

Prison Rape Elimination Act (PREA) Audit Report Adult Prisons & Jails

Interim Final

Date of Report January 23, 2020

Auditor Information

Name: Cynthia Malm	Email: cmalm@idahosheriffs.org
Company Name: Idaho Sheriffs' Association	
Mailing Address: 3100 Vista Ave., Ste. 203	City, State, Zip: Boise, Idaho 83705
Telephone: 208-346-1065	Date of Facility Visit: July 29 – 31, 2019

Agency Information

Name of Agency: Boundary County Sheriff's Office		Governing Authority or Parent Agency (If Applicable): Boundary County	
Physical Address: 6438 Kootenai St.		City, State, Zip: Bonners Ferry, ID 83805	
Mailing Address: P.O. Box 127		City, State, Zip: Bonners Ferry, ID 83805	
Telephone: 208-267-3151		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 type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal

Agency mission: It is the mission of the Boundary County Sheriff's Office to reduce crime and the fear of crime in Boundary County through its duties and acts and to work with those in the community to enable those persons to do the same for themselves. This shall be done legally and fairly, operating with the law and within the Constitution. This protection shall extend to all, including those whom are our responsibility while incarcerated.

Agency Website with PREA Information: www.boundarysheriff.org

Agency Chief Executive Officer

Name: David Kramer	Title: Sheriff
Email: dkramer@boundarysheriff.org	Telephone: 208-267-3151

Agency-Wide PREA Coordinator

Name: Karl Green	Title: Detention Deputy/IPREA Coordinator
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Email: kgreen@boundarysheriff.org	Telephone: 208-267-3151
PREA Coordinator Reports to: Sgt. Jeffery Hoff	Number of Compliance Managers who report to the PREA Coordinator None

Facility Information

Name of Facility: Boundary County Detention Center			
Physical Address: 6438 Kootenai St., Bonners Ferry, ID 83805			
Mailing Address (if different than above): P.O. Box 127, Bonners Ferry, ID 83805			
Telephone Number: 208-267-3151			
The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Private not for profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input checked="" type="checkbox"/> Jail		<input type="checkbox"/> Prison

Facility Mission: The basic function of a county jail is to provide safe, secure and constitutional confinement for incarcerated persons. To accomplish these goals, it is necessary to have a well-qualified, highly trained staff of correctional officers and to provide them with the equipment necessary for their safety and the proper performance of their duties. A major goal of this department is to provide a work environment for our jail staff that meets the legal statutes, and standards as set forth by the Idaho Sheriffs' Association. In meeting these legal requirements and standards, it allows us to provide better treatment and care of the inmates. We have a responsibility to see that the inmates are allowed the same health care they would receive if they were not incarcerated. Also, we must provide a sanitary environment, nutritional meals, allow for legal, clergy and family visitations, telephone use, mail privileges, religious group meetings, AA meetings, and any other counseling requested. There are many other rights, which cannot be denied and privileges which we allow. Our major goal is to encourage our inmates to attend these group meetings and have clergy and family members meet with them. With our assistance and help from the outside, we hope that when they are released, they will think better of themselves and try to join society with a new, positive attitude. In conclusion, it is the major objective of the Boundary County Sheriff's Office to not only operate a safe and secure confinement facility, but also to provide a jail which helps the inmates better themselves while at the same time enabling the jail staff to serve in a less stressful working environment.

Facility Website with PREA Information: www.boundarysheriff.org

Warden/Superintendent

Name: Jeffery Hoff	Title: Jail Commander/Sgt.
Email: jhoff@boundarysheriff.org	Telephone: 208-267-3151

Facility PREA Compliance Manager

Name: None	Title: Click or tap here to enter text.
Email: Click or tap here to enter text.	Telephone: Click or tap here to enter text.

Facility Health Service Administrator

Name: Troy Geyman	Title: Doctor
Email: Click or tap here to enter text.	Telephone: 208-267-8710

Facility Characteristics

Designated Facility Capacity: 24	Current Population of Facility: 11	
Number of inmates admitted to facility during the past 12 months	368	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:	72	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:	257	
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:	0	
Age Range of Population:	Youthful Inmates Under 18: Click or tap here to enter text.	Adults: 18 to 84
Are youthful inmates housed separately from the adult population?	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> NA	
Number of youthful inmates housed at this facility during the past 12 months:	0	
Average length of stay or time under supervision:	N/A	
Facility security level/inmate custody levels:	Medium and Maximum	
Number of staff currently employed by the facility who may have contact with inmates:	8	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	5	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	1	

Physical Plant

Number of Buildings: 1	Number of Single Cell Housing Units: 1
Number of Multiple Occupancy Cell Housing Units:	2
Number of Open Bay/Dorm Housing Units:	2
Number of Segregation Cells (Administrative and Disciplinary):	2

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 facility has cameras inside the housing units and in the individual cells. Toilets and showers are free from camera view. Cameras are all around the building and can be monitored by the Booking Room, Dispatch, Sheriff, and the Sheriff's Administrative Assistant.

Medical

Type of Medical Facility:	In-House one day a week
Forensic sexual assault medical exams are conducted at:	Boundary Community Hospital

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	5
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	2

Audit Findings

Audit Narrative

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

The Prison Rape Elimination Act (IPREA) on-site audit of the Boundary County Detention Center in Bonners Ferry, Idaho was conducted on July 29 – 31, 2019 by Cynthia Malm from Pocatello, Idaho, a U.S. Department of Justice Certified PREA auditor for adult facilities. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility via email along with the data included in the completed IPREA Pre-Audit Questionnaire. The auditor reviewed documentation that included agency policies and procedures, forms, education materials, training curriculum, organizational charts, mission statements, posters, inmate handbooks, flyers, website information, and other IPREA related materials that were provided to demonstrate compliance with the IPREA standards. This review prompted a series of questions that were noted on the auditor's compliance tool and the auditor posed the questions to the IPREA Coordinator at the on-site audit.

An entrance meeting was held with Sgt. Jeffery Hoff, Jail Commander and Deputy Karl Green, IPREA Coordinator, at 8:30 a.m. on July 29, 2019. Deputy Green provided the auditor a list of all staff of the facility and their schedules, including specialized staff, and a list of all of the inmates in the facility and where they were housed. The auditor explained the process of the audit and answered any questions the agency had about the audit process.

During the three days of the on-site audit, the auditor was provided a private room outside the secure perimeter from which to work and conduct confidential interviews with staff. The auditor was also provided a private room within the secure perimeter to conduct confidential interviews of inmates. Formal personal interviews were conducted with specialty staff, random facility staff, randomly selected inmates, a volunteer, and contract employees. The auditor interviewed a total of seven inmates who were randomly selected from a facility total of eleven inmates in the five housing units in the jail. There were no youthful, gay, lesbian, transgender, limited English proficient, or disabled inmates incarcerated in the facility to interview. One inmate who identified with being bisexual was interviewed as to safety in the facility and the inmate felt very safe in the housing of the facility. Two inmates who reported sexual abuse in the community at intake were interviewed and one had been offered follow-up counseling at intake and refused and one had not been offered but refused in the interview. There were no inmates in segregated housing who had been a victim of sexual abuse for the auditor to interview. Inmates were interviewed using the recommended DOJ protocols that question their knowledge of a variety of IPREA protections, generally and specifically, their knowledge of reporting mechanisms available to inmates to report abuse or harassment. All of the inmates the auditor interviewed acknowledged that they had received training on IPREA at booking, or shortly after, in the form of a flyer explaining their right to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting a sexual abuse or sexual harassment, and how to report a sexual abuse or sexual harassment. All inmates stated there are posters everywhere that explain their rights against sexual abuse and sexual harassment and how to report an incident. They also said they receive education a few days after booking and, again, thirty days after booking. The majority of the inmates stated that most of the

deputies treat them well in the Boundary County Detention Center and were very positive about their treatment and stay in the facility.

The auditor interviewed four staff members representing various shifts. Normally, the shifts are ten-hour shifts but, because of being short-handed, the shifts are varied daily to try to keep the shifts covered. The facility has been approved for nine deputies but were down one, one was on vacation, and one was on medical leave. The other two were the IPREA Coordinator and the Jail Commander who both had several sets of questions that needed to be answered. The auditor also interviewed five specialty staff, including a volunteer, two medical health practitioners (contract staff), a Victim Witness Coordinator, and one investigative staff from the Detective Division. Boundary County Detention Center is a small facility so the detention deputies do all of the jobs in the facility and are not designated to individual specialty jobs. Sgt. Hoff is the only supervisor in the facility. Therefore, the auditor divided the specialty questions among the staff. Also interviewed were the Undersheriff, Jail Commander, and IPREA Coordinator. Staff were interviewed using the DOJ protocols that question their IPREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to inmates and staff, the response protocols when an inmate alleges sexual abuse or sexual harassment, and first responder duties. There are no SAFE or SANE employees at the facility as they are made available at the Boundary Community Hospital, Bonners Ferry, Idaho. All staff were very knowledgeable about IPREA and their responsibilities in preventing, detecting, and reporting sexual abuse and sexual harassment. All confirmed that they have yearly training on those responsibilities. The auditor reviewed random staff training records, rosters for attendance at PREA/IPREA training and the curriculum taught at the training to determine compliance with training mandates. Case files for six inmates in the facility were reviewed to evaluate screening and intake procedures, inmate education, and inmate signatures of acknowledgment. Classification records of inmate education, risk assessments, and housing decisions were also reviewed.

Following the entrance meeting, the auditor toured the facility from 11:30 a.m. to 12:45 p.m. and was escorted by Sgt. Jeffery Hoff, the Jail Commander, and Deputy Karl Green, IPREA Coordinator. During the tour, the auditor reviewed the booking room, observed the facility configuration, camera and mirror placement throughout the facility, blind spots, staff placement for supervision of inmates, toilet and shower areas, notices posted throughout the building and documentation to assist in determining compliance with the standards. The auditor noted that shower areas allow inmates to shower separately and shower stalls have shower curtains for privacy. However, inmates must dress in the shower and sometimes are exposed by reaching for towels, clothing, or trying to keep their clothes dry while dressing. Toilets are inside the individual cells and, in the dorms, they are behind half walls. Staff are announcing when they enter units of the opposite gender but can hear someone in the shower or using the toilet. At that point, staff avoid the areas where they can see the inmate in the shower or on the toilet or they leave the housing unit and return later. All of the staff were male at the time of the audit. The auditor reviewed the camera views and verified that toilets and showers were not monitored by the cameras. While viewing the monitor of the two-man cells, the auditor noticed that the area inside the lower bunk of each cell was not visible, creating a blind spot where two people could lay on the bunk and not be seen. Sgt. Hoff and Deputy Green felt that a mirror could be put on the wall for grooming and would also reflect the interior of the bottom bunk. During the tour, the auditor was given privacy to talk informally to staff and inmates in the booking room, housing units, and work areas. The auditor interviewed staff members working their posts to ask questions about their positions, procedures in their areas, and how their areas contributed to protection from sexual abuse and sexual harassments.

Throughout the three days of the audit, the auditor reviewed questions noted on the auditor's compliance tool with Deputy Green and reviewed additional documentation to verify compliance with the standards. The auditor was also able to view a booking in the evening of July 30.

At the conclusion of the on-site visit, an exit meeting was held at 4:35 p.m. on July 30, 2019 between the auditor and Deputy Green to discuss the audit findings and possible corrective actions that could be taken

by the facility to achieve compliance with the standards that were not met. The auditor also held an interview with medical staff and met with Sgt. Hoff on the morning of July 31, 2019 for another exit meeting.

Facility Characteristics

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

The Boundary County Sheriff's Office operates the Boundary County Detention Center which is a linear detention facility with a rated capacity of 24 beds. There are two dorm style housing units, 2 multiple occupancy housing units, and one single housing unit that doubles as a holding cell. The inmate count on the day of the audit was 11. Female inmates are housed in one of the dorm-style housing units, and the single cell housing unit is used for special management inmates. The other three housing units house male inmates.

The Boundary County Detention Center consists of one building and is located at 6438 Kootenai St., Bonners Ferry, ID. The Detention Center houses male and female adult inmates. New arrests are brought into the Detention Center through an access door to the south of the building or through the lobby door. The arrestee is pat searched in the booking room and then processed. The lobby door from the Sheriff's Office enters into the facility and Dispatch is to the left of the hallway, behind clouded windows, as a person enters the door. To the right of the hallway is the single cell/holding cell and the visiting booths. As a person enters the booking room from this hallway, another hallway juts west off the booking room to the right which opens into the recreational library and continues straight to a dorm-style male housing unit that holds six inmates. Turning south (left) from the library are the two multiple occupancy male housing units. One of these housing units holds four beds and one holds eight beds. Between the two housing units is a hallway that runs west to east and leads west to the exit into the recreation yard. The hallway to the east opens to the booking room and the kitchen and storage. Behind the booking counter to the southeast is the laundry room and behind the northeast side of the booking desk is the dorm-style female housing unit which holds six beds.

The building is monitored and operated by Dispatch that employs a push button control board to open the lobby door to the jail and monitor jail cameras. Jail cameras are also monitored in the booking room, in the Sheriff's office, and by the Sheriff's Administrative Assistant. External cameras are strategically placed and monitor all entrances in to the building and the recreation areas. Internal cameras monitor the main hallway, internal entrances, housing units, kitchen and laundry area, and other areas within the secure perimeter.

The Boundary County Sheriff's Office is attached to the jail outside the secure perimeter and inmates are not allowed access to the Sheriff's Offices without supervision. There are no designated jail administration offices so the Jail Commander works inside the jail at the booking desk.

Summary of Audit Findings

The summary should include the number of standards exceeded, number of standards met, and number of standards not met, **along with a list of each of the standards in each category.** If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance.

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

Number of Standards Exceeded: 6

115.17, 115.31, 115.41, 115.42, 115.67, 115.73

Number of Standards Met: 37

115.11, 115.12, 115.14, 115.15, 115.16, 115.18, 115.21, 115.22, 115.32, 115.33, 115.34, 115.35, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 116.65, 115.66, 115.68, 115.71, 115.72, 115.76, 115.77, 115.78, 115.81, 115.82, 115.83, 115.86, 115.87, 115.89, 115.401, 115.403

Number of Standards Not Met:

Summary of Corrective Action (if any)

115.11(b) requires the IPREA Coordinator to have sufficient time and authority to develop, implement, and oversee the agency’s efforts to comply with the IPREA standards. The Boundary County Sheriff’s Office has this in policy and the deputy assigned to the position confirmed this is done but there is nothing in the organizational chart to show the position of the IPREA Coordinator or who he directly reports to. The facility will revise the organizational chart to show the position of the IPREA Coordinator in the organization and who the IPREA Coordinator reports to. The facility will send a copy of the amended organizational chart to the PREA auditor within 180 days of the date on this interim report.

Successfully corrected January 21, 2020

115.12(c) requires the facility to develop, document, and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring to protect inmates against sexual abuse. It also requires the agency document any deviations from the plan. The Boundary County Detention Center does not have a development process for creating the staffing plan and does not have a written staffing plan. The Boundary County Detention Center does not document deviations from the two detention deputies on shift that the agency confirmed were required. The Boundary County Detention Center has done a good job of

placing cameras around the building to prevent blind spots but there are two cells that have blind spots on the lower bunks. The Detention Center will look at changing the angle view of the bunks, placing mirrors on the wall opposite that bunks, or consider other means that will correct the blind spots. The development process, written staffing plan, and blind spot correction will be completed and sent to the auditor within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.12(d) requires at least once every year the facility/agency, in collaboration with the IPREA Coordinator, reviews the staffing plan to see whether adjustments are needed. There is no written staffing plan so there are no reviews. The Boundary County Detention Center will do regular yearly reviews once the staffing plan is completed and will keep notes of the review as well as put the review date on the staffing plan. This corrective action will be completed within 180 days of the date of this interim report and the documentation sent to the auditor.

Successfully corrected January 21, 2020

115.12(e) requires performance of unannounced supervisor rounds and documentation of those rounds. The Boundary County Detention Center does conduct the rounds but has not been documenting them on a separate log where they can be viewed. The Detention Center will create a log specific to the unannounced supervisor rounds and will provide the auditor a copy of the unannounced supervisor rounds on the form within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.16(a) requires the agency to establish appropriate steps to ensure that all inmates, including inmates with disabilities or inmates who are limited in English proficiency, have equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Boundary County Detention Center has nothing in place to communicate with deaf inmates. The agency will look at obtaining an agreement with sign language interpreters for communication and IPREA education. The agency will also add to policy exact procedures of how to communicate with inmates who are deaf. This corrective action will be completed within 180 days of the date of this interim report and the documentation sent to the auditor.

Successfully corrected January 21, 2020

115.17(e - f) requires the facility to conduct five-year criminal background checks on all employees and to ask applicants and employees who may have contact with inmates directly about previous misconduct in either hiring applications, interview and hiring boards, or in staff reviews. The Boundary County Detention Center Policy states that it will do all of this. However, no five-year criminal background checks have been done on Detention Center employees who have worked there for five years. And, there is nothing in place for regular disclosures at staff reviews, or standard questions asked in hiring or promotion boards, or other avenues. The Boundary County Detention Center will develop a procedure for conducting five-year criminal background checks on employees. It will also develop a set list of questions to ask on hiring boards, promotion boards, and staff reviews for disclosure of the information listed in paragraph (a) of this standard. The Boundary County Detention

Center will also amend its policy to reflect the exact procedures for complying with this standard. The Boundary County Detention Center will send verification the five-year background checks have been done, the amended policy, and documentation confirming procedures are in place to the auditor within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.22(b) requires the facility to publish on its website, or elsewhere the public can access, its policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. The Boundary County Detention Center has not published this policy on the Sheriff's website and has not made it otherwise available to the public. The Detention Center will publish this information on its website, or elsewhere the public can access, and will send the documentation and advise the auditor of the location posted for the auditor's review. This will be done within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.32(a) requires that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. All of the volunteers at the Boundary County Detention Center have taken the training but the medical contractors have not taken the training. The Boundary County Detention Center will ensure that the medical contractors all take the required training and will send verification of successful completion to the auditor within 180 days of the date of this interim report that the training has been successfully completed.

Successfully corrected January 21, 2020

115.33(d) requires the agency to establish appropriate steps to ensure that all inmates, including inmates with disabilities or inmates who are limited in English proficiency, have equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The Boundary County Detention Center has nothing in place to communicate with deaf inmates. The agency will look at obtaining an agreement with sign language interpreters for communication and IPREA education. The agency will also add to policy the exact procedures of how to communicate with inmates who are deaf. This corrective action will be completed within 180 days of the date of this interim report and the documentation sent to the auditor.

Successfully corrected January 21, 2020

115.34(a-c) requires that all agency investigators take the specialized training for investigating sexual abuse in confinement settings. None of the administrative or criminal investigators in the Boundary County Sheriff's Office have taken this training. The Boundary County Detention Center will ensure that all investigators in the agency take the NIC online course, "Investigating Sexual Abuse in a Confinement Setting", and will send documentation of the successful completion to the auditor within 180 days of the date on this interim report.

Successfully corrected January 21, 2020

115.35(a) requires the agency to 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; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The Medical Providers are in the process of taking the training but haven't completed it. The Boundary County Detention Center will ensure that the medical contractors all take the required training and will send verification of successful completion to the auditor within 180 days of the date of this interim report that the training has been successfully completed.

Successfully corrected January 21, 2020

115.41(d and e) requires the intake screening shall consider certain criteria to assess inmates for risk of sexual victimization including whether the inmate has a mental, physical, or developmental disability and will consider whether the inmate is detained solely for civil immigration purposes. The standard also requires the agency to consider history of prior institutional violence or sexual abuse, as known to the agency, in assessing inmates for risk of being sexually abusive. The Boundary County Detention Center screening forms consider mental or physical disability but not developmental. The screening forms don't consider whether the inmate is detained solely for civil immigration. And, the screening forms don't consider history of prior institutional violence or sexual abuse, as known to the agency. The Detention Center will add developmental disability to #1 of the criteria, will add civil immigration to #10 of the criteria of the screening forms, and will add history of prior institutional violence or sexual abuse, as known to the agency. The revised forms will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.54(a) requires the agency establish a method to receive third-party reports of sexual abuse and sexual harassment and distribute publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate. Documentation and verification that the corrective action has been completed will be sent to the auditor within 180 days of the date of this interim report.

Successfully corrected January 21, 2020

115.71(b) requires that all agency investigators take the specialized training for investigating sexual abuse in confinement settings. None of the administrative or criminal investigators in the Boundary County Sheriff's Office have taken this training. The Boundary County Detention Center will ensure that all investigators in the agency take the NIC online course, "Investigating Sexual Abuse in a Confinement Setting", and will send documentation of the successful completion to the auditor within 180 days of the date on this interim report.

Successfully corrected January 21, 2020

PREVENTION PLANNING

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

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

115.11 (a)

- 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

115.11 (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

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)
 Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.11(a) The Boundary County Detention Center has implemented a zero-tolerance policy as detailed in its IPREA Policy, Prevention Planning which comprehensively outlines the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. The policy contains necessary definitions and descriptions of the agency strategies and responses to sexual abuse and harassment. And, the policy details what sanctions are imposed for those found to have participated in prohibited behaviors. This policy forms the foundation for the program's training efforts with inmates, staff, volunteers, contractors, and others. All interviews reflected that staff and inmates are aware of this zero-tolerance policy.

115.11(b) The facility has designated an upper-level, agency-wide IPREA Coordinator to oversee policy and procedure development and operations in reference to sexual abuse and sexual harassment. The IPREA Coordinator is Deputy Karl Green. Deputy Green indicated he has been given the time and authority to develop, implement, and oversee agency efforts to comply with the IPREA standards in the facility and the policy reflects this. Deputy Green stated that the Sheriff, Undersheriff, and Sgt. have supported him and been very good about giving him time to work on the IPREA requirements. Undersheriff Richard Stephens confirmed that Sgt. Hoff and Deputy Green have full support of the Boundary County Sheriff's Office in all their efforts to bring the Boundary County Detention Center into compliance with the IPREA standards.

There is no organizational chart that shows the position of the IPREA Coordinator in the Chain of Command to verify that the IPREA Coordinator has authority to make IPREA recommendations. Therefore, the auditor finds that the Boundary County Sheriff's Office does not meet this part of the standard.

115.11(c) The Boundary County Sheriff's Office operates only one facility and has not assigned anyone to be an IPREA Compliance Manager.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center IPREA Policy, Prevention Planning
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Sheriff's Office and Detention Center should revise the Organizational Chart to show the position of the IPREA Coordinator in the organization and who the IPREA Coordinator reports to.

This organizational chart should be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center and Boundary County Sheriff have revised the Organizational Chart to show the position of the IPREA Coordinator in the organization. The PREA Coordinator reports directly to the Detention Sergeant who, in turn, reports to the Boundary County Undersheriff.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

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

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

115.12 (a)

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

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.12(a-b) The Boundary County Detention Center does not contract with external facilities to house or confine any of its inmates and there haven't been any contracts of this type during the twelve months prior to the IPREA audit. This part of the standard is, therefore not applicable to the Boundary County Detention Center.

POLICY, MATERIALS, INTERVIEWS, AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.12: Supervision and monitoring

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

115.12 (c)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally

accepted detention and correctional practices 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 judicial findings of inadequacy 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 findings of inadequacy from Federal investigative agencies 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 findings of inadequacy from internal or external oversight bodies 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 all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) 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 inmate 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 number and placement of supervisory staff 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 institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards 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

115.12 (c)

- 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

115.12 (d)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.12 (e)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the 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*)

Instructions for Overall Compliance Determination Narrative

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

115.12(c) The Boundary County Detention Center IPREA Policy, Prevention Planning, ensures that the facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring to protect inmates against sexual abuse. The average number of inmates incarcerated in the Boundary County Detention Center during the twelve months prior to the audit was 26 and the staffing plan was predicated on 24 inmates. The staffing plan requires a minimum of two detention staff on each shift. In calculating adequate staffing levels and determining the need for video monitoring, the facility takes into consideration the eleven mandatory elements and considerations required by this IPREA Standard:

- (1) Generally accepted detention and correctional practices;
- (2) Any judicial findings of inadequacy;
- (3) Any findings of inadequacy from Federal investigative agencies;
- (4) Any findings of inadequacy from internal or external oversight bodies;
- (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- (6) The composition of the inmate population;
- (7) The number and placement of supervisory staff;
- (8) Institution programs occurring on a particular shift;
- (9) Any applicable State or local laws, regulations, or standards;
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (11) Any other relevant factors.

While the IPREA Policy, Prevention Planning, states the above is done and Sgt. Hoff confirmed that all ten items are considered, there is no documented staffing plan to show all of this. There is also no written developmental plan to show how the ten items were discussed and considered. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

Sgt. Hoff, Deputy Green, and the auditor identified two cells where the camera placement does not provide a view of the interior of the bottom bunk. The placement of cameras in the facility are excellent and all cells have a camera in them. However, the two cells where the interior of the bunks are hidden, provide a private area for two people to lay on the bunks without being seen by camera. Possible solutions would be to change the angle of the camera view or place a mirror on the opposite wall where the camera could see the interior of the bottom bunk in the reflection of the mirror. A mirror could also be used by the inmates in the cell for grooming giving it a dual purpose. Because of these blind spots, the auditor finds that the Boundary County Detention Center does not meet the requirement of #5 of this IPREA standard.

The Boundary County Detention Center requires two detention deputies on each shift. However, the jail is only approved for nine employees and when they are down employees due to resignation, training, illness, or vacation, it is sometimes difficult to keep two on shift at all times. The jail is also responsible for helping in the courts and conducting transports at times which also takes staff members out of the facility. The agency pays overtime to try to keep the posts covered. There is no written staffing plan that

indicates the two deputies on shift but Sgt. Hoff confirmed that two are required in compliance with Idaho Jail Standards. No deviations from the two deputies are documented. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.12(d) Boundary County Detention Center IPREA Policy, Prevention Planning, requires the staffing plan is reviewed once a year to determine if it is still adequate to meet the needs of the Boundary County Detention Center and protect inmates from sexual abuse. Policy states that “Whenever necessary, but no less frequently than once each year, the Jail Commander in consultation with the IPREA Coordinator, shall assess, determine and document whether adjustments are needed to the staffing plan, the facility’s deployment of video monitoring systems and other monitoring technologies, and the resources the facility has available to commit to ensure adherence to the staffing plan.” The Boundary County Detention Center does not have a written staffing plan and has no notes or documentation of yearly reviews. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.12(e) The Boundary County Detention Center has detailed in its IPREA Policy, Prevention Planning, the practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The policy states that “Intermediate level or higher-level supervisors will conduct and document unannounced rounds on all shifts to identify and deter staff sexual abuse and sexual harassment on all shifts. The Detention Sergeant or Second in command will conduct an Unannounced Round at least twice per week.” There wasn’t any documentation showing the rounds but Sgt. Hoff confirmed he is doing the rounds and logging them in the regular activity log. But, since they are logged within the regular log, the facility was unable to print the auditor a list of the rounds. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

Interviews and policy also confirmed that the rounds are unannounced and staff are prohibited from alerting other staff that the rounds are taking place. Normally the rounds are done by Sgt. Hoff on shift who also does regular security checks. So, the other deputies on shift do not know when an unannounced IPREA round is taking place.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center IPREA Policy, Prevention Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Idaho Jail Standards
Schematic plan of where the cameras are placed
Formal interviews with random staff
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Boundary County population report for 2018/2019

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should create a development plan that shows how a staffing plan has been created.
2. The Boundary County Detention Center should create a written staffing plan from the development plan.
3. The Boundary County Detention Center should create a view of the interior of the bottom bunks where there is no view.
4. The Boundary County Detention Center should log deviations from the staffing plan on each shift one occurs.
5. The Boundary County Detention Jail Commander/IPREA Coordinator should do an annual review of the staffing plan and document the review and whether any changes are needed to the plan.
6. The Boundary County Detention Center should develop a log for unannounced supervisor rounds so that all the rounds are logged on the same form.

The review and revised staffing plan should be completed within 180 days of the date on this interim report and sent to the auditor for review.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center and Boundary County Sheriff developed a staffing plan for the jail and has shown in the plan the number of staff needed for a full shift.
2. The Boundary County Detention Center staffing plan requires a minimum of two deputies on any shift.
3. The Boundary County Detention Center has installed mirrors in the cells where the bottom bunk could not be seen by the camera. Now the camera can view the bottom bunk by looking in the mirror.
4. The Boundary County Detention Center has created a form and is now documenting any deviations from the staffing plan and the reason for the deviations. Completed deviation forms were also attached for the auditor to review.
5. The Boundary County Detention Center and Sheriff have added to policy the staffing plan will be reviewed on an annual basis.
6. The Boundary County Detention Center has developed a log for unannounced supervisor rounds so that all the rounds are logged on the same form. Rounds have been documented since October 10, 2019.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.14: Youthful inmates

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

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.14(a) The Boundary County Detention Center has detailed in its IPREA Policy, Prevention Planning, how a youthful inmate would be housed in the facility. Youthful inmates are held occasionally for court but are not held for more than six hours and are held in a holding cell that is in the hallway just inside the Detention Center and out of sight and sound of adult inmates.

Youthful inmates are rarely housed in the Boundary County Detention Center but the Detention Center has kept the policies in place for the rare occasion that they may be required to house a youthful inmate in accordance with Idaho law. If a youthful inmate is placed in the Boundary County Detention Center, the Detention Center will not place the inmate in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. The Boundary County Detention Center had no youthful inmates in custody at the time of the audit or during the twelve months preceding the audit.

115.14(b) Referring to IPREA Policy, Prevention Planning, the Boundary County Detention Center will either maintain sight and sound separation between youthful inmates and adult inmates in areas outside of housing units or will provide direct supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

115.14(c) The Boundary County Detention Center has detailed in its IPREA Policy, Prevention Planning, that the Detention Center will make its best efforts to avoid placing a youthful inmate in segregation to comply with this standard. Absent exigent circumstances, the facility does not deny youthful inmates daily large-muscle exercise or any legally required special education services while in the facility. The policy states that education will either be provided by the G.E.D. Instructor or if they are not available, the agency will coordinate with Juvenile Detention for their instructor.

The policy states that youthful inmates are given access to other programs and work opportunities to the extent possible. There was no documentation to review as the Boundary County Detention Center has not housed any youthful inmates in the twelve months prior to the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center IPREA Policy, Prevention Planning
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Boundary County Detention Center Population Report for 2018/2019

Standard 115.15: Limits to cross-gender viewing and searches

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

115.15 (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

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) Yes No NA
- Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

115.15 (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 inmates?
 Yes No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? Yes No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? Yes No

115.15 (e)

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

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

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.15(a) The Boundary County Detention Center's IPREA Policy, Prevention Planning, detail that cross gender strip searches and cross gender visual body cavity searches are prohibited except in exigent circumstances. Only medical practitioners can perform intrusive or invasive body cavity searches under all circumstances. There were not any cross-gender strip searches done in the 12 months prior to the audit for the auditor to review.

115.15(b) The Boundary County Detention Center's IPREA Policy, Prevention Planning, states that cross gender pat down searches of female inmates by male staff are prohibited except in exigent circumstances. In the 12 months prior to the audit, no cross-gender pat down searches of female inmates were done. The policy states that if a cross gender pat down search must be done, the staff member will obtain supervisory permission before conducting the pat down search. IPREA Policy and interviews with female inmates confirmed that female staff conduct all pat down searches of female inmates. Currently, the Detention Center does not have any female detention officers so they rely on office staff or dispatch to conduct searches of female inmates. The facility does limit the female inmate's ability to work in the facility because occasionally there is only one deputy on shift and that deputy is

male. The facility feels that it is a safety issue to have a female work with only a male deputy on duty. Female inmates are not prohibited from attending other programs or out-of-cell activities because of no female on duty to conduct a pat down search.

115.15(c) The Boundary County Detention Center's IPREA Policy, Prevention Planning, requires that all cross-gender strip searches of male and female inmates and all cross-gender pat down searches of female inmates must be documented. There weren't any cross-gender searches done during the twelve months prior to the audit so the auditor had no documentation to review.

115.15(d) The Boundary County Detention Center's IPREA Policy, Prevention Planning, and practice ensures that inmates are able to shower, perform bodily functions, and change clothing with privacy. The policy details the exigent circumstances that would be required for staff of the opposite gender to deviate from this policy. Policy requires announcement when staff of the opposite gender enter the housing unit and interviews with inmates and staff confirmed that this is done. The staff can hear if someone is taking a shower and the inmates call out when they are using the toilet and an opposite gender deputy calls the announcement. The deputies said that they will back out and not even go into the housing unit if an inmate is on the toilet or in the shower. Interviews with inmates felt that most of the deputies were respectful of their privacy and the deputies normally announce as a routine action.

115.15(e) Boundary County Detention Center policy and practice prohibit searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Interviews with staff confirmed the majority knew the policy and no searches of this type have been done.

115.15(f) The Boundary County Detention Center provides yearly training through a power point presentation that explains how to conduct cross gender searches of inmates in a professional manner. Deputy Green keeps track of the training and gives much of the training to the staff. The deputies were also required to watch the NIC video, "Guidance in Cross-Gender and Transgender Pat Searches" this last year. And, Deputies receive the training during the Basic Detention Academy at P.O.S.T. of how to conduct cross gender and transgender pat down searches.

There were no transgender or intersex inmates in the facility at the time of the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Prevention Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with random inmates and staff
IPREA training curriculum
NIC video "Guidance in Cross-Gender and Transgender Pat Searches"
Idaho P.O.S.T. PREA training curriculum

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

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

115.16 (a)

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

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? 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

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate'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*)

Instructions for Overall Compliance Determination Narrative

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

115.16(a) The Boundary County Detention Center's IPREA Policy, Prevention Planning, ensures that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. A staff member will read the information on reporting and responding to sexual abuse or sexual harassment to

inmates who have low vision or are blind, are intellectually challenged, or who are illiterate. The facility also has the capability of printing off large print editions of the inmate handbook and PREA information to give to inmates. A few months prior to the audit, there was a blind inmate and the staff read everything to the inmate and the Public Defender came into the facility to read the legal mail to the inmate. The facility has a mental health provider they can call to communicate the information to those with psychological problems. However, the facility has nothing specific in place to communicate the information to deaf inmates. The policy states that the facility will obtain interpreters as needed from an outside agency and use of a TTY. An interview with Deputy Karl Green indicated that there is not a TTY and they would obtain a sign language interpreter, if needed, but had no specific source as there are no contracts or agreements in place for sign language interpreters. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

The Detention Center has an agreement with a language line to provide interpretation services to inmates who do not speak English. Instructions to staff on how to use the language line will need to be posted where all detention deputies have access as currently dispatch is the only place the instructions are available. If the language is Spanish, the agency uses Border Patrol or a county employee to help them communicate.

At the time of the audit, there were no inmates with disabilities or limited English proficiency in the facility for the auditor to interview.

115.16(b) Boundary County Detention Center's IPREA Policy, Prevention Planning prohibits the facility from using inmate interpreters, readers, or other inmate assistants to assist other inmates in reporting a sexual abuse or sexual harassment except in limited circumstances where safety could be compromised waiting for other assistance. The Detention Center reports that there have been no instances in the past 12 months where inmate interpreters have been used to assist other inmates. Interviews with random staff confirmed that inmate interpreters are not used unless there are exigent circumstances and no one could remember a time that inmate interpreters have been used.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Prevention Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Undersheriff Richard Stephens
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with random facility staff
Yearly IPREA training curriculum for staff

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should locate a sign language interpreter(s) and enter into an agreement for them to translate in the Detention Center when there is an inmate who is hard of hearing or deaf.
2. The Boundary County Detention Center should revise its policy and procedure to reflect exactly what their procedures are for obtaining an interpreter for the deaf.

All corrective action should be sent to the auditor within 180 of the date of the interim report so that a final report can be issued.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has obtained sign language interpreters to assist the detention center when a deaf person is in the facility and has trained staff on how to contact the interpreters and has given them access to the telephone numbers of the sign language interpreters. There is also a Boundary County deputy who can assist with sign language needs.
2. The Boundary County Detention Center has revised its IPREA policy to reflect exactly what their procedures are for obtaining an interpreter for the deaf.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.17: Hiring and promotion decisions

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

115.17 (a)

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

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (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 inmates? Yes No

115.17 (c)

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

115.17 (d)

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

115.17 (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 inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates 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 inmates 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

115.17 (g)

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

115.17 (h)

- 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*)

Instructions for Overall Compliance Determination Narrative

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

115.17(a) Boundary County Detention Center's IPREA Policy, Prevention Planning prohibits the hiring, promotion or retention of any employee who may have contact with inmates and will not enlist the services of any contractor that has the prohibited conduct specified in this standard. The background investigation also includes a criminal background check of all applicants for employment or contracting services. In addition to policy, detention deputies are required to be state certified within one year of hire and the Idaho P.O.S.T. Academy requires a thorough background check on any detention employee who will be attending the P.O.S.T Academy.

115.17(b) An interview with Deputy Karl Green confirmed that the Boundary County Sheriff's Office considers 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 inmates.

115.17(c) In addition to conducting criminal background checks prior to hiring an applicant, the Boundary County Sheriff's Office contacts all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegations of sexual abuse. In the past 12 months, five people have been hired who have contact with inmates and they all have had extensive background and criminal history checks completed prior to their hiring.

115.17(d) Boundary County Detention Center's IPREA Policy, Prevention Planning, requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates. In the past twelve months, the Boundary County Sheriff's Office has not hired any contractors and, therefore, have not done any criminal background record checks during the last twelve months.

115.17(e) Boundary County Detention Center's IPREA Policy, Prevention Planning requires a criminal background records check on all employees every five years. Deputy Karl Green explained that no background record checks after hire have been done on any staff and there is no plan of how this will happen. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.17(f) The Boundary County Detention Center's IPREA Policy, Prevention Planning, states, "The Sheriff's Office will ask all applicants and employees who may have contact with inmates directly about previous misconduct, as described above, in interviews for hiring or promotion and in any interviews as part of reviews of current employees. Employees have a continuing affirmative duty to disclose any such misconduct".

An interview with Sgt. Jeffery Hoff and Deputy Karl Green, disclosed that there is nothing specific in the procedures for hiring or promotion interview boards or employee reviews. There are no standard questions that are asked in the interviews that relate to sexual abuse in a confinement setting. Therefore, the auditor finds that the practice does not match the policy and the Boundary County Detention Center does not meet this part of the standard.

115.17(g) The Boundary County Detention Center's IPREA Policy, Prevention Planning, states that material omissions regarding such misconduct or provision of materially false information shall be grounds for termination.

115.17(h) Policy requires the Boundary County Sheriff's Office to 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. The request is forwarded to the Sheriff, or designee, to provide the response.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Prevention Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Idaho P.O.S.T. IDAPA Rules
Idaho Jail Standards

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should complete a background records check on all employees who have been working for the Detention Center for five or more years.
2. The Boundary County Detention Center should develop a standard set of questions for hiring and promotion boards to ask applicants and candidates about any sexual misconduct as described in paragraph (a) of this standard.
3. The Boundary County Detention Center will develop questions for employee reviews that ask for disclosure of any sexual misconduct.
4. The Boundary County Detention Center should revise policy to detail exactly what will be done on five-year background checks and yearly requests for disclosure on incidents.

Documentation confirming implemented policy and practices should be sent to the auditor within 180 days of the date of the interim report so that a final report can be issued after the 180-day corrective action period has ended.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has completed a background records check on all employees who have been working for the Detention Center for five or more years.
2. The Boundary County Detention Center has developed three questions to be asked in interview boards for hiring and promotion that asks applicants and candidates about any sexual misconduct as described in paragraph (a) of this standard.
3. The Boundary County Detention Center has developed a form that asks the same three questions to employees during their annual reviews.
4. The Boundary County Detention Center has revised its policy to require the five-year employees background records check be done at least every four years for each employee. With this requirement of at least every four years, the auditor finds that the Boundary County Detention Center exceeds this part of the standard.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.18: Upgrades to facilities and technologies

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

115.18 (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 inmates 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

115.18 (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 inmates 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*)

Instructions for Overall Compliance Determination Narrative

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

115.18(a) The Boundary County Sheriff's Office and Boundary County Detention Center hasn't had any acquisitions of new facilities or substantial expansions or modifications of the current Detention Center since it was built.

115.18(b) The Boundary County Detention Center added new cameras all around the facility. The Boundary County Detention Center has both internal and external video camera monitoring. Cameras are positioned on all external entrances and exits from the building. Cameras internally are located in hallways, holding cells, support services areas, housing units, individual cells, and internal entrances into the building. There are no camera views of the toilets and shower areas. The cameras can be monitored by the Booking Room, Dispatch, Sheriff, and the Sheriff's Administrative Assistant.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Description of camera placement throughout the facility
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Undersheriff Richard Stephens
Interview with Deputy Karl Green, IPREA Coordinator

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

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

115.21 (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

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) 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

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? 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 N/A

115.21 (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

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (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

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(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*)

Instructions for Overall Compliance Determination Narrative

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

115.21(a - b) The Boundary County Sheriff's Office and Boundary County Detention Center follow the Idaho Policing Policy sexual abuse evidence collection protocol. This protocol is used by the Boundary County Detective Division when conducting criminal investigations inside and outside the Jail. The protocol is developmentally appropriate for youth but no youthful inmates are held in the facility. The Boundary County Detention Center takes inmates to Boundary Community Hospital in Bonners Ferry, Idaho for forensic exams. An interview with a hospital employee confirmed the Hospital has its own uniform evidence collection protocol, Alleged Sexual Assault Procedure, which was revised in February of 2019 and is used for sexual assault exams. The protocol is appropriate for youth. This information is based on the policy and interviews as there were no forensic medical examinations performed during the twelve months prior to the audit.

115.21(c) Boundary County Detention Center IPREA Policy, Responsive Planning, states that all victims of sexual abuse are offered access to forensic medical examinations where evidentiary or medically appropriate. Sgt. Hoff and Deputy Green explained that these exams will normally be done at Boundary Community Hospital in Bonners Ferry, Idaho. The policy states there is no financial cost to the victim. When possible, examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs a forensic medical examination. Attempts to get a SAFE or SANE are documented. This information is based on the policy as there were no forensic medical examinations performed during the last twelve months.

115.21(d) The Boundary County Detention Center has an MOU with the Boundary County Victim Services, located in Bonners Ferry, Idaho to provide rape crisis services to victims of sexual assault. The Boundary County Victim Services has a 24/7 crisis hotline that inmates can call free of charge and the calls are not recorded. This information is given to inmates and interviews with the majority of inmates confirmed they know that counseling and therapy is available and is free of charge. An interview with an advocate from the Boundary County Victim Services confirmed that they will assist the Sheriff's Office in any sexual assault or other victims' services for the inmates in the jail. They also work with Rawlings Community Counseling in Bonners Ferry to provide mental health counseling and will provide that service to the inmates.

Policy states that "If a rape crisis center is not available to provide victim advocate services, the Center will make available an appropriate staff member from a community-based organization or an appropriate agency staff member to provide these services. The agency will document the efforts made to secure these services." The Boundary County Victim Services is a county agency with qualified advocates and works closely with the Boundary County Sheriff's Office.

115.21(e) The Boundary County Detention Center's IPREA Policy, Responsive Planning, ensures that a victim's advocate, upon request from the inmate, accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals as warranted. This was confirmed in an interview with the

Boundary County Victim Services. There have been no forensic medical examinations done during the last twelve months and a victim's advocate has not been requested or used by inmates.

115.21(f) The Boundary County Detention Center only has an outside agency conduct the investigation if the allegation involves staff or when the Sheriff feels it is necessary to go outside the Sheriff's Office. All investigations that allegedly involve staff or are a conflict of interest are referred outside the agency, by Sheriff David Kramer or Undersheriff Richard Stephens, to the Idaho State Police. The Boundary County Detention Center's Policy requires the outside agency to follow the requirements in (a) through (e) of this standard and the Boundary County Sheriff's Office will document the request to the assisting agency to follow these requirements. All IPREA complaints are investigated for possible criminal activity and the Boundary County Sheriff's Office maintains a close working relationship with the County Prosecutor.

The auditor relied on the policies and interviews to find this standard in compliance as there were no allegations of sexual abuse or sexual harassment of inmates during the twelve months of the audit cycle so there were no documents or investigations to review.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Responsive Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Interview with Boundary Community Hospital employee
Interview with Boundary County Victim Services
Interview with criminal investigator
Flyers that list contact information for Boundary County Victims' Services
Idaho Policing Policy

Standard 115.22: Policies to ensure referrals of allegations for investigations

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

115.22 (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

115.22 (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

115.22 (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 criminal investigations. See 115.21(a).] Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.22(a - b) The Boundary County Detention Center has two investigators who work in the Detective Division to conduct criminal investigations and Sgt. Hoff and Deputy Green conduct administrative investigations in the Detention Facility. All investigations that allegedly involve staff are referred outside the agency to the Idaho State Police. The investigator(s) from the outside agency will be asked to take the specialized training for investigations in a confinement setting.

None of the investigators from the Boundary County Sheriff's Office and Boundary County Detention Center involved in the investigations have had the specialized training for investigators in a confinement setting. Both detectives have had extensive training on sexual assault investigations in the community. The Boundary County Sheriff's Office has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior. All IPREA complaints are investigated for possible criminal activity and the Boundary County Sheriff's Office maintains a close working relationship with the County Prosecutor. Once the criminal investigation is concluded by either the Detective Division or an outside agency, the case will be referred back to the Boundary County Detention Center for further administrative investigation, (excluding internal investigations of staff) and disciplinary sanctions, if warranted. The Boundary County Detention Center reported that no allegations of sexual harassment or sexual abuse of inmates were reported during the twelve months preceding the audit.

Agency policy regarding the referral of allegations of sexual abuse and sexual harassment is not published on the agency's website or available to the public by other means as required by the standard and the Boundary County Detention Center's IPREA policy. Therefore, the auditor finds that the Boundary County Sheriff's Office and Detention Center do not meet this part of the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Responsive Planning
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Boundary County Sheriff's Office website: www.boundarysheriff.org
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Interview with Boundary County Sheriff's criminal investigator

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should publish on its website or other means, the agency policy regarding the referral of allegations of sexual abuse and sexual harassment.
2. If the Boundary County Detention Center chooses to publish it by other means than the website, the Detention Center should amend the policy and procedure to reflect where the information is posted.

This policy should be published on the website, or provided elsewhere to the public, within 180 days of the date of this interim report and verification sent to the auditor to review within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has published on its website and has posted in its lobby the agency policy regarding the referral of allegations of sexual abuse and sexual abuse to investigators.
2. The Boundary County Detention Center PREA policy and procedure states the policy will be published on its website and posted on the bulletin board in the lobby of the Detention Center.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

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

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No

- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates 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

115.31 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.31(a - b) The Boundary County Detention Center's IPREA Policy, Training and Education, requires that employees receive the training of the ten topics listed in the standard every two years and during the years in-between, the employees are given training on new and current IPREA policies and procedures. Employees received the following training: Idaho P.O.ST. Academy PREA power point training and the NIC online course, "Guidance in Cross-Gender and Transgender Pat Searches". Interviews with random staff revealed that the staff have yearly training on IPREA and are very knowledgeable on the topics.

115.31(c) The training is tailored to the gender of the inmates at the Boundary County Detention Center which houses both female and male inmates. There is only one facility so all employees are trained to work with both genders and there are no reassignments to care for one gender or the other.

115.31(d) IPREA refresher training that reviews all of the requirements of IPREA is provided to employees every year instead of every other year. Staff also receive ongoing IPREA training throughout the year. Because the facility provides full and ongoing IPREA training yearly instead of every other year and extra training several times a year, the auditor finds that the facility exceeds this part of the standard

115.31(e) The form that staff signs at the training requires that employees verify they understand the training they have received.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center IPREA Policy, Training and Education
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
PREA Power Point Presentation
Staff Acknowledgement Form
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with random staff

Standard 115.32: Volunteer and contractor training

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

115.32 (a)

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

115.32 (b)

- Have all volunteers and contractors who have contact with inmates 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 inmates)? Yes No

115.32 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.32(a) The Boundary County Detention Center's IPREA Policy, Training and Education requires all volunteers and contractors who may have contact with inmates be trained on IPREA requirements. The training curriculum includes a very comprehensive power point presentation. Five volunteers who have contact with inmates have been trained in IPREA requirements during the last twelve months. This totals 100% of volunteers that have been trained. Medical personnel working through the Medical contract at the Detention Center have not had the training. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.32(b) The training curriculum was very detailed and showed that contractors and volunteers have extensive training on the zero-tolerance policy, duty to report, warning signs, proper communication with all inmates, first responder duties, and several other aspects of the prevention, detection, and response policies and procedures. All volunteers and contractors receive the comprehensive training regardless of the level of services or contact with inmates. The Medical Contractors are in the process of taking the training.

115.32(c) All volunteers and contractors are required to sign they have had the training and the documentation is kept on file at the Boundary County Detention Center.

There was one volunteer on site at the time of the audit who was interviewed and was compliant with this standard. Two medical contract staff members were interviewed and are in the process of completing the training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center IPREA Policy, Training and Education
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
IPREA Training Power Point Presentation
IPREA Acknowledgement Form for volunteers and contractors
Interview with Deputy Karl Green, /IPREA Coordinator
Interview with volunteer
Interview with medical contract staff members

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center will ensure that all medical contractors who have contact with inmates will complete training on their responsibilities under IPREA.
2. The Boundary County Detention Center will maintain documentation verifying that the training has been completed.

Verification of the completed training will be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has ensured that all medical contractors who have contact with inmates will complete training on their responsibilities under IPREA.
2. The Boundary County Detention Center maintains documentation verifying volunteer and contractor training has been completed.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.33: Inmate education

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

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No

- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

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

115.33 (c)

- Have all inmates received such education? Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?
 Yes No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

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

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate 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*)

Instructions for Overall Compliance Determination Narrative

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

115.33(a - c) The Boundary County Detention Center reports that 368 inmates have been admitted in the past twelve months to the facility and all have been provided with comprehensive information during the intake, booking, and classification process. All inmates in the Boundary County Detention Center receive information at intake through a flyer that is given to the inmate. The Booking Officer explains the flyer and the inmate reads the flyer and signs that he or she has received this information. An inmate handbook is in each housing unit that has IPREA information in it. Within thirty days, Deputy Green meets with the inmates and explains their right to be free from sexual abuse and sexual harassment and how to report any incidences. Interviews with inmates confirmed that they receive the training at booking and, again, within thirty days of booking and the majority of the inmates were able to tell the auditor what the policies are for zero tolerance, how to report. and who the advocates are.

The auditor reviewed the files of six random inmates and verified that they had all had the training at booking and had more comprehensive training within thirty days of the booking and all the training is documented.

115.33(d) The Boundary County Detention Center ensures that key information is continuously available to inmates through posters, flyers, and inmate handbooks. IPREA posters are displayed in the dayrooms with the abuse hotline number by the phones.

There are very few materials or formats available for IPREA education to inmates with disabilities. The staff will read information to those who are illiterate or have low vision or who are blind. There is nothing in place to provide education to deaf inmates. Therefore, the auditor finds that the agency does not meet this part of the standard.

Interviews with random inmates revealed that the majority of inmates are retaining the information they are provided through the handbook, posters and flyers. All of the interviews with inmates confirmed that they received training and information on IPREA at booking and after booking. All stated that information is posted in the housing unit, and is in the inmate handbook on how to report a sexual abuse or sexual harassment. All knew they could access a hotline number on the phone. All knew there was a counseling service available. All knew there were ways to report an incident outside the facility such as their attorneys, and friends or families. The majority of the inmates said they are well taken care of in the Boundary County Detention Center and the deputies respect their privacy.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Training and Education
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Inmate Handbook
PREA flyers given to the inmates
PREA Posters displayed in dayrooms
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with random inmates
Interviews with random staff

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should locate a sign language interpreter(s) and enter into an agreement for them to translate in the Detention Center when there is an inmate who is hard of hearing or deaf.
2. The Boundary County Detention Center should revise its policy and procedure to reflect exactly what their procedures are for obtaining an interpreter for the deaf.

All corrective action should be sent to the auditor within 180 of the date of the interim report so that a final report can be issued.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has obtained sign language interpreters to assist the detention center when a deaf person is in the facility and has trained staff on how to contact the interpreters and has given them access to the telephone numbers of the sign language interpreters. There is also a Boundary County deputy who can assist with sign language needs.

2. The Boundary County Detention Center has revised its IPREA policy to reflect exactly what their procedures are for obtaining an interpreter for the deaf.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.34: Specialized training: Investigations

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

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, 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 115.21(a).) Yes No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] 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 115.21(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 115.21(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 115.21(a).] Yes No NA

115.34 (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 115.21(a).] Yes No NA

115.34 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.34(a) The Boundary County Detention Center's IPREA Policy, Training and Education, requires that all of its employees who investigate sexual abuse and sexual harassment allegations in the facility receive the specialized training for conducting such investigations in confinement settings. The investigators are required to take the class or online PREA Investigators course, "Investigating Sexual Abuse in a Confinement Setting" available through the PREA Resource Center and the National Institute of Corrections.

Two investigators from the detective division conduct the criminal investigations in the Detention Center. Deputy Green and Sgt. Hoff conduct administrative investigations in the Detention Center. None of the investigators have taken the specialized training for investigating sexual abuse in a confinement setting. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.34(b) The specialized training that is required by policy includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Detectives from the Boundary County Sheriff's Detective Division have also had additional training in sexual abuse investigations for their job requirements and are very familiar with the proper use of Miranda and Garrity warning as they use them frequently in their job duties.

115.34(c) None of the investigators have taken the specialized training so there was no documentation to review.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center’s IPREA Policy, Training and Education Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with criminal investigator
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Multiple Certificates of Completion of other sexual assault courses

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should ensure that all of the criminal and administrative investigators take the NIC online specialized training for “Investigating Sexual Abuse in a Confinement Setting”.
2. The Boundary County Detention Center will maintain the documentation of completed training.

The verification that the training has been completed will be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has required that all criminal and administrative investigators take the NIC online specialized training, “Investigating Sexual Abuse in a Confinement Setting”.
2. The Boundary County Detention Center is maintaining the certificates of completion of the required training.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.35: Specialized training: Medical and mental health care

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

115.35 (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

115.35 (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

115.35 (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

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? 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 §115.32? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.35(a) The Boundary County Sheriff's Office contracts with Dr. Troy Geyman to provide on-site medical care at the facility. A nurse and Medical Provider come to the facility once a week. An interview with contract mental health practitioners confirmed that they are in the process of taking the specialized training but have not yet completed it. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.35(b) The medical contractor does not conduct forensic exams at the Boundary County Detention Center. Victims of sexual abuse are transported to Boundary Community Hospital in Bonners Ferry, Idaho for the exam, when medically appropriate. There have been no incidents of sexual abuse so no forensic exams had been done at the time of the audit.

115.35(c - d) Medical Contractors have not taken the training so there is no documentation for the training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interviews with Medical Health Providers
Interview with Deputy Karl Green, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center will ensure that all medical contractors who have contact with inmates will complete training on their responsibilities under IPREA.
2. The Boundary County Detention Center will maintain documentation verifying that the training has been completed.

Verification of the completed training will be sent to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has ensured that all medical contractors who have contact with inmates have completed training on their responsibilities under PREA. The training was the same training given to all of the staff.
2. The Boundary County Detention Center is maintaining the documentation verifying the training has been completed.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

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

115.41 (a)

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

115.41 (b)

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

115.41 (c)

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

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?
 Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?
 Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate 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 inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate 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 inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

- In assessing inmates 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 inmates 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 inmates 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

115.41 (f)

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

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? Yes No

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

115.41 (h)

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

115.41 (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 inmate's detriment by staff or other inmates?
 Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.41(a - b) Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness requires the Booking Deputy to complete an initial IPREA risk assessment on inmates when they booked into the facility. Within 72 hours of booking, a detention deputy conducts a full risk screening on each inmate. The Boundary County Detention Center reported there were 99 inmates entering the facility whose length of stay was for 72 hours or more who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of

entering the facility. Interviews with inmates confirmed that all of them had a risk screening at the time of, or shortly after, booking.

The auditor viewed a booking and verified the risk screening is being done at booking when the inmate is cooperative.

115.41(c) The risk assessments are completed on an objective screening instrument. The auditor reviewed six files of inmates and verified that the screening instrument is being used.

11.5.41(d) The screening form does not have the following items required by the standard. Therefore, the auditor finds the Boundary County Detention Center does not meet this part of the standard.

- (1) The instrument only screens for mental or physical disability and not developmental disability.
- (2) The instrument does not consider whether the inmate is detained solely for civil immigration purposes.

The policy states that the Detention Center will consider all of the above but does not have these items on the screening form.

115.41(e) The screening instrument considers prior acts of sexual abuse, prior convictions for violent offenses but does not consider the history of prior institutional violence or sexual abuse as known to the agency. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

115.41(g) Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness, also requires that an inmate's risk level be reassessed within 30 days of the inmate's arrival at the Boundary County Detention Center when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that directly affects the inmate's risk of victimization or abusiveness. None of the listed incidents have happened so there were no reassessments for the auditor to review

115.41(h) The policy prohibits the Boundary County Detention Center from disciplining inmates for refusing to answer any questions referring to sexual abuse or for not disclosing complete information on the screening questions listed in this standard. The standard only requires that inmates are never 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. Because of this policy and practice of not disciplining inmates for refusing to answer any questions referring to sexual abuse or not disclosing complete information on any questions during the screening process, the auditor finds that the Boundary County Detention Center exceeds this part of the standard.

115.41(i) Policy states that "The Boundary County Detention Center shall ensure the sensitive assessment information is not exploited to the inmate's detriment by staff or other inmates and that any documents obtained from the assessment are secured. Access to this information will only be accessible to the Jail Commander, the IPREA Coordinator, the "Sergeant's Group" and the "Classifications Group".

Deputy Karl Green stated that all detention deputies classify inmates so they all have access to the information which is kept in the booking file with the classification paperwork. Sgt. Hoff, and Deputy Green are the only persons who can authorize access to the information to anyone outside the

Detention Center. Policy states that any staff or inmate who uses the information to the inmate's detriment will face disciplinary action.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Objective Risk Screening Instruments
Interviews with random staff
Interviews with random inmates
Random Inmate Files

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should add to its screening form in #1 developmental disability.
2. The Boundary County Detention Center should add to its screening form in #10 whether the inmate is detained solely for civil immigration purposes.
3. The Boundary County Detention Center should add to its screening form consideration of the history of prior institutional violence or sexual abuse, as known to the agency.

All corrective action should be sent to the auditor within 180 days of the date of the interim report so that a final report can be issued.

Once the corrective action has been successfully completed, the Boundary County Detention Center will exceed this standard.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has added to its screening form in #1, the developmental disability.
2. The Boundary County Detention Center has added to its screening form in #10 whether the inmate is detained solely for civil immigration purposes.
3. The Boundary County Detention Center has added to its screening form consideration of the history of prior institutional violence or sexual abuse, as known to the agency.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard and exceeds the standard.

Standard 115.42: Use of screening information

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

115.42 (a)

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? Yes No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? Yes No

115.42 (b)

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

115.42 (c)

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

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?
 Yes No

115.42 (e)

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

115.42 (f)

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

115.42 (g)

- 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 inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates 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 inmates, does the agency always refrain from placing: transgender inmates 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 inmates, does the agency always refrain from placing: intersex inmates 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*)

Instructions for Overall Compliance Determination Narrative

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

115.42(a) The Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness, requires that all information gathered during the intake and assessment process be used to ensure appropriate classification and placement of inmates into housing, work programs, and regular programs as well as any necessary security or protective precautions required to ensure the inmate's safety.

115.42(b) All detention deputies are Classification Deputies and conduct all of the assessments and reassessments of inmates in the facility to make individualized determinations of how to ensure the safety of each inmate. The IPREA Coordinator reviews the screening forms and the classification to verify that the inmate is housed in the safest place possible.

115.42(c) The Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness requires that the deputy doing the classification carefully considers, on a case-by-case basis, whether placement of a transgender or intersex inmate in a particular housing and bed assignment will ensure the inmate's health and safety and whether or not that placement would present management or security issues.

115.42(d) The IPREA Policy requires that at least monthly, beginning with the intake date, a reassessment will be completed on all transgender and intersex inmates to review any threats of safety experienced by the inmate. Because of the reassessment being done at least monthly rather than at least twice a year, the auditor finds the Boundary County Detention Center exceeds this part of the standard.

115.42(e) Transgender and intersex inmates are asked about their own views in respect to their safety while incarcerated in the facility and those considerations are given serious consideration when making housing, bed, and programming assignments.

115.42(f) The IPREA Policy states that transgender and intersex inmates will be allowed to shower separately from other inmates. The dressing/booking shower will be used if the inmate prefers to shower separately.

115.42(g) The Boundary County Detention Center's IPREA Policy prohibits placing lesbian, gay, bisexual, transgender or intersex inmates in a particular housing or bed assignment or other assignment based solely on such identifier or status unless the placement is ordered by a consent decree, legal settlement, or legal judgment of which the intent is the protection of inmates. The Boundary County Detention Center is under no such legal restriction.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Objective Screening Instruments
Interviews with random staff
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.43: Protective Custody

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

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? Yes No
- If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment? Yes No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety? Yes No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? Yes No

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.43(a and d) The Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization and Abusiveness, prohibits staff from placing inmates at high risk for sexual victimization in involuntary segregated housing, unless the determination has been made that this housing assignment best protects the safety of the inmate and a review of other alternatives failed to provide adequate safety from likely abusers. The inmate may be placed in involuntary segregation for a time period, not to exceed 24 hours, in order to complete the assessment and find appropriate housing. Interviews with random staff and inmates revealed no incidents of involuntary housing being used for this purpose.

115.43(b) The policy requires any inmates placed in involuntary segregated housing have access to programs, privileges, education and work opportunities to the extent possible. If opportunities are restricted, staff will document which opportunities have been limited, the duration of the limitation, and the reasons for the limitations.

115.43(c) If no alternative housing can be found immediately, the inmate may normally be held in involuntary segregated housing for no more than 30 days.

115.43(d) The involuntary restricted housing of an inmate will be documented and will detail staff's basic concern for the inmate's safety, the reason why no alternative means of separation can be achieved, and the reason why the 30 days may need to be extended, if it does.

115.43(e) If an involuntary segregated housing assignment is made, a status review of the inmate by a Classification Officer will be completed every 30 days to determine if there is a continuing need to separate the inmate from the general population. All 30-day status reviews are documented.

At the time of the audit, there were no inmates assigned to involuntary segregated housing to separate them from likely abusers.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Screening for Risk of Sexual Victimization
and Abusiveness
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Objective Risk Assessment Instruments
Idaho Jail Standards
Interviews with random staff

Interviews with random inmates
Interview with Deputy Karl Green, IPREA Coordinator

REPORTING

Standard 115.51: Inmate reporting

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

115.51 (a)

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

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? Yes No

115.51 (c)

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

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.51(a) The Boundary County Detention Center's IPREA Policy, Reporting, clearly outlines multiple ways for inmates to privately report a sexual assault, sexual harassment, or retaliation from other inmates or staff for reporting sexual abuse or sexual harassment, and any staff neglect that may have contributed to sexual abuse or sexual harassment. Seven ways to report within the facility are listed in policy and there are two ways to report a sexual abuse or sexual harassment outside the agency listed in the policy. The reporting methods within the facility include Detention Deputy, Medical or Mental Health practitioners, other staff members, detention or agency administration, kites, personal letter to staff, and personal letter to administration. All methods are listed in the housing units and inmate handbook for inmates to see.

115.51(b) The Boundary County Detention Center's IPREA Policy has provided two methods for inmates to report outside the facility: third party or Boundary County Victim Services. The facility notifies inmates they can contact a family member, friend, or anyone else outside the agency that they feel comfortable calling. Inmates are rarely detained solely on civil immigration holds, but the agency has in policy that these inmates are provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

115.51(c) The Boundary County Detention Center's IPREA Policy, Reporting, requires all staff to accept reports made verbally, in writing, anonymously, and from third parties. All allegations are documented promptly upon receipt and reported to a supervisor.

115.51(d) The Boundary County Detention Center has in policy that staff can privately report to the IPREA Coordinator, Jail Commander, Sheriff, Undersheriff, or anyone else in the Chain of Command. Interviews with staff revealed that they all feel comfortable reporting privately to anyone in the Chain of Command, up to and including, the Sheriff.

Interviews with staff and inmates clearly demonstrate they are very knowledgeable about IPREA and the variety of methods to report sexual abuse and sexual harassment of inmates.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Reporting
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
IPREA Inmate Acknowledgement Form and random inmate signatures
IPREA flyers and posters
Interviews with random inmates
Interviews with random facility staff
Interview with Boundary County Victim Services
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.52: Exhaustion of administrative remedies

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

115.52 (a)

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

115.52 (b)

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

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

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

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)
 Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

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

115.52 (f)

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

immediate corrective action may be taken? (N/A if agency is exempt from this standard.)

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 inmate 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

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

The Boundary County Detention Center is exempt from this standard as it does not require an inmate to submit a grievance to report a sexual abuse or sexual harassment incident. If an inmate does submit a grievance, it is withdrawn from the grievance system and treated as a complaint rather than a grievance.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Reporting
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.53: Inmate access to outside confidential support services

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

115.53 (a)

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

115.53 (b)

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

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? 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*)

Instructions for Overall Compliance Determination Narrative

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

115.53(a and c) The Boundary County Detention Center has an MOU with Boundary County Victim Services in Bonners Ferry, Idaho to provide advocacy and in-person support services to a victim of sexual abuse through the forensic medical examination process as well as the investigatory interview process. The information for Boundary County Victim Services is posted in the housing units and interviews with random inmates revealed that the majority of inmates were aware there were advocacy services available, the calls were free or unmonitored, what services the group provides, and the extent of confidentiality they would have talking to the group.

The Boundary County Detention Center's IPREA Policy, Reporting, enables communication between the advocate and the victim in as confidential manner as is possible.

115.53(b) Prior to giving the inmate access to the advocate, the Boundary County Detention Center's IPREA Policy states that the agency explains to the inmate the extent that the communication will be monitored. This information is on a poster that is on the wall of each housing unit. The advocate is offered free of charge to the inmate. The facility will also explain to the inmate that information may be relayed from the victim advocate to the facility in order to initiate an investigation into the sexual abuse allegation in accordance with mandatory reporting laws.

There have been no forensic medical examinations done during the past twelve months and a victim's advocate has not been requested or used by inmates so there was no documentation for the auditor to review.

115.53(c) An MOU between Rawlings Community Counseling, Boundary County Victim Services and the Boundary County Sheriff's Office and Detention Center has been developed to outline the services that Rawlings Community Counseling and Victim Services provide and the responsibilities of the Detention Center. The MOU was signed by all three agencies.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff and inmate interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Reporting
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
IPREA informational brochure
Reporting posters displayed in housing units
Interviews with random inmates
Interviews with random staff
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator
Interview with Boundary County Victim Services

Standard 115.54: Third-party reporting

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

115.54 (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 an inmate? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.54(a) The Boundary County Detention Center allows third parties to report a sexual abuse or sexual harassment incident on behalf of an inmate. Policy states that "the facility shall publicly distribute

information on how to report sexual abuse and sexual harassment on behalf of an inmate on the Boundary County website". However, the information has not been posted on either the County website or the Sheriff's Office website. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should post information on how to report sexual abuse and sexual harassment on behalf of an inmate on the website, in the lobby, or elsewhere when the public can readily access the information.

The Boundary County Detention Center will send documentation of where this information is posted and what information is posted to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center has posted information on how to report sexual abuse and sexual harassment on behalf of an inmate on the website and in the lobby for the public to access.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

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

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? 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

115.61 (b)

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

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.61(a) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report requires staff to immediately report to the Supervisor any suspected or alleged sexual abuse or sexual harassment that occurred in a facility whether or not it is part of the agency. The policy also states that staff are required to report to the Supervisor any retaliation against inmates or staff who report an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff are required to write a report of the incident and forward it to the Shift Supervisor before the employee goes off shift. Interviews with random staff confirmed that they are aware of this policy.

115.61(b) Policy prohibits staff from revealing any information related to a sexual abuse or sexual harassment report to anyone other than designated supervisors or officials and, to the extent necessary, to make treatment, investigation, and other security and management decisions. Interviews with random staff confirmed they are aware of the policy.

115.61(c) Interviews with a Medical Health Provider within the facility confirmed the policy and practice that the medical staff are required to report sexual abuse that is disclosed to them by inmates and, at the initiation of services, must inform the inmate of their duty to report the incident and the limitations of confidentiality.

115.61(d) If the alleged victim is under the age of 18, the Boundary County Sheriff's Office reports the allegation of sexual abuse to the Idaho Department of Health and Social Services. If the alleged victim is a "vulnerable adult", the report will be made to Idaho's Adult Protection Services and if the alleged victim is a child under the age of 18, the report will be made to Idaho's Child Protective Services. Interviews with random staff confirmed they were aware of this reporting requirement.

115.61(e) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, states that all reports of allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are referred to the facility's designated investigators.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
- Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
- IPREA training curriculum
- Interviews with random staff
- Interviews with Medical Health Providers
- Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.62: Agency protection duties

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

115.62 (a)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.62(a) The Boundary County Detention Center reports that there have been no situations in the past twelve months where the facility determined an inmate was subject to a substantial risk of imminent

sexual abuse. Inmates at substantial risk of imminent sexual abuse are either immediately removed from the housing unit and reassigned to other appropriate housing that ensures the inmate's safety or the perpetrator is immediately reassigned to another housing unit, depending on the circumstances of the situation. Deputy Green also stated the agency would look at housing the inmate in another county if there wasn't a safe place to house the inmate in the facility.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interviews with random staff
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.63: Reporting to other confinement facilities

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

115.63 (a)

- Upon receiving an allegation that an inmate 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

115.63 (b)

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

115.63 (c)

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

115.63 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.63(a) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, requires the Jail Commander or Sheriff to report any sexual abuse allegation received regarding an inmate abused at another facility to the agency head where the sexual abuse is alleged to have occurred. The Boundary County Detention Center reports that no reports of this type were received during the audit cycle.

115.63(b) Policy requires this notice to occur as soon as possible but, in no case, will the report be made later than 72 hours after the allegation has been received.

115.63© The notification from the Boundary County Detention Center or Sheriff to the other agency is documented.

115.63(d) Boundary County Detention Center policy and practice require that allegations received from another facility of an inmate being sexually abused or sexually harassed in the Boundary County Detention Center are investigated in accordance with the IPREA standards. Interviews with Undersheriff Richard Stephens and Sgt. Jeffery Hoff confirmed this is the practice. The Boundary County Detention Center reports there have been no incidences of this in the twelve months prior to the audit

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander

Standard 115.64: Staff first responder duties

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

115.64 (a)

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

115.64 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.64(a) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, outlines in policy the responsibilities of all staff members receiving an allegation of sexual abuse. The policy details in depth the following guidelines for the first responder:

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

The Boundary County Detention Center reported that, in the past twelve months, there were no allegations that an inmate was sexually abused or sexually harassed while in the facility.

115.64(b) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, states that when the first staff responder is not a security staff member, he or she shall request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff immediately. There were no incidents in which a non-security staff member was a first responder to a sexual abuse during the audit cycle.

Interviews with random staff and supervisors confirmed that staff are very knowledgeable in their duties as a first responder to a sexual abuse or sexual harassment incident and have received the training in their yearly IPREA training.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interviews with random staff
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.65: Coordinated response

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

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership 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*)

Instructions for Overall Compliance Determination Narrative

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

115.65(a) The Boundary County Detention Center has detailed in IPREA Policy, Official Response Following an Inmate Report, the actions that need to be taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with investigator
Interviews with random staff
Interview with Deputy Karl Green, IPREA Coordinator

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

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

115.66 (a)

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

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

The Boundary County Sheriff's Office and Boundary County Detention Center do not have any collective bargaining agreements in place and have not had any at any time. Boundary County Sheriff's Office is non-union and, therefore, has no union collective bargaining agreements. Therefore, the auditor determined that this standard is not applicable to the Boundary County Sheriff's Office and Boundary County Detention Center.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Interview with Undersheriff Richard Stephens

Standard 115.67: Agency protection against retaliation

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

115.67 (a)

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

115.67 (b)

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

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates 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 inmate 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 inmate 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 inmate 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

115.67 (d)

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

115.67 (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

115.67 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.67(a and d) Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate's Report, prohibits retaliation against inmates or staff members who report sexual abuse or sexual harassment and require monitoring of the inmate or staff member for retaliation. The agency reported that the IPREA Coordinator is charged with monitoring retaliation. The Boundary County Detention Center reported that there have been no incidents of retaliation against an inmate or a staff member for reporting a sexual abuse or sexual harassment. An interview with the IPREA Coordinator assigned to conduct the monitoring reflected that the monitoring occurs whenever a report of sexual abuse or sexual harassment is made. The IPREA Coordinator will monitor the person and both policy and the IPREA Coordinator state that the monitoring will continue for a minimum of 90 days. Therefore, the auditor finds that the Boundary County Detention Center exceeds the standard as the policy is written to the higher PREA standard.

115.67(b) Boundary County Detention Center IPREA Policy requires the facility to protect inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. Such protections shall be afforded via direct monitoring by staff, housing changes to separate victims from abusers, removal of alleged staff members from contact with victims, emotional support services for inmates or staff members who fear retaliation, and investigation.

115.67(c) Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, requires that, following a report of sexual abuse, the agency shall act promptly to remedy any allegation of retaliation against any inmate or staff member who reports sexual abuse or sexual harassment.

115.67(d) Policy also requires the facility to take proper measures to protect any other individual who has cooperated with an investigation and expresses a fear of retaliation. During the past twelve months, there have been no incidents where a person has expressed fear of retaliation and needed monitoring.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.68: Post-allegation protective custody

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

115.68 (a)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.68(a) The Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report, prohibits staff from placing inmates who allege to have suffered sexual abuse in involuntary segregated housing unless the determination has been made that this housing assignment best protects the safety of the inmate and a review of other alternatives failed to provide adequate safety from likely abusers. When inmates are placed in involuntary segregation in order to separate the victim from the abuser, the placement is only for the time needed to finish the investigation and find alternative housing. The policy details the procedures taken to maintain compliance with this standard. Interviews with random staff and inmates revealed no incidents of involuntary segregated housing being used for this purpose during the twelve months prior to the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Official Response Following an Inmate Report

Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interviews with random staff
Interview with Deputy Richard Green, IPREA Coordinator

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

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

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] 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 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? 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

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? Yes No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (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

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.71 (h)

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

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (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

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (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 115.21(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*)

Instructions for Overall Compliance Determination Narrative

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

115.71(a) Boundary County Detention Center's IPREA Policy, Investigations, requires that investigators initiate an investigation immediately upon receiving an allegation of sexual abuse or sexual harassment. Administrative investigations are done by Sgt. Hoff or Deputy Green and criminal investigations are done by the Boundary County Detective Division. When staff are allegedly involved, the case is turned over to the Idaho State Police to conduct the investigation. This is done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.

115.71(b) There are two criminal investigators assigned to investigate sexual abuse and sexual harassment in the Boundary County Detention Center and two administrative investigators. None of the investigators have taken the NIC online course, "Investigating Sexual Abuse in a Confinement Setting" or the classroom version. Therefore, the auditor finds that the Boundary County Detention Center does not meet this part of the standard.

All criminal allegations are investigated by Detectives who have had extensive training on community sexual abuse investigations and use Miranda and Garrity warnings frequently in day to day investigations.

115.71(c) An interview with one of the criminal investigators confirmed that upon initiation of an investigation into a sexual abuse allegation, the investigator gathers and preserves direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interviews alleged victims, suspected perpetrators, and witnesses, and reviews prior complaints and reports of sexual abuse involving the suspected perpetrator. There were no criminal investigations into sexual abuse or sexual harassment for the auditor to review.

115.71(d) Unless the allegation is an immediately recognizable criminal investigation, investigations will be initiated as an administrative investigation. If there is any indication that the investigation appears to involve staff, Sheriff David Kramer or Undersheriff Richard Stephens will request the investigation be done by the Idaho State Police. The Boundary County Detectives are aware of when compelled interviews are an obstacle to prosecution as they use them in their regular job duties.

115.71(e) Boundary County Detention Center's IPREA Policy, Investigations, requires that the credibility of the alleged victim will be assessed on a case-by-case basis and shall not be determined by the person's status as an inmate. An interview with a criminal investigator stated that credibility is based on evidence, interviews, and the crime scene. Inmates who allege sexual abuse are not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation.

115.71(f) Policy requires that a thorough report be written at the conclusion of an administrative investigation that includes a description of what evidence was collected or reviewed, the reasons behind any credibility assessments, and any facts and findings the investigator discovered in the investigation. Investigators will also consider whether staff actions or failures to act contributed to the incident of abuse.

115.71(g and h) Boundary County Detention Center's IPREA Policy, Investigations, and an interview with a criminal investigator confirm that comprehensive reports are written at the conclusion of criminal investigations and the reports fully describe any physical, testimonial, and documentary evidence gathered, considered, or relied on. When it is practical, copies of documentary evidence are attached to the report. Substantiated criminal investigations are referred for prosecution, when warranted. During the past twelve months, there have not been any allegations of sexual abuse or sexual harassment in the Boundary County Detention Center to investigate.

115.71(i) All written reports referenced in 115.71(f and g) are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71(j) If an alleged abuser or victim leaves the facility or the employ of the agency, the investigation will continue and will not be terminated until it is officially closed with a determination.

115.71(l) When outside law enforcement investigators are assigned to an investigation, the Boundary County Sheriff's Office and Boundary County Detention Center will cooperate fully with the investigators and will stay informed as to the progress of the investigation.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Investigations
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with criminal investigator
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green

CORRECTIVE ACTION REQUIRED:

1. The Boundary County Detention Center should ensure that all administrative and criminal investigators take the online course, "Investigating Sexual Abuse in a Confinement Setting."
2. The Boundary County Detention Center will maintain documentation that all investigators have taken the course.

When all investigators have successfully completed the course, the Boundary County Detention Center will send verification of the successful completion to the auditor within 180 days of the date of this interim report.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

On January 21, 2020, the Boundary County Detention Center sent the auditor verification and copies of documentation that the corrective action noted in the interim report has been corrected as follows:

1. The Boundary County Detention Center ensure that all administrative and criminal investigators take the online course, "Investigating Sexual Abuse in a Confinement Setting.
2. The Boundary County Detention Center maintain documentation that all investigators have taken the course.

The auditor has reviewed all of the documents that were sent and the Boundary County Detention Center is now fully compliant with this standard.

Standard 115.72: Evidentiary standard for administrative investigations

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

115.72 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.72(a) Boundary County Detention Center's IPREA Policy, Investigations, requires the Boundary County Sheriff's Office to impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment in administrative investigations are substantiated. An interview with an investigator confirmed that this is the standard of determination of substantiation.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Investigations
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with a criminal investigator
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.73: Reporting to inmates

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

115.73 (a)

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

115.73 (b)

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

115.73 (c)

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

115.73 (d)

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

115.73 (e)

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

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.73(a) The Boundary County Detention Center's IPREA Policy, Investigations, requires, upon completion of any administrative or criminal investigation of sexual abuse or sexual harassment in the facility, the facility will inform the inmate as to whether the allegation was determined to be substantiated, unsubstantiated, or unfounded.

115.73(b) When an outside agency is brought in for an investigation of staff, the inmate will be notified of the outcome, when it is known.

115.73(c) Boundary County Detention Center's IPREA Policy, Investigations, requires that the inmate is notified whenever:

1. The staff member is no longer posted in the inmate's unit;
2. The staff member is no longer employed at the jail;
3. The Sheriff's Office learns that the staff member has been indicted on a charge related to sexual abuse within the facility;
4. The Sheriff's Office learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

The auditor finds that the Boundary County Detention Center exceeds this standard as the policy is written to the higher PREA standard.

There have been no allegations or investigations of staff members allegedly being involved in sexual abuse misconduct during the twelve months prior to the audit.

115.73(d) Boundary County Detention Center's IPREA Policy, Investigations, requires that all notifications to inmates described under this standard are documented.

115.73(e) The Boundary County Detention Center's obligation to report under this standard terminates if the inmate is released from the facility before the investigation has been completed.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets and exceeds the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Investigations
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

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

115.76 (a)

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

115.76 (b)

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

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.76 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.76(a - c) Boundary County Detention Center's IPREA Policy, Discipline, requires any staff member found in violation of the agency sexual abuse or sexual harassment policies is subject to progressive discipline which includes sanctions up to and including termination. Progressive discipline considers the circumstances, the staff member's disciplinary history, and sanctions imposed for comparable offenses by other staff with similar histories when imposing sanctions. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate.

115.76(d) All terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to any relevant licensing bodies. All terminations and resignations are reported to Idaho P.O.S.T and, if the case involves possible criminal charges, an investigation is done by Idaho P.O.S.T as well.

The Boundary County Detention Center reports that in the past twelve months, there has been no staff member from the facility that has been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. Additionally, there has been no staff member in the past twelve months that has been disciplined for violations of the agency sexual abuse or sexual harassment policies. There has been no staff member that has been reported to law enforcement, Idaho P.O.S.T., or any other licensing boards for violating agency policies.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Discipline
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.77: Corrective action for contractors and volunteers

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

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? 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

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.77(a) The Boundary County Detention Center's IPREA Policy prohibits contractors and volunteers who have engaged in sexual abuse from having contact with inmates. Violations are reported to any relevant licensing boards and if the abuse was criminal, the Boundary County Sheriff's Office will seek prosecution.

115.77(b) In any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the agency will take appropriate remedial measures and will consider whether the volunteer or contractor will be retained, dismissed or prohibited from contact with inmates.

The Boundary County Detention Center reported that there were no contractors or volunteers who were alleged to have violated the agency's sexual abuse or sexual harassment policies during the past twelve months.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Discipline
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.78: Disciplinary sanctions for inmates

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

115.78 (a)

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

115.78 (b)

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

115.78 (c)

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

115.78 (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 inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

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

115.78 (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

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
 Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.78(a) The Boundary County Detention Center has in place a comprehensive progressive inmate disciplinary process for rule and law violations by inmates. A formal disciplinary process will be given to inmates who have been found guilty in an administrative or criminal investigation of inmate-on-inmate sexual abuse or inmate-on-inmate sexual harassment.

115.78(b) If the inmate is found guilty in the disciplinary hearing, the sanctions imposed will consider the circumstances of the incident, the disciplinary history of the inmate, and the sanctions imposed on others for similar violations.

The Boundary County Detention Center reported that during the past twelve months, no allegations of inmate-on-inmate sexual abuse or sexual harassment were reported and, therefore, no disciplinary hearings were conducted for this offense.

115.78(c) Boundary County Detention Center's IPREA Policy, Discipline, requires that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the behavior when determining what type of sanctions, if any, should be imposed.

115.78(d) The facility does not provide therapy, counseling, or other interventions for inmate abusers.

115.78(e) The Boundary County Detention Center disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The Boundary County Detention Center reported that there were no instances of this type of sexual abuse during the past twelve months.

115.78(f) Inmates of the Boundary County Detention Center will not be disciplined for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith.

115.78(f) Agency policy prohibits all sexual activity between inmates but doesn't deem such activity sexual abuse unless it is determined that the activity was coerced. The Boundary County Detention Center reported that, during the past twelve months, there were no incidences of coerced sexual activity between inmates.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Discipline
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Inmate Rules and Disciplinary Process
Interview with Deputy Karl Green, IPREA Coordinator

MEDICAL AND MENTAL CARE

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

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

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
 Yes No NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?
 Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.81(a and c) When an inmate discloses sexual abuse either at an institutional facility or in a community setting, Boundary County Detention Center's IPREA Policy, Medical and Mental Health Care, requires the staff member receiving the information offer a follow-up meeting with the Medical Provider to the inmate within 14 days. If mental health care is needed, the facility will notify Boundary County Victim Services and they will arrange for the mental health care. The Detention Center reported that it offers the follow-up counseling to every inmate who discloses sexual abuse at intake. The auditor looked at the screening forms and found two instances where an inmate disclosed this information. The auditor interviewed the two inmates and one agreed that, after reporting sexual abuse in the community, the deputy offered follow-up counseling, and the inmate refused the follow-up. The other inmate stated that no follow-up counseling was offered but stated that none was needed.

115.81(d) Information related to sexual victimization that occurred in an institutional setting is not strictly limited to medical and mental health providers. After booking, the information shared with staff is strictly limited to informing security and management decisions, including treatment plans, housing, work, bed, education, and program assignments. All detention staff have access to the screening forms as they all classify inmates for housing and programs.

115.81(e) An interview with the Medical Health Provider verified that informed consent disclosures, when needed, are provided on-site by the Medical Providers. But, first, they would ask the inmate if he or she wanted it reported.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Medical and Mental Health Care
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green

Intake Risk Assessment Form
Interviews with Medical Health Providers
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with two inmates who had been victims of sexual abuse in the community

Standard 115.82: Access to emergency medical and mental health services

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

115.82 (a)

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

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

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

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.82(a) An interview with a Medical Health Provider confirmed that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The Boundary County Detention Center reported there were no inmate victims of sexual abuse in the last twelve months who needed emergency care so the auditor had no medical records to review.

115.82(b) If no Medical Providers are on duty in the Boundary County Detention Center at the time a report of recent sexual abuse, the First Responder will take preliminary steps to protect the inmate and will immediately notify the appropriate Medical Providers and EMT's, if needed. When necessary, all victims are transported to Boundary Community Hospital in Bonners Ferry, Idaho where SAFE or SANE exams are conducted. Inmates are offered a victim's advocate to accompany them through the exam and subsequent investigation.

115.82(c) An interview with a Medical Provider confirmed that inmate victims of sexual abuse are offered information about, and timely access to, emergency contraception and sexually transmitted infections prophylaxis, when appropriate. The Boundary County Detention Center reported there haven't been any instances during the past twelve months where inmates have needed this information or care.

15.82(d) In all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Medical and Mental Health Care
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interviews with Medical Health Providers

Standard 115.83: 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

115.83 (a)

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

115.83 (b)

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

115.83 (c)

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

115.83 (d)

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

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) Yes No NA

115.83 (f)

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

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)
 Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.83(a - c) Boundary County Detention Center's IPREA Policy, Medical and Mental Health Care, requires health evaluations and, as appropriate, treatment to all inmates who have been sexually abused in any correctional institution. A Medical Provider confirmed that the care is consistent with the community level of care and they will offer referrals to the inmate for continuing care, when necessary, when the inmate leaves the facility. However, they will not make the appointment for the inmate. The Boundary County Detention Center reported that, during the past twelve months, there have been no inmates that have requested referrals for continuing care upon release from the facility.

115.83(d -e) A Medical Provider confirmed that female inmate victims of sexual abuse are offered pregnancy tests and information about timely access to all lawful pregnancy related medical services. Some of this would be offered by the hospital at the time of a forensic exam. The Medical Provider also confirmed that inmates who have been sexually abused are offered tests for sexually transmitted infections, as medically appropriate. Medical Providers will provide ongoing treatment to inmates, when needed.

115.83(f) In all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Medical and Mental Health Care
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator
Interviews with Medical Providers

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

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

115.86 (a)

- 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

115.86 (b)

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

115.86 (c)

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

115.86 (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 §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (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*)

Instructions for Overall Compliance Determination Narrative

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

115.86(a) Boundary County Detention Center's IPREA Policy, Data Collection and Review, requires that a review team will review each incident of sexual abuse or sexual harassment that was investigated in the facility, unless the incident is unfounded.

115.86(b - e) The Review Team consists of the Jail Commander, IPREA Coordinator, and any other persons relevant to the investigation. The review occurs within 30 days of the incident. Recommended improvements are discussed and submitted to the Jail Commander, Sheriff, and IPREA Coordinator who will initiate the improvements or document the reason for not doing so. The Boundary County Detention Center reports that there have been no incident reviews done at the time of the audit.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Data Collection and Review
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with investigator
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA Coordinator

Standard 115.87: Data collection

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

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? Yes No

115.87 (b)

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

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? Yes No

115.87 (e)

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

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.87(a and c) Boundary County Detention Center's IPREA Policy, Data Collection and Review, requires that the agency collect accurate, uniform data for every allegation of sexual abuse at the facility and use a standardized instrument and set of definitions. The data collected will include, at a minimum, the data necessary to answer all of the questions from the most recent version of the Survey of Sexual Violence. The form that will be used will be the actual Survey of Sexual Violence Form.

115.87(b) Policy directs the IPREA Coordinator to aggregate the data annually and prepare a report.

115.87(d) The Boundary County Detention Center policy and practice require the collection of the data in accordance with this standard. The facility will create the annual report in January of each year for the previous calendar year. The Boundary County Detention Center has not had any incidents of sexual abuse during the year prior to the audit and, therefore, has not written an annual report.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Data Collection and Review
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Deputy Karl Green, IPREA Coordinator
Data Collection Instrument

Standard 115.88: Data review for corrective action

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

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 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 § 115.87 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 § 115.87 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

115.88 (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

115.88 (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

115.88 (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*)

Instructions for Overall Compliance Determination Narrative

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

This standard deleted for IPREA

Standard 115.89: Data storage, publication, and destruction

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

115.89 (a)

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

115.89 (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

115.89 (c)

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

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.89(a - b) Boundary County Detention Center's IPREA Policy, Data Collection and Review, requires that data collected according to this standard is securely retained and will maintain sexual abuse data for

at least 10 years after the date of the initial collection. The data is kept in a file in a locked locker and only Sgt. Hoff and Deputy Green have access.

Based on the information discovered in the facility's policies, documents received prior to the audit, observations made and documents reviewed during the onsite audit, as well as information obtained through staff interviews, the auditor has determined the facility meets the above standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Boundary County Detention Center's IPREA Policy, Data Collection and Review
Completed Pre-Audit Questionnaire submitted by Deputy Karl Green
Interview with Undersheriff Richard Stephens
Interview with Sgt. Jeffery Hoff, Jail Commander
Interview with Deputy Karl Green, IPREA 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 inmates, residents, and detainees? Yes No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

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

115.401(a-b) The audit conducted on July 29 - 31, 2019 is the first audit for the Boundary County Detention Center. The first audit is an IPREA audit rather than a PREA audit.

115.401(h, l, m, n) The auditor had access to, and the ability to observe, all areas of the audited facility and was permitted to request and receive copies of any relevant documents (including electronically stored information). The auditor was permitted to conduct private interviews with inmates and inmates were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.

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*)

Instructions for Overall Compliance Determination Narrative

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

Included in the report above

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 inmate 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.

Cynthia Malm

January 23, 2020

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.