place to assist in expediting an inmate to the emergency room with specific documentation (Transportation Order and Emergency Referral) for the correctional officers. Documentation and interviews with medical staff confirmed Bryan West Medical Center (SANE certified) provides emergency services and forensic medical examinations at no financial cost to the victim. Also, Brian West Medical Center's medical staff will contact Voices of Hope to provide a victim advocate upon request from the inmate during the forensic medical examination. Nebraska Coalition to End Sexual & Domestic Violence is the program identified to provide confidential emotional support services to the inmates at the facility. The facility has available the PREA pamphlet "What You Need to Know About Sexual Assault" and identifies for the inmates to call or write the Ombudsman's Office or the Prison Advocacy Coordinator.

Interviews with the medical staff confirmed that inmates (victims) of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. The medical staff indicated that services begin immediately upon notification of a victim of sexual abuse from the supervisor or any other staff to contact the hospital and medical practitioner. All notifications would be completed to the appropriate individuals and to follow the medical staff's directive regarding any forensic examination. The medical and mental health staff interviews indicated the scope of services is in accordance to their professional judgment, policy and any physician orders or protocols. All orders will be documented in the inmate's medical/mental health record. The medical staff had a tracking system of documenting all PREA incidents that occur at the facility.

Also, the medical staff's interviews indicated that a referral could be made to the hospital to begin any sexually transmitted infection prophylaxis treatment/services and orders for follow-up services. Mental health services would begin when the victim is available once the forensic examination has been completed at the hospital. Medical staff interviews indicated mental health staff would see the victim no later than 24 hours of an incident and provide one-on-one counseling and make available outside emotional support services and follow-up care. Documentation in the reports indicated that services are provided immediately upon notification. In the past twelve (12) months, there had been four (4) allegations where a victim required a forensic medical examination.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- What You Need to Know About Sexual Assault brochure
- Transportation Order and Emergency Referral
- (4) Allegations (forensic medical examination)
- Coalition's Prison Advocacy Coordinator interview
- Medical and mental health staff interviews

d 115.83: Ongoing modical and montal hoalth care for sevual abuse

	iard 115.65. Ongoing medical and mental health care for sexual abuse
	ns and abusers No Questions Must Be Answered by the Auditor to Complete the Report
115.83	(a)
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? \boxtimes Yes \square No
115.83	(b)
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? \boxtimes Yes \square No
115.83	(c)
	Does the facility provide such victims with medical and mental health services consistent with the community level of care? \boxtimes Yes $\ \square$ No
115.83	(d)
_	And importe victimes of according by about to a give be extended by the incompared of area of a great and a great

1

Are inmate 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 inmates 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 ☐ No ☒ NA

115.83 (e)

If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancyrelated medical services? (N/A if "all-male" facility. Note: in "all-male" facilities, there may be inmates 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.) \square Yes \square No \boxtimes NA		
115.83 (f)		
 Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?		
115.83 (g)		
 Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? ☑ Yes □ No 		
115.83 (h)		
• If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☑ Yes □ No □ NA		
Auditor Overall Compliance Determination		
☐ Exceeds Standard (Substantially exceeds requirement of standards)		
Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)		
☐ Does Not Meet Standard (Requires Corrective Action)		
Instructions for Overall Compliance Determination Narrative		

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse revised 4/30/19 and Policy #201.13 (Identification of Potential Aggressors and Victims) revised 12/15/19 requires ongoing medical and mental health care for sexual abuse victims and abusers. Also, the policies require the facilities to offer medical and mental health evaluations, transportation to a medical emergency room or a facility in the community equipped to evaluate, collect physical evidence and appropriate follow-up treatment that may include screening, including follow-up care for sexually transmitted diseases (STD) and other communicable diseases and any other counseling or assistance as requested. Requires treatment services to be free of financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The facility is required to provide such victims with medical and mental health services consistent with the community level of care. All prisons are required to attempt to conduct a mental

health evaluation of all known inmate-on-inmate abusers within fourteen (14) days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Interviews with the medical staff confirmed that victims are offered a sexual assault assessment, individual counseling, referral to the psychiatrist, medications as ordered by the physician, laboratory testing for STD and HIV and follow-up. The medical staff interviews indicated the mental health plan for services would include individual or group treatment, including trauma resolution and PTSD, as well as follow-up. Also, the mental health staff would conduct mental health evaluations of all known inmate-on-inmate abusers and offer treatment services within fourteen (14) days. Also, mental health staff would have all inmates receive a mental health evaluation during their first few weeks at the facility.

Victims of sexual abuse will be transported to the Bryan West Medical Center to receive treatment and the physical evidence can be gathered by a certified SANE medical examiner. There is a process in place to ensure staff track on-going medical and mental health services for victims who may have been sexually abused and medical staff track the follow-up medical visits. Mental health staff interviews indicated their plan for services would include individual or group treatment, including trauma resolution and PTSD, as well as follow-up for mental health visits. Also, the mental health staff would conduct mental health evaluations of all known inmate-on-inmate abusers and offer treatment services within fourteen (14) days. In the past twelve (12) months, there has been four (4) allegations where a victim was sent to Bryan West Medical Center for a forensic medical examination. However, three (3) out of the four (4) inmates refused the forensic medical exam. The medical and mental health staff have a protocol in place to assist inmates upon discharge from the facility to continue services if needed.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- Nebraska Department of Correctional Services (NDCS) Policy #201.13 (Identification of Potential Aggressors and Victims)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- What You Need to Know About Sexual Assault brochure
- Transportation Order and Emergency Referral
- (4) Allegations (forensic medical examination)
- Coalition's Prison Advocacy Coordinator interview
- Medical and mental health staff interviews

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

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

115.86 (a)

i	investi	ne facility conduct a sexual abuse incident review at the conclusion of every sexual abuse gation, including where the allegation has not been substantiated, unless the allegation en determined to be unfounded? ⊠ Yes □ No	
115.86 ((b)		
		such review ordinarily occur within 30 days of the conclusion of the investigation? \square No	
115.86 ((c)		
		he review team include upper-level management officials, with input from line isors, investigators, and medical or mental health practitioners? $oximes$ Yes \oxime No	
115.86 ((d)		
		he review team: Consider whether the allegation or investigation indicates a need to e policy or practice to better prevent, detect, or respond to sexual abuse? \boxtimes Yes \square No	
€	ethnicit	he review team: Consider whether the incident or allegation was motivated by race; ty; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or ved status; gang affiliation; or other group dynamics at the facility? $oxtimes$ Yes $oxtimes$ No	
		he review team: Examine the area in the facility where the incident allegedly occurred to whether physical barriers in the area may enable abuse? \boxtimes Yes \square No	
s • [Does the review team: Assess the adequacy of staffing levels in that area during different shifts? \boxtimes Yes \square No Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? \boxtimes Yes \square No		
i	determ improv	he review team: Prepare a report of its findings, including but not necessarily limited to hinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for ement and submit such report to the facility head and PREA compliance manager? \square No	
115.86 ((e)		
		he facility implement the recommendations for improvement, or document its reasons for ng so? \boxtimes Yes $\ \square$ No	
Auditor Overall Compliance Determination			
[Exceeds Standard (Substantially exceeds requirement of standards)	
[\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	

□ Does Not Meet Standard	(Requires Corrective Action)
--------------------------	------------------------------

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 and Lincoln CC/Diagnostic and Evaluation Center Operational Memorandum Policy #23.11.001 (Sexual Assault/Abuse) revised 4/30/19 requires incident reviews to be conducted at the conclusion of every sexual abuse investigation including where the allegation has been substantiated and unsubstantiated. Requires the sexual abuse incident review to be conducted within thirty (30) days of the conclusion of the investigation. Requires the review team to include uppermanagement officials, with input from line supervisors, investigators, and medical or mental health practitioners. Requires the review of the allegation for: the need for policy or practice change, motivation for the incident, check of the physical area for barriers, staffing levels at the time of the incident, and information regarding any enhancement of current monitoring technology. Requires a written report completed that includes any recommendations and corrective action, as well as documentation showing implementation of the recommendations or the reason for not implementing the recommendations.

An interview with the Corrections Warden, other staff interviews and documentation review of the investigation reports confirmed that a report (Sexual Abuse Incident Review) is prepared upon completion of sexual abuse incident reviews. The report would include: brief chronological summary, acknowledgment of what went well during the incident, whether the incident response/action was in compliance with relevant NDCS rules, policies, and procedures, corrective actions taken or still needed to improve outcomes in future similar incidents, policy changes, motivation of the incident, motivated or caused by group dynamic, physical barriers, monitoring technology, medical and mental health services provided, outcome of the investigation/corrective actions, and inmate notification of investigation outcome upon completion of sexual abuse incident reviews.

Lincoln CC's Sexual Abuse Incident Review Team consisted of the Corrections Warden, Deputy Warden, facility investigator, medical and mental health staff. The Corrections Warden interview confirmed there had been five (5) sexual abuse/assault incident reviews of administrative investigations of alleged sexual abuse that occurred in the facility in the past twelve (12) months. There has been thirty-seven (37) allegations in the past twelve (12) months for sexual abuse and sexual harassment at the facility. Thirteen (13) of the allegations reviewed contained preliminary information. The other twenty-four (24) allegations resulted in four (4) criminal investigations pending with the Nebraska State Police, one (1) allegation was substantiated and referred to the county attorney, twelve (12) sexual abuse/assault allegations were unsubstantiated or unfounded, six (6) sexual harassment allegations were unsubstantiated or unfounded, six (6) sexual harassment allegations were unsubstantiated or unfounded is currently in the review process. Random staff interviews confirmed their knowledge of the process and would document their review on the "Sexual Abuse Incident Review" form that captures all aspects of an incident.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy	and Supporting Documents Reviewed, Interviews and Observation:
•	Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) PREA Standards Compliance Checklist Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails) (5) Sexual Abuse Incident Reviews (Incident Review Team meetings) Corrections Warden interview Random staff interviews
Stan	dard 115.87: Data collection
All Ye	s/No Questions Must Be Answered by the Auditor to Complete the Report
115.87	(a)
•	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? \boxtimes Yes \square No
115.87	(b)
•	Does the agency aggregate the incident-based sexual abuse data at least annually? \boxtimes Yes \square No
115.87	(c)
•	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? \boxtimes Yes \square No
115.87	(d)
•	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? \boxtimes Yes \square No
115.87	(e)
•	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) \boxtimes Yes \square No \square NA
115.87	(f)
•	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)

Auditor Overall Compliance Determination

 \boxtimes Yes \square No \square NA

☐ Exceeds Standard (Substantially exceeds requirement of standards)

\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the collection of accurate, uniform data for every allegation of sexual abuse annually at facilities under its direct control using a standardized instrument and set of definitions. Also, the policy and procedure require an annual aggregate of the sexual abuse data, the collection of necessary data to respond to the DOJ – Survey of Sexual Violence and the data provided to the DOJ no later than June 30 of each year. Requires that data will be collected from any private facility with which it contracts for the confinement of offenders. The Correctional Warden or designee would submit the information to the NDCS PREA Coordinator. The data gathered would include information that answers, at a minimum, the Department of Justice Survey of Sexual Violence (DOJ-SSV). The agency would maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Requires the collection of same information from private agencies with whom it contracts for the confinement of its inmates.

An interview with Administrative Assistant III/PCM completes the collected data related to PREA forwards the report to the Corrections Warden for review and approval prior to forwarding to the NDCS PREA Coordinator. NDCS has a data collection instrument to answer all questions for the U.S. Department of Justice Survey of Sexual Abuse Violence. The NDCS PREA Coordinator is responsible for monitoring the PREA data and alerting the NDCS Director of any notable trends. An interview with the NDCS PREA Coordinator indicated that she maintains all related data and document information as required by policy and procedure from each facility on a monthly basis. This information is used to identify trends and create corrective actions for an individual facility.

Documentation review of the 2018 NDCS Sexual Abuse Annual Assessment (annual report) revealed they were detailed, comprehensive and identified all state facilities within the Nebraska Department of Correctional Services. Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- 2018 NDCS Sexual Abuse Annual Assessment (annual report)
- NDCS PREA Coordinator interview
- Administrative Assistant III/PCM interview

Standard 115.88: Data review for corrective action

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

1 13.00	' (α)		
•	and im	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Identifying problem areas? \boxtimes Yes \square No	
•	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Taking corrective action on an ongoing basis? □ No	
•	and im practic	he agency review data collected and aggregated pursuant to § 115.87 in order to assess prove the effectiveness of its sexual abuse prevention, detection, and response policies, es, and training, including by: Preparing an annual report of its findings and corrective for each facility, as well as the agency as a whole? \boxtimes Yes \square No	
115.88	(b)		
•	actions	he agency's annual report include a comparison of the current year's data and corrective with those from prior years and provide an assessment of the agency's progress in sing sexual abuse \boxtimes Yes \square No	
115.88	(c)		
•		agency's annual report approved by the agency head and made readily available to the through its website or, if it does not have one, through other means? \boxtimes Yes \square No	
115.88	(d)		
•	from th	he agency indicate the nature of the material redacted where it redacts specific material be reports when publication would present a clear and specific threat to the safety and y of a facility? \boxtimes Yes \square No	
Auditor Overall Compliance Determination			
		Exceeds Standard (Substantially exceeds requirement of standards)	
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (Requires Corrective Action)	

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires the review of data for corrective action to improve the effectiveness of its prevention, protection and response policies, practices and training by identifying problem areas, taking on-going corrective action and preparing an annual report of its findings for individual facilities and the agency as a whole. Also, the policy and procedure require the report to include comparison data and corrective actions from prior years, approved by the NDCS Director, made public and allows the redaction of specific material and an indication of the material redacted.

An interview with the NDCS PREA Coordinator reports that information is gathered and submitted to the public through Sexual Abuse Annual Assessments are available on the website and includes comparison data and any facility modifications or agency policy changes. Also, she indicated the information is security retained and on-going corrective action is tracked. Administrative Assistant III/PCM monitors collected data to determine and assess the need for any corrective actions and forwards the information to the NDCS PREA Coordinator.

Documentation review of the 2018 NDCS Annual PREA Assessment (annual report) contained the comparison data and corrective actions specific to NDCS facilities as well as to the agency. The review of 2018 Lincoln CC's Annual PREA Assessment contained specific data and corrective action plans specific to the facility. The report was approved by both the NDCS Director and NDCS PREA Coordinator. The report is available to the public on the NDCS website.

Based on the review of the agency policy and procedures, observations and information obtained through the staff interviews and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- 2018 NDCS Sexual Abuse Annual Assessment (annual report)
- 2018 Lincoln CC's Annual PREA Assessment (annual report)
- NDCS website
- NDCS PREA Coordinator interview
- Administrative Assistant III/PCM interview

Standard 115.89: Data storage, publication, and destruction

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

115.89 (a)

•	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
	⊠ Yes □ No

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? \boxtimes Yes \square No 115.89 (c) Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? \boxtimes Yes \square No 115.89 (d) Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ⊠ Yes □ No **Auditor Overall Compliance Determination Exceeds Standard** (Substantially exceeds requirement of standards) \boxtimes Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

Instructions for Overall Compliance Determination Narrative

Does Not Meet Standard (Requires Corrective Action)

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

A review of the Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse) revised 4/30/19 requires that the NDCS shall ensure that data collected of allegations of sexual abuse is securely retained and makes information readily available to the public through an annual report on its website. Also, the policy and procedure required before making the report public, the NDCS shall remove all personal identifies and to maintain this information for at least ten (10) years after the date of initial collection unless Federal, State or local law requires otherwise. Also, NDCS has a data collection retention schedule that identifies the completion of ten (10) years and then to be destroyed.

An interview with NDCS PREA Coordinator confirmed that data is collected and securely retained for a minimum of ten (10) years. A review of the 2018 NDCS Annual PREA Assessment (annual report) confirmed there were no personal identifiers within the document, and it is posted on the NDCS Website and readily available for public review.

115.89 (b)

Based on the review of the agency policy and procedures, observations and information obtained through the staff interview and review of documentation, the facility has demonstrated compliance with this standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- Lincoln CC's PREA Audit: Pre-Audit Questionnaire (Prisons and Jails)
- 2018 NDCS Sexual Abuse Annual Assessment (annual report)
- NDCS PREA Coordinator interview

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

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

115.401 (a)	11	5.	40	1	(a)
-------------	----	----	----	---	-----

115.401	(a)
a ₍	During the prior three-year audit period, did the agency ensure that each facility operated by the gency, or by a private organization on behalf of the agency, was audited at least once? (<i>Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.</i>) \boxtimes Yes \square No
115.401	(b)
	is this the first year of the current audit cycle? (Note: a "no" response does not impact overall ompliance with this standard.) \boxtimes Yes \square No
of a	this is the second year of the current audit cycle, did the agency ensure that at least one-third f each facility type operated by the agency, or by a private organization on behalf of the gency, was audited during the first year of the current audit cycle? (N/A if this is not the <i>econd</i> year of the current audit cycle.) \square Yes \square No \boxtimes NA
e: W	this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of ach 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 <i>third</i> year f the current audit cycle.) \square Yes \square No \boxtimes NA
115.401	(h)
	Did the auditor have access to, and the ability to observe, all areas of the audited facility? $\ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \ \$
115.401	(i)

•		ne auditor permitted to request and receive copies of any relevant documents (including inically stored information)? \boxtimes Yes \square No
115.40	1 (m)	
•		ne auditor permitted to conduct private interviews with inmates, residents, and detainees? $\ \square$ No
115.40	1 (n)	
 Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? ☐ Yes ☐ No Auditor Overall Compliance Determination 		
		Exceeds Standard (Substantially exceeds requirement of standards)
	\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (Requires Corrective Action)
la a 4 m c	-4: 4	ian Overell Campliance Determination Negrotive

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This auditor reviewed the Nebraska Department of Correctional Services (NDCS) web page at https://corrections.nebraska.gov/about/prison-rape-elimination-act-0 containing the ten (10) audit reports for PREA audits completed from August 25, 2015 through October 26, 2017. One third of each facility type operated by this Agency was completed during the first PREA audit cycle in accordance with the standard. However, all ten (10) facilities during the second PREA audit cycle did not comply with the one third requirement of the standard. Three (3) facilities were audited during the first year, two (2) facilities were audited the second year, and five facilities were audited the third year. This is one of the facilities scheduled for the first year of the third PREA audit cycle. The auditor had access to the entire facility and was able to conduct staff and inmate interviews in a private room and provided with documentation in accordance to the standard. Inmates were permitted to send confidential information or correspondence to this auditor, the same method as sending to their legal counsel. Posters (preaudit notices) for communicating to the auditor were in all areas of the facility.

Based on the review of the agency policy and procedures and information obtained through the documentation review, the agency did not demonstrate compliance with the standard during the second PREA audit cycle. However, the agency has scheduled the audits for the third PREA audit cycle in compliance with the standard.

Policy and Supporting Documents Reviewed, Interviews and Observation:

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- NDCS website
- 2018 NDCS Sexual Abuse Annual Assessment (annual report)
- NDCS PREA Coordinator interview

Standard 115.403: Audit contents and findings

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

115.403 (f)

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. 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 that there has never been a Final Audit Report issued.) ⋈ Yes ⋈ No ⋈ NA

Auditor Overall Compliance Determination

	Exceeds Standard (Substantially exceeds requirement of standards)
\boxtimes	Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This auditor reviewed the Nebraska Department of Correctional Services (NDCS) web page https://corrections.nebraska.gov/about/prison-rape-elimination-act-0 containing the ten (10) PREA Final Reports that were audited for the previous three years and published within 90 days after the final report was issued by the auditor. Also, two (2) facilities that were audited for the first year of the second cycle their reports were published within 90 days after the final report was issued by the auditor.

Based on the review of the agency policy and procedures and information obtained through the documentation review, the agency has demonstrated compliance with this standard.

- Nebraska Department of Correctional Services (NDCS) Policy #203.11 (Sexual Assault/Abuse)
- PREA Standards Compliance Checklist
- NDCS website
- 2018 NDCS Sexual Abuse Annual Assessment (annual report)
- NDCS PREA Coordinator interview

AUDITOR CERTIFICATION

I certify that:	
\boxtimes	The contents of this report are accurate to the best of my knowledge.
\boxtimes	No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
	I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.
Auditor In	structions:
electronic sign searchable P into a PDF for	name in the text box below for Auditor Signature. This will function as your official nature. Auditors must deliver their final report to the PREA Resource Center as a DF format to ensure accessibility to people with disabilities. Save this report document rmat prior to submission. ¹ Auditors are not permitted to submit audit reports that have d. ² See the PREA Auditor Handbook for a full discussion of audit report formatting
Dorothy Xan	os <u>April 24, 2020</u>

Auditor Signature

Date

 $^{^{1} \}mbox{ See additional instructions here: } \underline{\mbox{https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110} \ .$

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.