

Prison Rape Elimination Act (PREA) Audit Report Community Confinement Facilities

Interim Final

Date of Report August 6,2018

Auditor Information

Name: Darnel Carlson	Email: darnel.carlson@crowwing.us
Company Name: Click or tap here to enter text.	
Mailing Address: P.O. Box 1201	City, State, Zip: Brainerd, MN 56401
Telephone: 218-822-7007	Date of Facility Visit: 06212018

Agency Information

Name of Agency: Volunteers of America RRC		Governing Authority or Parent Agency (If Applicable): Click or tap here to enter text.	
Physical Address: 1771 Kent Street		City, State, Zip: Roseville, MN 55113	
Mailing Address: Click or tap here to enter text.		City, State, Zip: Click or tap here to enter text.	
Telephone: 651-488-2073		Is Agency accredited by any organization? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input checked="" type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency mission: Help people gain self-reliance, dignity and hope			
Agency Website with PREA Information: https://www.voamnwi.org/prea			

Agency Chief Executive Officer

Name: Chris Doege	Title: Director
Email: chris.doege@voamn.org	Telephone: 612-877-4252

Agency-Wide PREA Coordinator

Name: Ashley Sykora	Title: Sr. Case Manager
Email: Ashley.sykora@voamn.org	Telephone: 612-278-4210

PREA Coordinator Reports to: Chris Doege	Number of Compliance Managers who report to the PREA Coordinator 0
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Facility Information

Name of Facility: Volunteers of America RRC

Physical Address: 1771 Kent Street, Roseville, MN 55113

Mailing Address (if different than above): [Click or tap here to enter text.](#)

Telephone Number: 651-488-2073

The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input checked="" type="checkbox"/> Private not for Profit
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<input type="checkbox"/> Municipal	<input type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
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Facility Type:	<input type="checkbox"/> Community treatment center	<input checked="" type="checkbox"/> Halfway house	<input type="checkbox"/> Restitution center
	<input type="checkbox"/> Mental health facility	<input type="checkbox"/> Alcohol or drug rehabilitation center	
	<input type="checkbox"/> Other community correctional facility		

Facility Mission: Help people gain self-reliance, dignity and hope

Facility Website with PREA Information: <https://www.voamnwi.org/prea>

Have there been any internal or external audits of and/or accreditations by any other organization? Yes No

Director

Name: Chris Doege	Title: Director
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Email: chris.doege@voamn.org	Telephone: 612-877-4252
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Facility PREA Compliance Manager

Name: Ashley Sykora	Title: Sr. Case Manager
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Email: ashey.sykora@voamn.org	Telephone: 612-278-4210
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Facility Health Service Administrator

Name: N/A	Title: Click or tap here to enter text.
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Email: Click or tap here to enter text.	Telephone: Click or tap here to enter text.
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Facility Characteristics

Designated Facility Capacity: 68		Current Population of Facility: 55	
Number of residents admitted to facility during the past 12 months			156
Number of residents admitted to facility during the past 12 months who were transferred from a different community confinement facility:			0
Number of residents admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			156
Number of residents admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			156
Number of residents on date of audit who were admitted to facility prior to August 20, 2012:			0
Age Range of Population:	<input checked="" type="checkbox"/> Adults 18-70	<input type="checkbox"/> Juveniles 0	<input type="checkbox"/> Youthful residents 0
Average length of stay or time under supervision:			3-6 months
Facility Security Level:			Community confinement
Resident Custody Levels:			minimum
Number of staff currently employed by the facility who may have contact with residents:			29
Number of staff hired by the facility during the past 12 months who may have contact with residents:			7
Number of contracts in the past 12 months for services with contractors who may have contact with residents:			0
Physical Plant			
Number of Buildings: 1		Number of Single Cell Housing Units: 15	
Number of Multiple Occupancy Cell Housing Units:		8	
Number of Open Bay/Dorm Housing Units:		0	
Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.): The video monitoring system (Digital Watchdog) was installed in 2015 which includes over 15 cameras and a monitoring station at the main work station. Additional cameras have been installed since the 2015 PREA Audit.			
Medical			
Type of Medical Facility:		Residents use community medical providers	
Forensic sexual assault medical exams are conducted at:		Regions Hospital	
Other			
Number of volunteers and individual contractors, who may have contact with residents, currently authorized to enter the facility:			1
Number of investigators the agency currently employs to investigate allegations of sexual abuse:			1

Audit Findings

Audit Narrative

The Prison Rape Elimination Act (PREA) on-site audit of the Volunteers of America — Residential Reentry Center (VOA RRC) in Roseville, Minnesota was conducted on June 22, 2018. Pre-Audit preparation included a thorough review of the Pre-Audit Questionnaire and all documents and materials submitted by the facility. The documentation review included agency policies, procedures, forms, contracts, educational materials, and other PREA related materials that were provided to demonstrate compliance with the PREA Standards. This review prompted questions that were asked during the initial meeting during the on-site audit. Answers to the questions were provided by the PREA Coordinator/Senior Case Manager assigned to the Roseville VOA RRC. Audit notices were provided to the Roseville VOA RRC six weeks prior to the audit. The audit notices provided in English and Spanish versions were visibly posted in all common areas on both levels of the facility. The auditor did not receive any correspondence from residents throughout the audit process. The audit notices were still posted throughout the facility during the on-site audit.

During the one day of the on-site audit, the auditor was provided a conference room to work and conduct confidential interviews. Five facility staff members were interviewed. Included in the five facility staff interviews were random staff, staff who perform screenings for risk of victimization and abusiveness, intake staff, investigative staff, incident review team member, and a designated staff member charged with monitoring retaliation. Also, interviewed were the designated agency head, facility director, and PREA coordinator. The auditor interviewed nine (five male and four female) randomly selected residents. During the on-site audit, there were zero residents admitted to the facility identified to be interviewed for residents in other targeted areas. The Roseville VOA RRC reported one substantiated allegation of sexual harassment reported by a resident against a staff member, one substantiated allegation of sexual abuse reported by a resident against another resident, and one unsubstantiated allegation of sexual abuse reported by a resident against a staff member.

The auditor reviewed personnel files to determine compliance with training mandates, background procedures, and ongoing background checks every five years of staff. The Roseville VOA RRC submit fingerprint cards of potential employees to the Bureau of Prisons who conduct a background check and are the final approval to hire a new employee. The contract cycle between the Federal Bureau of Prisons and the VOA RRC is five years. The Federal Bureau of Prisons conducts background checks on all staff employed at the facility at the time of the contract renewal. Resident files were reviewed to evaluate screening and intake procedures and training acknowledgments.

The facility employs approximately twenty-nine staff who may have contact with residents which include the Senior Program Director/PREA Coordinator, Senior Case Manager, Case Managers, LS Social Service Coordinator, Program Assessment Coordinator, Office Manager, Program Service Coordinator, Field Verification Tech, Shift Managers, Shift Staff, and Maintenance Staff.

The auditor toured the facility escorted by the PREA Coordinator. All areas of the facility were toured which included (reception area and main staff work office, laundry areas, additional staff offices, resident common areas, and the dining room.) Location of cameras, staff interaction with residents, resident rooms, shower areas, restrooms, placement of posters and PREA information resources, and security monitoring. The auditor noted that individual showers and restrooms were available on both levels of the facility. The facility does not have a commercial kitchen so all meals are delivered and set-up in the dayroom/dining room for male residents. Shift staff deliver meals to the female residents to the designated female housing floor. The contracted vendor's staff do not have physical contact with residents when delivering the meals. The auditor was given access to all parts of the facility and talked to staff and residents informally during walkthroughs of the facility throughout the course of the visit.

The facility administration was available throughout the audit. Staff and residents were made readily available to the auditor at all times. The Roseville VOA RRC follows the Volunteers of America philosophy of

individual self-determination, personal objective setting, and mutual accountability. Through interviews with staff and residents it is apparent the facility has developed a culture of zero tolerance and the high importance placed on the safety of the staff and residents at the facility.

Facility Characteristics

The Roseville VOA RRC (Volunteers of America Residential Reentry Center) is provisionally licensed and inspected by the Minnesota Department of Corrections governing Adult Community-Based Residential Correctional Facilities to determine continued compliance with Minnesota 2920 rules. The Roseville VOA RRC is physically audited bi-annually. On the off years between physical inspections, the facility completes and submits a self-report audit to the Minnesota Department of Corrections. The facility is audited on an annual basis by the Bureau of Prisons for compliance with their Statement of Work.

The Roseville VOA RRC (Volunteers of America Residential Re-entry Center) is located at 1771 Kent Street in Roseville, Minnesota. The Roseville VOA RRC consists of one stand-alone two level building that is not visible from the street. The area surrounding the building is undeveloped; there are commercial buildings and residential areas within walking distance of the facility. Volunteers of America is leasing the building (formerly the Ramsey County Women's Workhouse) from Ramsey County. There were forty-four adult male residents and eleven adult female residents in custody on the first day of the PREA Audit.

The Roseville VOA RRC is a sixty-eight bed half-way house with an average resident stay of three to six months that provides services which include employment, residence development, and other self-improvement opportunities to assist federal offenders transitioning from prison back into the community. The Roseville VOA RRC houses adult male and female residents that are under sentence from the Federal Bureau of Prisons, United States Attorney General, and the United States Probation Office. The VOA RRC has maintained a contract with the Bureau of Prisons for over thirty years without interruption. The VOA RRC also contracts with the Minnesota Department of Corrections (MNDOC) Work Release Unit to provide a residence and work release services for male and female offenders placed on phase 1 status with the MNDOC. The main entry is located off the upper level of the building. Upon entering the building there is a short hallway with three staff offices, restroom, and fully enclosed main staff work area that is staffed twenty-four/seven with two split doors (one is located on the entry side and one is located on the secured side.) The upper half of both doors are open to allow communication between residents, staff, and visitors. There is a secured door controlled by staff between the entry area and the upper resident living area. You enter into a large open area that serves as the main dayroom and dining room with vending machines. The kitchen area off the dining area is locked (male residents do not have access to the kitchen.) Located around the dayroom area are multiple offices for the Sr. Program Manager, Supervising Case Manager, Case Managers, and conference room. All office areas are enclosed with glass that allows for visual observation of male residents in the dayroom and female and male residents meeting with staff in the offices. There is one enclosed area that is used for an additional dayroom area with a television for male residents. Off the dayroom are two wings of resident rooms that consist of single and multiple occupancy rooms with individual private restrooms and showers. For residents who do not have showers and restrooms in their assigned rooms, there are private restrooms and showers that can be accessed off the hallway of each wing and a laundry area. Off the main dayroom area, there is a set of stairs with a secure door (monitored by shift staff) with a full glass enclosure used to reach the female resident housing area. The female housing area consists of two wings, each wing has a dayroom area and resident rooms that consist of single and multiple occupancy rooms with individual restrooms and showers. For residents who do not have showers and restrooms in their assigned rooms, there are private restrooms and showers that can be accessed off the hallway of each wing. There is a laundry room, program room and public visitation area. Male residents are escorted by staff to the public visitation and program areas. These areas can be accessed without entering the female living areas. The female residents have access to a cemented outside area enclosed by high fencing and video monitoring surveillance monitored by staff. The facility has a total of twenty-five single resident rooms and twelve multiple occupancy resident rooms.

The facility uses the Dex system for security checks. There are RFID tags throughout the facility the staff person is required to scan as they complete facility checks.

Meals are not prepared at the facility. The kitchen is locked except when meals are delivered which is supervised by a staff member. The staff work area contains the video monitoring equipment that provides video feed from all internal and external cameras. Internal cameras are strategically placed on all floors of the facility to include hallways, stairwells, dining area, laundry room, and other common areas. External cameras are placed around the building, outdoor exercise area for female residents, and the parking lot adjacent to the building which is monitored by staff in the main work station.

Program Planning — within fourteen days of a resident's arrival at the Roseville VOA RRC, the Program Assessment Coordinator and Case Manager meet with the resident and complete their initial program or Offender Reentry Plan. Based on resident interviews, risk and needs assessment and other tools, a programming plan is developed. The VOA RRC follows evidence-based programming that includes Thinking for a Change, New Leaf program for employment services, and Lutheran Social Service's Financial Planning. The resident and Case Manger sign the initial plan and all plan reviews. The plan focuses on the resident's successful completion of the VOA RRC program and successful transition to the community.

Summary of Audit Findings

During the past twelve months, the Roseville VOA RRC reported one substantiated allegation of sexual harassment reported by a resident against a staff member, one substantiated allegation of sexual abuse reported by a resident against another resident, and one unsubstantiated allegation of sexual abuse reported by a resident against a staff member.

Therefore, there were three administrative and zero criminal investigations related to sexual abuse or harassment conducted. One staff member was separated from employment with the Roseville VOA RRC and one resident was returned to Federal custody.

Interviews with residents indicated that they have received training, were aware and understood the agency's zero tolerance policy. Approximately two weeks prior to their transfer from prison to the Roseville VOA RRC, offenders were given information about the facility including the resident handbook that contains detailed information about the agency's zero tolerance policy, multiple ways to report sexual abuse and sexual harassment. Upon admission, the case manager individually meets with a resident which includes a review of PREA and a copy of the resident handbook is provided. Each week, the facility provides additional PREA training that includes a video and a PREA question and answer with a staff member. Residents interviewed explained to the auditor what they would do and how they would report incidents of sexual abuse or harassment. Residents stated they felt safe at the facility and believed that staff would respond to any report of sexual abuse or harassment.

Interviews with staff indicated they had received initial and ongoing PREA training. Staff were knowledgeable about their responsibilities in the prevention, reporting, and responding to sexual abuse and sexual harassment. Staff interviewed were able to explain the different ways residents and staff could report sexual abuse or sexual harassment. Staff interviewed were able to explain steps they would follow if they were the first to respond to an incident.

After review of documentation and staff and resident interviews, this auditor found that the facility leadership is vested in a culture of zero tolerance for sexual abuse and sexual harassment. Since implementing PREA, the facility has added a new camera system, watch tour system, additional cameras, and a staff training program.

The Roseville VOA RRC was found to be out of compliance with one standard 115.234 — Specialized Training Investigations. The facility completed the corrective action requested within the forty-five days prior to the due date of the initial audit report.

Number of Standards Exceeded: 0

0

Number of Standards Met: 41

115.211 – 115.403

Number of Standards Not Met: 0

0

Summary of Corrective Action (if any)

During the on-site audit, the facility was found to be out of compliance with one standard 115.234 – Specialized Training Investigations. The facility completed the corrective action requested within the forty-five days prior to the due date of the initial audit report. On June 27, 2018, the facility provided a certificate of completion of training from the National Institute of Corrections.

PREVENTION PLANNING

Standard 115.211: Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

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

115.211 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.211 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?
 Yes 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*)

A. The Roseville Volunteers of America Residential Reentry Center (VOA RRC) has implemented a zero tolerance policy as detailed in the facility Prison Rape Elimination Act (PREA) policy which comprehensively addresses the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. The policy contains essential definitions, sanctions, and descriptions of the agency's strategies and responses to sexual abuse and sexual harassment.

B. The Roseville VOA RRC has a designated PREA Coordinator, Ashley Sykora. Her official title is Sr. Program Manager and PREA Coordinator. The PREA Coordinator reports directly to the Director. The PREA Coordinator reported having sufficient time and authority to develop, implement, and oversee the agency's efforts toward PREA compliance.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC PREA Policy #8:6
- VOA RRC organizational chart
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC Standards of Conduct Policy (#3:1) - #10 under procedures
- VOA RRC Standards of Conduct Policy (#3.1) – Staff Integrity and Code of Conduct

Standard 115.212: Contracting with other entities for the confinement of residents

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

115.212 (a)

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

115.212 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of residents OR the response to 115.212(a)-1 is "NO".) Yes No NA

115.212 (c)

- If the agency has entered into a contract with an entity that fails to comply with the PREA standards, did the agency do so only in emergency circumstances after making all reasonable attempts to find a PREA compliant private agency or other entity to confine residents? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.) Yes No NA
- In such a case, does the agency document its unsuccessful attempts to find an entity in compliance with the standards? (N/A if the agency has not entered into a contract with an entity that fails to comply with the PREA standards.) 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*)

A-C: The Roseville VOA RRC does not contract with external agencies to house any of their residents. The Roseville VOA RRC has written contracts with the Bureau of Prisons (BOP) and the Minnesota Department of Corrections (DOC) which require the Minneapolis VOA RRC be PREA compliant.

This standard is therefore not applicable.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interview with Ashley Sykora (Sr. Case Manager)
- Review of BOP and DOC contracts

Standard 115.213: Supervision and monitoring

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

115.213 (a)

- Does the agency develop for each facility a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?
 Yes No
- Does the agency document for each facility a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?
 Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the physical layout of each facility in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the resident population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.213 (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.)
 Yes No NA

115.213 (c)

- In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to prevailing staffing patterns? Yes No
- In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility assessed, determined, and documented whether adjustments are needed to the resources the facility has available to commit to ensure adequate staffing levels? Yes 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*)

A. The Roseville VOA RRC follows a staffing plan that has been established by the Federal Bureau of Prisons and the Minnesota Department of Corrections 2920 rules governing Adult Community-Based Residential Correctional Facilities. The formalized plan takes into account the four considerations of this standard.

B. The Roseville VOA RRC has not deviated from the staffing plan. Voluntary or mandatory overtime would be used to maintain minimum staffing requirements. The staffing plan requires at least one male and one female shift staff member on-duty twenty-four/seven. The Roseville VOA RRC reports zero deviations from the staffing plan. The VOA RRC is required to notify the Federal Bureau of Prisons and the Minnesota Department of Corrections if staffing mandates are not met.

C. The Roseville VOA RRC which includes the PREA Coordinator reviews the staffing plan annually to determine whether any adjustments are needed to the staffing plan.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Federal Bureau of Prisons Statement of Work
- Minnesota Department of Corrections 2920 rules
- Interview with Ashley Sykora (PREA Coordinator)
- Interview with Amy Freund (Director designee)

Standard 115.215: Limits to cross-gender viewing and searches

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

115.215 (a)

- 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

115.215 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female residents, except in exigent circumstances? (N/A if less than 50 residents)
Yes No NA
- Does the facility always refrain from restricting female residents' access to regularly available programming or other outside opportunities in order to comply with this provision? (N/A if less than 50 residents) Yes No NA

115.215 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female residents?
 Yes No

115.215 (d)

- Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? Yes No

115.215 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex residents for the sole purpose of determining the resident's genital status? Yes No
- If a resident's genital status is unknown, does the facility determine genital status during conversations with the resident, by reviewing medical records, or, if necessary, by learning that

information as part of a broader medical examination conducted in private by a medical practitioner?
 Yes No

115.215 (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? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex residents in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes 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*)

- A.** Roseville VOA RRC PREA Policy #8:6 prohibits employees from conducting cross-gender strip searches or visual body cavity searches. Roseville VOA RRC staff do not conduct any type of strip or visual body cavity searches. The facility reports that there have been zero cross-gender or visual body cavity searches of male or female residents conducted in the last twelve months.
- B.** The Roseville VOA RRC houses male and female resident. General practice is female staff pat search female residents and male staff pat search male residents. Interviews with randomly selected inmates, verified the facility's pat search policy.
- C.** Male staff do not pat search female residents. If a female shift staff person is required to pat search a male resident. The pat search would be recorded and documented.
- D.** The Roseville VOA RRC's PREA policy #8:6 ensures residents are able to shower, perform bodily functions, and change clothing in privacy. The policy and facility practice requires staff of the opposite gender to announce their presence when entering a resident's room. The facility has private restrooms and shower areas on all three floors. Interviews with facility staff, residents, and direct observation confirm this as the policy and practice at the facility. Residents report that shift staff do not enter an occupied restroom. During headcounts and security checks shift staff knock on the restroom door and the resident must respond by giving their name.
- E.** The Roseville VOA RRC PREA policy #8:6 prohibits staff from searching or physically examining a transgender or intersex resident for the sole purpose of determining the resident's genital status. Prior to placement at the Roseville VOA RRC the Case Manager completes a pre-qualification to ensure that a resident is an appropriate fit for the Roseville VOA RRC. There were zero transgender or intersex residents being housed at the facility during the on-site audit.

F. The Roseville VOA RRC provides training through the Field Training program to conduct pat searches of residents in a professional and respectful manner. The training module provides step-by-step instructions for conducting professional and respectful pat searches and requires the trainee to demonstrate proper pat search procedures to the Field Training Officer (FTO).

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC PREA policy #8:6
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Pat search training module
- Training documentation
- Interviews with random facility staff and residents

Standard 115.216: Residents with disabilities and residents who are limited English proficient

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

115.216 (a)

- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Residents who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that residents with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other? (if "other," please explain in overall determination notes.) Yes No

- Do such steps include, when necessary, ensuring effective communication with residents who are deaf or hard of hearing? Yes 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? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Are blind or have low vision? Yes No

115.216 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.216 (c)

- Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.264, or the investigation of the resident's allegations? Yes 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*)

A-C: The facility design of the Roseville VOA RRC limits the ability to house residents with physical disabilities. Initial reentry programming begins with the Senior Case Manager's (SCM) review and

assessment of the referral information received from the Bureau of Prisons (BOP). In some cases this review allows the SCM, working with the Case Managers (CM) and/or the Social Service Coordinator (SSC) to coordinate and schedule needed services/activities in advance of the resident's arrival. It would present a difficulty for the facility to provide all the required programming available to residents with limited English proficiency. If there was a situation where an interpreter would be required for a resident the SCM would make arrangements for an interpreter prior to the resident's arrival.

During the date of the on-site audit, there were zero residents with disabilities or who were limited English proficient residing at the Roseville VOA RRC.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Offender Reentry Plan
- Interviews with randomly selected residents
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator)
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC

Standard 115.217: Hiring and promotion decisions

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

115.217 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.217 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with residents? Yes No

115.217 (c)

- Before hiring new employees, who may have contact with residents, does the agency: Perform a criminal background records check? Yes No
- Before hiring new employees, who may have contact with residents, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.217 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents? Yes No

115.217 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees? Yes No

115.217 (f)

- Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with residents directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.217 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.217 (h)

- Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) Yes 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*)

- A.** Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6 prohibits the hiring or promotion of anyone who may have contact with residents, and will not enlist the services of any contractor or volunteer who may have contact with residents that has the prohibited conduct specified in (a) of this standard.
- B.** Roseville VOA RRC will consider any incidents of sexual harassment in determining whether to hire, promote, or enlist the services of any contractor who may have contact with residents as stated in PREA Policy #8.6.
- C.** The Bureau of Prisons (BOP) Statement of Work – chapter 2 (Personnel) requires that applicants of the Roseville RRC sign a “Release for Contract Background Investigation” and a fingerprint card which is submitted to the Residential Reentry Manager (RRM) with the BOP. The background check will include a National Crime Information Center/National Law Enforcement Telecommunications System (NCIC/NLETS), fingerprint, criminal records, and other appropriate background checks will be processed by the BOP to verify information.
- D.** The BOP Statement of Work – chapter 2 (Personnel) requires that any contractor must sign a “Request for Contract Staff Back Investigation” and a fingerprint card which is submitted to the RRM with the BOP. The background check will include a National Crime Information Center/National Law Enforcement Telecommunications System (NCIC/NLETS), fingerprint, criminal records, and other appropriate background checks will be processed by the BOP to verify information.
- E.** Roseville VOA RRC Prison Rape Elimination Act (PREA) policy #8:6 requires a background records check at least every five years for all current employees, volunteers and contractors who may have contact with residents.
BOP Statement of Work – chapter 2 (Personnel) requires criminal background checks are completed on all employees of incumbent contractors sixty days prior to the start of a new contract. The contract term between the BOP and the Roseville VOA RRC is five years. The Minnesota Department of Corrections (DOC) Rule 2920.4000 also mandates criminal background checks on all employees of the RRC.
- F.** Roseville VOA RRC PREA policy #8.6 requires all applicants to disclose any misconduct described in “a” of this standard through written applications or interviews for hiring or promotions, or during written evaluations.

G. Roseville VOA RRC PREA policy #8.6 – General #14 and Minneapolis VOA RRC Standards of Conduct Policy #3.1 – Standards of Conduct #14 both state that material omissions regarding misconduct or the provision of materially false information, are grounds for termination. The BOP Statement of Work – chapter 2 (Personnel) require the RRC has a policy that employees will report to the RRC if they have been charged with a misdemeanor, gross misdemeanor, or felony.

H. Roseville VOA RRC PREA policy #8:6 states the RRC will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an employer for whom such employee has applied to work, unless prohibited by law.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC PREA policy #8:6
- VOA RRC Standards of Conduct policy #3.1
- VOA RRC Personnel Policy #3.2
- The Bureau of Prisons (BOP) Statement of Work
- Minnesota Department of Corrections 2920.4000 rule
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.218: Upgrades to facilities and technologies

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

115.218 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect residents from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.218 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency’s ability to protect residents from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes 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*)

The Roseville VOA RRC has added additional internal and external cameras to enhance the RRC's ability to enhance their ability to protect residents from sexual abuse and sexual harassment. The RRC has internal and external cameras located in hallways, dining rooms, resident laundry area, stairs, hallways, female outdoor recreation area, and external entrances. The cameras are monitored twenty-four/seven by the control center. The video monitoring system was fully operational and malfunctioning components will be replaced. Review of the camera system confirmed there was no interference with the residents' privacy to shower, use of the restroom, and clothing changes.

Roseville VOA RRC Prison Rape Elimination Act (PREA) policy #8.6 – General #16 states the RRC will consider their ability to protect residents from sexual abuse during planned expansions, modifications, or video equipment updates to the facility.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC PREA policy #8:6
- Video monitoring system at the facility
- Interview with Amy Freund (Sr. Case Manager)
- Interview with Ashley Sykora (PREA Coordinator)

RESPONSIVE PLANNING

Standard 115.221: Evidence protocol and forensic medical examinations

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

115.221 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.221 (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.) Yes No 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.) Yes No NA

115.221 (c)

- Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes 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)? Yes No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.221 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes 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? Yes No
- Has the agency documented its efforts to secure services from rape crisis centers?
 Yes No

115.221 (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? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.221 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.221 (g)

- Auditor is not required to audit this provision.

115.221 (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? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.221(d) above.) 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*)

A-B: The Roseville VOA RRC refers all criminal investigations to the Roseville Police Department (MPD). The Roseville Police Chief verified his Department would be responsible for criminal investigations at the Roseville VOA RRC. Investigators who have specialized training in sexual abuse crimes who work closely with local hospitals would conduct the criminal investigation. Administrative investigations are conducted by the RRC.

C: The RRC will transport any resident victim of sexual abuse to Regions Hospital to access a forensic medical examination free of charge. Regions Hospital has a twenty-four-hour SANE program and will provide a Sexual Assault Nurse Examiner (SANE) to conduct a specialized examination.

D-E: The RRC does not have a Memorandum of Understanding (MOU) with a rape crisis center; the RRC has posted contact information for Ramsey County Sexual Violence Services. The Sexual Violence Center’s policy and outline of services verifies they would provide a victim advocate upon request. As requested by the resident victim, the Sexual Violence Center would accompany and support the resident victim through the forensic medical exam, investigatory interviews. The Sexual Violence Center upon request will provide a resident victim emotional support, crisis intervention, information, and referrals.

F: Roseville VOA RRC Prison Rape Elimination Act (PREA) policy #8:6 – Medical and Mental Care #8; #9 request that the Roseville Police Department follow evidence protocol in “b” of this standard.

The facility reports during the past twelve months there have been zero forensic medical examinations conducted.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC PREA policy #8:6
- Regions Hospital website: <https://www.healthpartners.com/hospitals/regions/>
- Regions Hospital Sexual Assault information page website: <https://www.healthpartners.com/hospitals/regions/specialties/emergency-center/sexual-assault-care/>
- Interviews with randomly selected staff
- Interview with Ashley Sykora (PREA Coordinator)
- Ramsey County Sexual Violence Services website: <https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services>

- Roseville Police Department website:
https://www.roseville.ca.us/government/departments/police_department

Standard 115.222: Policies to ensure referrals of allegations for investigations

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

115.222 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.222 (b)

- 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? Yes No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.222 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for conducting criminal investigations. See 115.221(a).]
 Yes No NA

115.222 (d)

- Auditor is not required to audit this provision.

115.222 (e)

- Auditor is not required to audit this provision.

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*)

A. Roseville VOA RRC Prison Rape Elimination Act (PREA) policy #8:6 – Investigations #1 ensures that all allegations of sexual abuse and sexual harassment will be investigated. Criminal investigations will be conducted by the Roseville Police Department. The RRC will conduct administrative investigations.

B-C: Roseville VOA RRC PREA policy #8.6 – Investigations #1 ensures that all criminal investigations will be referred to the Roseville Police Department who has legal authority to conduct criminal investigations. The RRC posts the information in the public lobby of their building describing the responsibilities of the RRC and the investigating agency when conducting criminal investigations.

The RRC has reported one allegation of sexual abuse and sexual harassment has been reported in the past twelve months.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC PREA policy #8:6
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator)
- Review of posting

TRAINING AND EDUCATION

Standard 115.231: Employee training

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

115.231 (a)

- Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No

- Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with residents on: The common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents? Yes No
- Does the agency train all employees who may have contact with residents on: How to communicate effectively and professionally with residents, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming residents? Yes No
- Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.231 (b)

- Is such training tailored to the gender of the residents at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa? Yes No

115.231 (c)

- Have all current employees who may have contact with residents received such training? Yes 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? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? Yes No

115.231 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? 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*)

A-B. Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6 – Training and Education requires all employees during orientation and every two years thereafter refresher training on the ten topics outlined in “a” of this standard. The RRC utilizes the Relias Learning System for staff training which includes training on PREA throughout the year. The Roseville VOA RRC houses males and females. As a rule, the same staff are scheduled at the Minneapolis VOA RRC or the Roseville VOA RRC, however all staff are crossed trained to work at both facilities.

C. The facility reports that all twenty-nine staff have been trained on PREA. The RRC documents through electronic signature stating they have received and understand the PREA training they have received.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- VOA RRC PREA Policy #8:6
- Relias Learning Training Plan
- Review of random staff training records
- Interviews with random staff regarding their PREA training and education

Standard 115.232: Volunteer and contractor training

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

115.232 (a)

- Has the agency ensured that all volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures? Yes No

115.232 (b)

- Have all volunteers and contractors who have contact with residents been notified of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)? Yes No

115.232 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? 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*)

A. Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. B requires all volunteers and contractors who have contact with residents will be trained on VOA RRC's PREA policy.

B. The VOA RRC reported having one volunteer that comes into the facility. Conversation during the on-site audit regarding the purpose for the volunteer meeting with residents revealed this individual was a professional visitor. Although classified as a professional visitor according to the PREA standards, this individual did receive training on the agency's PREA policy.

C. Documentation that the professional visitor received and understood the training was provided.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy #8.6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Contractor/volunteer training curriculum
- Contractor/volunteer training documentation
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.233: Resident education

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

115.233 (a)

- During intake, do residents receive information explaining: The agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do residents receive information explaining: How to report incidents or suspicions of sexual abuse or sexual harassment? Yes No
- During intake, do residents receive information explaining: Their rights to be free from sexual abuse and sexual harassment? Yes No
- During intake, do residents receive information explaining: Their rights to be free from retaliation for reporting such incidents? Yes No
- During intake, do residents receive information regarding agency policies and procedures for responding to such incidents? Yes No

115.233 (b)

- Does the agency provide refresher information whenever a resident is transferred to a different facility? Yes No

115.233 (c)

- Does the agency provide resident education in formats accessible to all residents, including those who: Are limited English proficient? Yes No
- Does the agency provide resident education in formats accessible to all residents, including those who: Are deaf? Yes No
- Does the agency provide resident education in formats accessible to all residents, including those who: Are visually impaired? Yes No
- Does the agency provide resident education in formats accessible to all residents, including those who: Are otherwise disabled? Yes No
- Does the agency provide resident education in formats accessible to all residents, including those who: Have limited reading skills? Yes No

115.233 (d)

- Does the agency maintain documentation of resident participation in these education sessions? Yes No

115.233 (e)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats? Yes 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*)

A. The Roseville VOA RRC reports that one hundred fifty-six residents have been admitted in the past twelve months and one hundred fifty-six residents' length of stay was for thirty days or more. The VOA RRC prescreens all applicants prior to approving acceptance as a resident. It would be difficult for the VOA RRC to provide all required programming to residents with limited English proficiency. Upon admission, generally within twenty-four hours, into the VOA RRC, residents meet with their assigned case manager who explains the agency's zero tolerance policy and provides the resident with documentation and handbook that includes detailed information about the agency's zero-tolerance policy on sexual abuse and harassment, information on self-protection and prevention techniques, treatment, and how to report sexual abuse or sexual harassment. Staff and residents interviewed indicate that the intake education is provided upon admission.

B. The Roseville VOA RRC provides comprehensive education to residents within thirty days of admission. Comprehensive training is conducted weekly which was verified during interviews with staff and residents. Residents reported that they received comprehensive training within seventy-two hours.

C. Resident training consists of a video which has subtitles for the hearing impaired, question and answer, and the resident handbook. The VOA RRC prescreens all applicants prior to approving acceptance as a resident. It would be difficult for the facility to provide all required programming to residents with limited English proficiency. The age and structure of the building makes it prohibitive to accept residents with physical disabilities. Volunteers of America would consider other VOA facilities for applicants with physical disabilities.

D. The agency requires staff and resident signatures on training acknowledgment forms.

E. The Roseville VOA RRC ensures key information about PREA is continuously and readily available or visible to residents through posters which are posted throughout the facility on each floor and the resident handbook.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Resident handbook
- Resident signed acknowledgment forms
- Resident training information
- Resident handbook and PREA posters displayed for residents in the facility
- Interview with random staff and residents
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.234: Specialized training: Investigations

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

115.234 (a)

- In addition to the general training provided to all employees pursuant to §115.231, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).] Yes No NA

115.234 (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 115.221(a).] Yes No 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 115.221(a).] Yes No 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 115.221(a).] Yes No 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 115.221(a).] Yes No NA

115.234 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.221(a).] Yes No NA

115.234 (d)

- Auditor is not required to audit this provision.

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*)

A. The Roseville VOA RRC Prison Rape Elimination Act Policy #8:6. B.8 requires specialized training for investigators who conduct sexual abuse investigations in a confinement setting. The Roseville Police Department would conduct any criminal investigations and the RRC conducts any administrative investigations.

B. During the on-site audit it was found that the investigator selected to conduct administrative investigations read through the four-day training curriculum that covers the specialized training required in this standard but had not been certified.

C. The investigator assigned to conduct administrative PREA investigations did not have the documentation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with investigator
- Review of investigator training curriculum

- Roseville Police Department website:
https://www.roseville.ca.us/government/departments/police_department

Corrective Action Required:

1. The staff member assigned to complete administrative investigations must complete and provide documentation that specialized training for PREA investigations has been completed.

Verification of Corrective Action since the Audit:

The auditor was provided a certificate of completion on June 27, 2018, the investigator who completed the National Institute of Corrections Investigative training for conducting PREA investigations in a confinement setting.

Standard 115.235: Specialized training: Medical and mental health care

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

115.235 (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? Yes No
- 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? Yes No
- 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? Yes No
- 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? Yes No

115.235 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? N/A if agency medical staff at the facility do not conduct forensic exams.) Yes No NA

115.235 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? Yes No

115.235 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.231? Yes No

- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.232? [N/A for circumstances in which a particular status (employee or contractor/volunteer) does not apply.]
 Yes No NA

Auditor Overall Compliance Determination

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

A. The Roseville VOA RRC does not employ or contract with medical or mental health practitioners to see residents in the facility. Residents would be taken to Regions Hospital for emergency treatment. Follow-up appointments with community medical and mental health providers would be scheduled for residents who have a continuing need for treatment.

B. This standard is not applicable for the Roseville VOA RRC

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator)
- Regions Hospital website: <https://www.healthpartners.com/hospitals/regions/>
- Regions Hospital Sexual Assault information page website: <https://www.healthpartners.com/hospitals/regions/specialties/emergency-center/sexual-assault-care/>

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.241: Screening for risk of victimization and abusiveness

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

115.241 (a)

- Are all residents assessed during an intake screening for their risk of being sexually abused by other residents or sexually abusive toward other residents? Yes No
- Are all residents assessed upon transfer to another facility for their risk of being sexually abused by other residents or sexually abusive toward other residents? Yes No

115.241 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.241 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.241 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The age of the resident? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The physical build of the resident? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously been incarcerated?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident's criminal history is exclusively nonviolent?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the resident about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the resident is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: Whether the resident has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess residents for risk of sexual victimization: The resident's own perception of vulnerability? Yes No

115.241 (e)

- In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? Yes No
- In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? Yes No

- In assessing residents for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse?
 Yes No

115.241 (f)

- Within a set time period not more than 30 days from the resident's arrival at the facility, does the facility reassess the resident's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.241 (g)

- Does the facility reassess a resident's risk level when warranted due to a: Referral?
 Yes No
- Does the facility reassess a resident's risk level when warranted due to a: Request?
 Yes No
- Does the facility reassess a resident's risk level when warranted due to a: Incident of sexual abuse? Yes No
- Does the facility reassess a resident's risk level when warranted due to a: Receipt of additional information that bears on the resident's risk of sexual victimization or abusiveness?
 Yes No

115.241 (h)

- Is it the case that residents are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section? Yes No

115.241 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents? Yes 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*)

- A.** The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6. D states all residents will be screened for risk within seventy-two hours of arriving at the facility. Staff and resident interviews confirmed that the normal practice for completing a risk screening is completed when the resident arrives at the facility.
- C.** The Roseville VOA RRC reports that one hundred fifty-six residents have been admitted in the past twelve months and one hundred fifty-six residents' length of stay was over seventy-two hours. One hundred fifty-six residents were screened for risk of sexual victimization or risk of being sexually abusive within twenty-four hours of arrival.
- D.** The Roseville VOA RRC uses a comprehensive assessment tool for screening for risk of victimization and abusiveness. The VOA RRC has adapted the screening for risk of victimization and abusiveness used by the Federal Bureau of Prisons.
- E.** The Roseville VOA RRC's screening for risk of victimization and abusiveness reflects all aspects of this standard including younger or elderly resident, small physical stature, and any developmental mental or medical disabilities.
- F.** The Roseville VOA RRC's screening does take into consideration prior acts of sexual abuse adult or child victims, history of prior sexual victimization while incarcerated, and prior crimes of violence.
- G.** The Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6. D requires a resident to be reassessed no later than fifteen days from the resident's arrival. Interviews with staff verified residents are reassessed within fifteen days of arrival.
- H.** The Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6. D requires a resident to be reassessed due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on a resident's risk of being sexually abused or abusive. Interview with staff confirmed a resident would be reassessed if the facility received additional information that bears on the safety of a resident.
- I.** The Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6. D states that residents will not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening. Staff interviews verified that residents have not and will not be disciplined.
- J.** The Roseville VOA RRC Maintaining and Terminating Case Records Policy #6-1-1 provides step by step procedures for maintaining all information in each resident's case file. The case file is marked confidential and review is limited to assigned case managers and Senior Case Managers.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6
- VOA RRC Maintaining and Terminating Case Records Policy #6-1-1
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interviews with staff and random residents
- Review of completed assessments
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.242: Use of screening information

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

115.242 (a)

- Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.241, with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.242 (b)

- Does the agency make individualized determinations about how to ensure the safety of each resident? Yes No

115.242 (c)

- When deciding whether to assign a transgender or intersex resident to a facility for male or female residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns residents to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No
- When making housing or other program assignments for transgender or intersex residents, does the agency consider on a case-by-case basis whether a placement would ensure the resident's health and safety, and whether a placement would present management or security problems? Yes No

115.242 (d)

- Are each transgender or intersex resident's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.242 (e)

- Are transgender and intersex residents given the opportunity to shower separately from other residents? Yes No

115.242 (f)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: lesbian, gay, and bisexual residents in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: transgender residents in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex residents, does the agency always refrain from placing: intersex residents in dedicated facilities, units, or wings solely on the basis of such identification or status? 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*)

A. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. D outlines the information that will be used for classification and housing of residents. All information gathered by means of the risk assessment are to be used to ensure appropriate housing of residents. Interviews with the PREA Coordinator and staff confirmed that the safety and security of all residents is the number one priority.

B. The agency makes individualized determinations on room assignments with the number one goal being the safety and security of each resident. Interviews with staff verified that each resident is assessed on an individual basis to determine the best housing assignment for each resident.

C. The Roseville VOA RRC will consider on a case-by-case basis the best placement of a transgender or intersex resident's housing and programming needs. The interview with the PREA Coordinator confirmed that each placement of a transgender or intersex resident would be on a case-by-case basis with consideration to management and security concerns. At the time of the on-site PREA audit, there were zero transgender or intersex residents in custody.

D. The Roseville VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6. D gives serious consideration to a resident's own views with respect of their safety. Interviews with the PREA Coordinator and staff verified this practice. At the time of the on-site PREA audit, there were zero transgender or intersex residents in custody.

E. All the showers in the facility are private, allowing the residents to take separate showers.

F. The Roseville VOA RRC is not under a consent decree, legal settlement, or legal judgement to place lesbian, gay, bisexual, transgender, or intersex residents in a dedicated housing area. At the time of the on-site PREA audit, there were zero transgender or intersex residents in custody.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interviews with staff
- Interview with Ashley Sykora (PREA Coordinator)

REPORTING

Standard 115.251: Resident reporting

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

115.251 (a)

- Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for residents to privately report: Retaliation by other residents or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.251 (b)

- Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials? Yes No

- Does that private entity or office allow the resident to remain anonymous upon request?
 Yes No

115.251 (c)

- Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Do staff members promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.251 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents? 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*)

A. The Roseville VOA RRC provides residents multiple internal ways to report sexual abuse and sexual harassment, retaliation, and staff neglect. Residents receive education on how to make reports upon arrival, weekly comprehensive training offered weekly, resident handbook, and postings on each floor in all common areas. Reporting methods include request forms, grievance forms, verbal reports, anonymously, and third-party.

B. The Roseville VOA RRC has posters that contain a toll free number to the Federal Bureau of Prisons for all residents to report sexual abuse or harassment to an entity that is not part of the Roseville VOA RRC. The Federal Bureau of Prisons does forward a report to the VOA RRC and allows for the reporting party to remain anonymous.

C. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6 mandates staff to accept all reports of sexual abuse including anonymous and third-party reports.

D. The Roseville VOA RRC allows staff to privately report sexual abuse and harassment of residents to their supervisor any other facility Supervisor through written or verbal reports.

Residents being held for the Bureau of Prisons is permitted to own a cell phone which residents stated they would use if they needed to report sexual abuse or sexual harassment. For residents without cell phones, the facility has telephones located in a private area available for residents to use.

Interviews with random staff and residents demonstrated that all were knowledgeable about PREA and the different methods available to report sexual abuse or sexual harassment. Residents interviewed

would be comfortable reporting sexual abuse or harassment to facility staff. Residents interviewed knew that there were posters available throughout the facility with telephone numbers to call.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interviews with random staff and residents
- Interview with Ashley Sykora (PREA Coordinator)
- Posters

Standard 115.252: Exhaustion of administrative remedies

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

115.252 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

115.252 (b)

- Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring a resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.252 (c)

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

115.252 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the

90-day time period does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA

- If the agency determines that the 90-day timeframe is insufficient to make an appropriate decision and claims an extension of time [the maximum allowable extension of time to respond is 70 days per 115.252(d)(3)] , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) Yes No NA
- At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.252 (e)

- Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Are those third parties also permitted to file such requests on behalf of residents? (If a third-party files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA
- If the resident declines to have the request processed on his or her behalf, does the agency document the resident's decision? (N/A if agency is exempt from this standard.) Yes No NA

115.252 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) Yes No 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

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)
 Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No 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.) Yes No NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.252 (g)

- If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes 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*)

A. The Roseville VOA RRC reported that there have been zero grievances or emergency grievances filed alleging sexual abuse or sexual harassment in the past twelve months. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6.C outlines the grievance process and includes the requirements of this standard. The Roseville VOA RRC considers any grievance submitted that references sexual abuse or sexual harassment a priority and will take immediate action to protect the resident. The grievance process is outlined in the resident handbook.

B. The VOA RRC policy #8:6 provides for emergency grievances alleging a resident is subject to substantial risk of imminent sexual abuse. An initial response will be provided within forty-eight hours.

C. The VOA RRC policy #8:6 allows for third parties (residents, staff members, family members, attorneys, and advocates) to assist residents in filing requests related to allegations of sexual abuse and file such request on behalf of residents. If a third party files a request for administrative remedies on behalf of a resident, the alleged victim must agree to have the request filed on the victim's behalf and requires the alleged victim to agree to personally pursue any subsequent steps in the administrative remedy process.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Resident handbook

Standard 115.253: Resident access to outside confidential support services

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

115.253 (a)

- Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by giving residents mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible? Yes No

115.253 (b)

- Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.253 (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 residents with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? 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*)

A. The Roseville VOA RRC has phone numbers and addresses for residents to contact outside victim advocacy agencies posted throughout the facility in all common areas. Communication through the facility telephone between residents and advocacy agencies is confidential. Bureau of Prison

residents are able to purchase cell phones and keep on their person. Those residents interviewed that own cell phones stated they would make the phone calls from their cell phone. Residents interviewed stated the facility has land line telephones they can use and are given privacy to make calls.

B. The landline telephones provided allow residents privacy making telephone calls which residents are informed of.

C. The facility has attempted but not been successful in entering into an ongoing memorandum of understanding with any community service provider. The RRC does not have a Memorandum of Understanding (MOU) with a rape crisis center; the RRC has posted contact information for Ramsey County Sexual Violence Services. The Ramsey County Sexual Violence Services outline of services verifies they would provide a victim advocate upon request. As requested by the resident victim, and advocate from the Ramsey County Sexual Violence Center would accompany and support the resident victim through the forensic medical exam and investigatory interviews. Ramsey County Sexual Violence Services upon request will provide a resident victim emotional support, crisis intervention, information, and referrals. The residents housed in the VOA RRC use community services for all appointments and would have access free of charge to a provider of their choice.

D. Staff interviews verified that a telephone would be provided at any time when requested by a resident.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire provided by the Roseville VOA RRC
- Resident handbook
- Interview with random staff and residents
- Interview with Ashley Sykora (PREA Coordinator)
- Ramsey County Sexual Violence Services website: <https://www.ramseycounty.us/residents/health-medical/clinics-services/sos-sexual-violence-services>

Standard 115.254: Third-party reporting

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

115.254 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident? 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*)

A. The Roseville VOA RRC has victim advocate information and a hot line number for residents to call to accept third-party reports of sexual abuse or sexual harassment posted throughout the facility. Although not posted on the agency website, third party reporting information is available in the public lobby.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Posters

OFFICIAL RESPONSE FOLLOWING A RESIDENT REPORT

Standard 115.261: Staff and agency reporting duties

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

115.261 (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? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment? Yes 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? Yes No

115.261 (b)

- Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? Yes No

115.261 (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 residents of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.261 (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? Yes No

115.261 (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? 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*)

A. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6 outlines the procedure and expectations for staff who become aware of an incident of sexual abuse or sexual harassment to report immediately. Interviews with randomly selected staff confirmed receiving training and understand their obligation to report.

B. The Roseville VOA RRC PREA Policy #8.6 prohibits staff from revealing any information related to a sexual abuse report other than the extent necessary to make treatment, investigation, and other management decisions.

C. The Roseville VOA RRC does not have medical or mental health provider in the facility. All residents use community providers.

D. Resident's accepted at the VOA RRC are over the age of eighteen and have been pre-screened to be accepted into the program however staff has received training on their mandated reporting duties. This was verified through random staff interviews.

E. The Roseville VOA RRC PREA Policy #8:6 requires all staff to report all allegations of sexual abuse and sexual harassment. The PREA Coordinator conducts the administrative investigations and the Roseville Police Department will conduct criminal investigations.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC

- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator)
- Interviews with randomly selected staff
- Roseville Police Department website:
https://www.roseville.ca.us/government/departments/police_department

Standard 115.262: Agency protection duties

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

115.262 (a)

- When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident? Yes 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*)

A. The Roseville VOA RRC reports that there have been zero incidents in the past twelve months when the facility determined a resident was subject to a substantial risk of imminent sexual abuse. Interviews with the agency head designee, PREA Coordinator, and randomly selected staff demonstrated that the facility would take immediate action to protect the resident.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)
- Interviews with randomly selected staff

Standard 115.263: Reporting to other confinement facilities

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

115.263 (a)

- Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? Yes No

115.263 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.263 (c)

- Does the agency document that it has provided such notification? Yes No

115.263 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? 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.*)

A. The Roseville VOA RRC reports that there have been zero reports that a resident was abused at another facility and zero reports received from other facilities.

B. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6.C requires the Program Manager to report any abuse allegations received regarding a resident being abused at another facility notify the facility head where the sexual abuse is alleged to have occurred within seventy-two hours after receiving the allegation.

C. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6.C requires the notification to be documented.

D. The Roseville Prison Rape Elimination Act Policy (PREA) #8:6.F states that all reports of allegations of sexual abuse and sexual harassment will be investigated. Interviews with the designated Agency Head and the PREA Coordinator confirmed that any report of an alleged sexual abuse or sexual harassment received from another facility would be investigated the same as an allegation made in the Roseville VOA RRC.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act (PREA) Policy #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)

Standard 115.264: Staff first responder duties

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

115.264 (a)

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

115.264 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? Yes 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*)

A. The Roseville VOA RRC reports that in the past twelve months there has been zero reports that a resident was sexually abused. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6.C details the duties of the first responder. Interviews with randomly selected staff demonstrate understanding of their first responder duties to the alleged victim and their duties as it's related to the alleged abuser.

A security staff first responder is required to:

- Separate the alleged victim and abuser;
- Preserve and protect the crime scene;
- If appropriate, request alleged victim not destroy evidence (as detailed in this standard); and
- If appropriate, ensure the alleged abuser does not destroy evidence (as detailed in this standard.)

A non-security staff first responder is required to request the victim not destroy evidence (as detailed in this standard) and notify the Shift or Program Manager.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Randomly selected staff

Standard 115.265: Coordinated response

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

115.265 (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 taken in response to an incident of sexual abuse? 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*)

A. The Roseville VOA RRC has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse. The plan outlines the responsibilities among staff first responders, facility leadership, and investigators.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Coordinated response plan
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)

Standard 115.266: Preservation of ability to protect residents from contact with abusers

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

115.266 (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 residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.266 (b)

- Auditor is not required to audit this provision.

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*)

A. The staff employed at the Minneapolis VOA RRC do not belong to a collective bargaining unit. If an allegation of sexual abuse or harassment against a staff member is reported, the staff member is immediately placed on leave pending the outcome of the investigation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Personnel Policy – Standard of Conduct #3:1
- The Federal Bureau of Prisons Statement of Work
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)

Standard 115.267: Agency protection against retaliation

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

115.267 (a)

- Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.267 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.267 (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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff? Yes 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 residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff? Yes 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? Yes 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 resident disciplinary reports? Yes 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 resident housing changes? Yes 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 resident program changes? Yes 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 negative performance reviews of staff? Yes 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 reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.267 (d)

- In the case of residents, does such monitoring also include periodic status checks?
 Yes No

115.267 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 Yes No

115.267 (f)

- Auditor is not required to audit this provision.

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*)

A. The Roseville VOA RRC reports that in the last twelve months there has been zero incidents of retaliation reported, known, or suspected. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6.C states that residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or harassment investigations will be protected from retaliation by other residents or staff. The Senior Program Manager is responsible to monitor for retaliation. A resident's Case Manager will coordinate with the Senior Program Manager in monitoring for retaliation.

B. The facility would use protective measures such as room and floor changes. If the alleged abuser is being housed for the Federal Bureau of Prisons, the U.S. Marshall Service would remove the alleged abuser from the VOA RRC. If the alleged abuser is being housed for the Minnesota Department of Corrections, the MNDOC would remove the abuser from the VOA RRC. The VOA RRC would keep the victim safe and the alleged abuser separate until transport is arranged.

C. PREA Policy #8:6.C outlines the requirements for monitoring for retaliation (as detailed in this standard.)

D. The PREA Coordinator confirmed that the resident's Case Manager would meet with the resident at least weekly when monitoring a resident for retaliation.

E. The agency would protect all individuals from retaliation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator/Sr. Program Manager)
-

INVESTIGATIONS

Standard 115.271: Criminal and administrative agency investigations

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

115.271 (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 115.221(a).] Yes No 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 115.221(a).] Yes No NA

115.271 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.234? Yes No

115.271 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses? Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.271 (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? Yes No

115.271 (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 resident or staff? Yes No

- Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.271 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes 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? Yes No

115.271 (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? Yes No

115.271 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.271 (i)

- Does the agency retain all written reports referenced in 115.271(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.271 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.271 (k)

- Auditor is not required to audit this provision.

115.271 (l)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? [N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.221(a).] 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*)

A. The Roseville VOA RRC reported one substantiated allegation of sexual harassment reported by a resident against a staff member, one substantiated allegation of sexual abuse reported by a resident against another resident, and one unsubstantiated allegation of sexual abuse reported by a resident against a staff member. One staff member was separated from employment with the Roseville VOA RRC and one resident was returned to Federal custody. The Roseville VOA RRC conducts administrative investigations and criminal investigations are conducted by the Roseville Police Department. The VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. F governs the conduct of administrative investigations.

B. The PREA Coordinator conducts administrative investigations and provided a certificate of training for conducting sexual assault investigations in confinement. The Roseville Police Department will conduct all criminal investigations.

C. The Roseville VOA RRC PREA Policy #8.6. E requires an investigator to gather and preserve all evidence.

D. The Roseville Police Department would consult the Ramsey County Attorney's Office in any criminal investigations. The staff of the Roseville VOA RRC have been trained to secure the scene until the Roseville Police Department arrives at the facility. For administrative investigations, the PREA Coordinator has received specialized training and understands the protocols for sexual abuse investigations in confinement.

E. Decisions on how to proceed with the alleged sexual abuse case would be handled by investigators from the Roseville Police Department in reference to the assessed credibility of the alleged victim, suspect, or witness.

Minnesota State Statute 611.A.26 – Polygraph Examinations; Criminal Sexual Assault Complaints; Limitations:

Subdivision 1. **Polygraph prohibition.**

No law enforcement agency or prosecutor shall require that a complainant of a criminal sexual conduct or sex trafficking offense submit to a polygraph examination as part of or a condition to proceeding with the investigation, charging, or prosecution of such offense.

F. The Roseville VOA RRC Prison Rape Elimination Act (PREA) #8:6. F outlines the requirement of this standard. There were three administrative investigations conducted in the twelve months prior to the audit. Review of the administrative investigation's conducted, included all the information required by the PREA standards.

G. The Roseville Police Department will conduct criminal investigations according to their agency's policy and procedures.

H. Upon completion of a criminal investigation, the Roseville Police Department would make the referral to the Prosecuting Attorney's Office.

I. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. F states that the agency will retain all written reports in paragraphs (f) and (g) of this standard for as long as the alleged abuser is incarcerated or employed by the agency/ plus five years.

J. An investigation will not be terminated just because the alleged abuser or victim departs from employment or control of The Roseville VOA RRC which was verified during the interview with the PREA Coordinator/investigator.

L. The Roseville VOA RRC will cooperate with the Roseville Police Department and will maintain contact with the police department on the progress of the investigation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Training certificate for the administrative investigator
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator/Investigator)
- Roseville Police Department website:
https://www.roseville.ca.us/government/departments/police_department
- Review of administrative investigations

Standard 115.272: Evidentiary standard for administrative investigations

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

115.272 (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? 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*)

A. The Roseville VOA RRC reports 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.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator/Investigator)

Standard 115.273: Reporting to residents

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

115.273 (a)

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

115.273 (b)

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

115.273 (c)

- Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident's unit? Yes No
- Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? Yes No
- Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following a resident's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.273 (d)

- Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?
 Yes No
- Following a resident's allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?
 Yes No

115.273 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.273 (f)

- Auditor is not required to audit this provision.

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*)

A. The Roseville VOA RRC reported one substantiated allegation of sexual harassment reported by a resident against a staff member, one substantiated allegation of sexual abuse reported by a resident against another resident, and one unsubstantiated allegation of sexual abuse reported by a resident against a staff member. One staff member was separated from employment with the Roseville VOA RRC and one resident was returned to Federal custody.

The VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. F outlines the procedure for notifying residents in writing the final disposition of the investigation into the resident's allegation that he/she suffered sexual abuse in the facility which is consistent with this paragraph of this standard.

B. If a criminal investigation is completed by the Roseville Police Department, the PREA Coordinator would act as the liaison between the two agencies to receive the investigative updates from the investigator assigned the case. The PREA Coordinator will keep the Director and Case Manager updated. At the completion of the investigation, the PREA Coordinator would notify the resident in writing the final disposition of the investigation.

C. VOA RRC PREA Policy #8:6. F outlines the information that would be provided to the resident on the status of the accused staff member. (As detailed in this standard.)

D. VOA RRC PREA Policy #8.6. F outlines the information that would be provided to the resident on the status of the alleged abuser, if another resident is the accused. (As detailed in this standard.)

E. Review of the three administrative investigative files contained documentation the resident was notified.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator/Investigator)
- Interview with Amy Freund (designated Agency Head)

DISCIPLINE

Standard 115.276: Disciplinary sanctions for staff

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

115.276 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.276 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.276 (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 imposed for comparable offenses by other staff with similar histories? Yes No

115.276 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies unless the activity was clearly not criminal? Yes 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: Relevant licensing bodies? 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*)

A. The Roseville VOA RRC reports that in the past twelve months, there has been one staff member from the facility that has terminated violating agency sexual harassment policies. Additionally, in the past twelve months there has been zero staff that has been reported to law enforcement or licensing boards for violating agency policies. Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. G and the Standard of Conduct Policy #3:1 outlines the disciplinary sanctions up to and including termination for violating agency sexual abuse or harassment policies.

B. Termination is the presumptive disciplinary sanction for staff who engage in sexual abuse. The Roseville VOA RRC follows the Federal Bureau of Prisons Statement of Work which requires an accused staff member be placed on immediate leave until the final disposition of the investigation.

C. The Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6. G provides for progressive discipline of staff based on the violation, discipline history, and sanctions imposed by similar offenses by other staff with similar histories.

D. The Roseville Police Department is the investigating agency for any criminal investigations of sexual abuse reported at the Roseville VOA RRC.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- VOA RRC Standard of Conduct Policy #3:1
- Federal Bureau of Prisons Statement of Work
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator/Investigator)

Standard 115.277: Corrective action for contractors and volunteers

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

115.277 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies unless the activity was clearly not criminal? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.277 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents? Yes 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*)

A. The Roseville VOA RRC reports that in the twelve months prior to the audit, there were zero contractors or volunteers reported to law enforcement agencies or relevant licensing bodies engaging in sexual abuse of residents. The VOA RRC reports that they currently do not have any volunteers or contractors working in their facility.

B. The Roseville VOA RRC follows the Federal Bureau of Prisons Statement of Work which requires an accused volunteer or contractor be prohibited from entering the facility until the final disposition of the investigation.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Federal Bureau of Prisons Statement of Work
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Amy Freund (designated Agency Head)
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.278: Interventions and disciplinary sanctions for residents

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

115.278 (a)

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

115.278 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories? Yes No

115.278 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.278 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending resident to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.278 (e)

- Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.278 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.278 (g)

- Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)
 Yes 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*)

The Roseville VOA RRC reports that in the twelve months prior to the audit, there has been one administrative findings of resident-on-resident sexual abuse at the facility. Additionally, there has been zero criminal findings of guilt for resident-on-resident sexual abuse, in the past twelve months.

A. The Roseville VOA RRC has a formalized discipline plan applicable to residents which is followed as outlined in policy and resident handbook. The discipline implemented by the VOA RRC follows the outline provided in chapter thirteen of the Bureau of Prisons Statement of Work. The discipline plan calls for a discipline committee. All staff members who participate in the Center Discipline Committee (CDC) must demonstrate working knowledge and competency of the discipline procedures by receiving training passing the standardized test administered by the contracting

Officer's Representative (COR) on an annual basis. At least two staff members at the contracted facility location must meet this requirement.

- B.** Disciplinary decisions are based on the nature and circumstance of the violation presented to the CDC
- C.** Interviews with the PREA Coordinator confirmed that a resident's mental disability or mental illness will be considered when determining a disciplinary sanction.
- D.** The facility does not offer therapy, counseling, or other interventions designed to address and address underlying reasons or motivation for abuse. A resident would use a community practitioner for intervention if needed. The facility would not require the resident to participate in these interventions as a condition of access to programming or other benefits.
- E.** Policy prohibits discipline be imposed on a resident for sexual contact with staff unless there is a finding that the staff member did not consent to such contact.
- F.** The Roseville VOA RRC would not discipline a resident for making a report in good faith, even if an investigation does not establish evidence to substantiate the allegation.
- G.** The Roseville VOA RRC prohibits all sexual activity between residents. Residents engaging in consensual sexual activity are subject to administrative discipline.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Federal Bureau of Prisons Statement of Work
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator)
- Resident handbook

MEDICAL AND MENTAL CARE

Standard 115.282: Access to emergency medical and mental health services

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

115.282 (a)

- Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
 Yes No

115.282 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.262? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.282 (c)

- Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.282 (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*)

A. The Roseville VOA RRC reported zero allegations of sexual abuse in the twelve months prior to the on-site audit. VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6. E states that all resident victims of sexual abuse will receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

B. The Roseville VOA RRC does not have medical or mental health practitioners in the facility. Staff would provide emergency treatment to the resident(s) until emergency medical services (EMS) arrive to transport the resident victim to Hennepin County Medical Center.

C. The Roseville VOA RRC will offer a resident access to outside medical practitioners for information related to sexually transmitted infections prophylaxis.

D. Policy dictates that treatment services will be provided to resident victims of sexual abuse without charge.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- Roseville VOA RRC Prison Rape Elimination Act Policy (PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.283: Ongoing medical and mental health care for sexual abuse victims and abusers

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

115.283 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.283 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.283 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.283 (d)

- Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) Yes No NA

115.283 (e)

- If pregnancy results from the conduct described in paragraph § 115.283(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) Yes No NA

115.283 (f)

- Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.283 (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

115.283 (h)

- Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? Yes 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*)

A. The Roseville VOA RRC does not have medical or mental health practitioners on-site. Residents would be offered medical or mental health services from community medical and mental health practitioners.

B. Follow-up services, treatment plans, and referrals for continued care are provided to all residents which includes resident victims of sexual abuse.

C. The facility does not have medical or mental health practitioners on-site. All residents are referred to community medical and mental health practitioners.

D. Policy states that pregnancy tests would be provided to female victims. A referral for an appointment would be made with a community medical provider.

E. Policy states that victims will receive pertinent information about lawful pregnancy related medical services in a timely manner. A referral for an appointment would be made with a community medical provider.

F. Residents will be referred to outside medical practitioners for testing for sexually transmitted infections.

G. Policy dictates that treatment services will be provided to every resident victim of sexual abuse at no cost which was verified through an interview with the PREA Coordinator.

H. The Roseville VOA RRC will attempt to refer all known resident-on-resident abusers to a community based mental health practitioner to conduct a mental health examination and offer treatment when considered appropriate.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6
- Completed Pre-Audit Questionnaire submitted by the Roseville VOA RRC
- Information provided and interview with Ashley Sykora (PREA Coordinator)

DATA COLLECTION AND REVIEW

Standard 115.286: Sexual abuse incident reviews

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

115.286 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

115.286 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.286 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.286 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.286(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.286 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? 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*)

A. The Roseville VOA RRC reports one substantiated allegation of sexual abuse in the twelve months prior to the on-site audit. Policy states an incident review will be completed at the conclusion of every sexual abuse investigation, unless the allegation is unfounded. There was not a recommendation for any corrective action submitted by the incident review team.

B. Policy states that the review will be conducted within thirty days after the conclusion of every sexual abuse investigation.

C. The Roseville VOA RRC review team consists of the Program Manager, Sr. Case Manager, Case Manager, PREA Coordinator, and input from shift staff.

D. Interviews with the PREA Coordinator and Director designee verified there would be a sexual abuse incident review conducted on substantiated or unsubstantiated allegations of sexual abuse. All review considerations listed in this paragraph of this standard will be considered.

E. Facility leadership will review recommendations submitted by the incident review team for improvement. Facility leadership will determine if the recommendations will be implemented or document the reason for not doing so.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interview with Amy Freund (Director designee)
- Interview with Ashley Sykora (PREA Coordinator)

Standard 115.287: Data collection

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

115.287 (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? Yes No

115.287 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually?
 Yes No

115.287 (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? Yes No

115.287 (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?
 Yes No

115.287 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.) Yes No NA

115.287 (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.)
 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*)

A. The Roseville VOA RRC collects data for every allegation of sexual abuse or harassment.

B. The PREA Coordinator is reviewed annually by the PREA Coordinator.

C. The data collected by the PREA Coordinator includes the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice (DOJ). The facility is prepared to complete the survey if requested by the DOJ.

D. The PREA Coordinator collects, maintains, and reviews all incident-based documents.

E. Not applicable – the agency does not contract with other facilities for confinement of their residents.

F. Not applicable – the DOJ has not requested agency data.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy(PREA) #8:6
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interview with and information provided by Ashley Sykora (PREA Coordinator)

Standard 115.288: Data review for corrective action

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

115.288 (a)

- Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.287 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.288 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.288 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.288 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes 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*)

A. The Roseville VOA RRC reviews data collected and uses the data for ongoing improvement and corrective action at the facility.

B. The Roseville VOA RRC provides an annual report that includes a comparison between the current year's data and previous years' data and efforts to continue to address sexual abuse and harassment.

C. The Roseville VOA RRC does not post the annual report on a web-site but makes information available at the facility.

D. Redacted information is explained in the annual report.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Prison Rape Elimination Act Policy (PREA) 8:6
- Completed Pre-Audit Questionnaire submitted by Roseville VOA RRC
- Interview with Ashley Sykora (PREA Coordinator)
- Interview with Amy Freund (Director designee)

Standard 115.289: Data storage, publication, and destruction

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

115.289 (a)

- Does the agency ensure that data collected pursuant to § 115.287 are securely retained?
 Yes No

115.289 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.289 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.289 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.287 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes 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*)

A. The Roseville VOA RRC securely maintains documentation collected from standard 115.87. The facility follows agency policy, Minnesota Department of Corrections Rule 2920.4900, Minnesota Statute 609.344, and Federal laws related to data retention.

B. The facility's sexual abuse data is publicly available at the facility.

C. The agency redacts all personal identifies before making the information public.

D. Policy dictates that sexual abuse data is maintained for a minimum of ten years after the date of the initial collection.

Policy, Materials, Interviews, and Other Evidence Reviewed:

- VOA RRC Maintaining and Terminating Case Records Policy #6:1
- Bureau of Prisons Statement of Work Records and Reports #17
- Minnesota Department of Corrections Rule 2920.4900
- Interview with Ashley Sykora (PREA Coordinator)

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)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (*Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.*) Yes No

115.401 (b)

- Is this the first year of the current audit cycle? (*Note: a "no" response does not impact overall compliance with this standard.*) Yes No
- If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the

agency, was audited during the first year of the current audit cycle? (N/A if this is **not** the *second* year of the current audit cycle.) Yes No NA

- If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is **not** the *third* year of the current audit cycle.) Yes No NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with residents, residents, and detainees? Yes No

115.401 (n)

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

This is the Roseville VOA RRC's second Prison Rape Elimination Act (PREA) Audit. On April 12, 2016, the Roseville VOA RRC was found to be in full compliance with the Prison Rape Elimination Act (PREA) standards. The administration and staff were very accommodating. The PREA Coordinator supplied all documentation requested and provided full access to the facility. This auditor was able to meet privately with staff and residents without interference. PREA Audit posters in English and Spanish were posted six weeks prior to the audit and were hanging in all common areas on all floors of the facility with the auditor's name and address visible to all inmates.

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 within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. 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*)
- 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 Roseville VOA RRC does have a copy of their final Prison Rape Elimination Act (PREA) Audit report from April 12, 2016, posted on their web-site. The report was initially provided for public view at the facility within the initial ninety days and has since been posted on the web-site. https://voa-production.s3.amazonaws.com/uploads/pdf_file/file/1371/Minneapolis_2015.pdf

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.
- No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- I have not included in the final report any personally identifiable information (PII) about any resident or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Darnel Carlson

August 4, 2018

Auditor Signature

Date

¹ See additional instructions here: <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.