PREA AUDIT REPORT ☐ INTERIM ☑ FINAL JUVENILE FACILITIES

Date of report: 4/27/17

Auditor Information	Auditor Information			
Auditor name: Dorothy X	anos			
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Email: dorothy.xanos@us.g	4s.com			
Telephone number: (813	3) 918-1088			
Date of facility visit: Ma	rch 13-14, 2017			
Facility Information				
Facility name: Pitt Region	nal Juvenile Detention Center			
Facility physical address	s: 451 West Belvoir Road, Greenville	, North Caro	lina 27834	
Facility mailing address	s: (if different from above)			
Facility telephone numb	per: (252) 830-6590			
The facility is:	☐ Federal	State		☐ County
	☐ Military	☐ Municip	oal	☐ Private for profit
	☐ Private not for profit			
Facility type:	☐ Correctional	□ Detenti	on	☐ Other
Name of facility's Chief	Executive Officer: Kimberely Du	ipree		
Number of staff assigne	ed to the facility in the last 12	months: 2	5	
Designed facility capaci	ity: 18			
Current population of facility: 10				
Facility security levels/inmate custody levels: Secure				
Age range of the popula	ation: 11-18			
Name of PREA Compliance Manager: Tyshanda Brown Title: Youth Counselor Technician				
Email address: tyshanda.brown@ncdps.gov Telephone number: (252) 830-6590				
Agency Information				
Name of agency: North O	Carolina Deparment of Public Safety			
Governing authority or	parent agency: (if applicable)			
Physical address: 512 N.	Salisbury Street, Raleigh, North Caro	lina 27604		
Mailing address: (if diffe	rent from above)			
Telephone number: (919) 733-2126				
Agency Chief Executive Officer				
Name: Erik A. Hooks Title: NCDPS Secretary				
Email address: erik.hooks@ncdps.gov Telephone number: (919) 733-2126				
Agency-Wide PREA Coordinator				
Name: Jordan-Williams, Charlotte Title: PREA Director				
Email address: charlotte.williams@ncdps.gov Telephone number: (919) 825-2754				

AUDITFINDINGS

NARRATIVE

Pitt Regional Juvenile Detention Center (Pitt RJDC) is an eighteen (18) bed secure detention facility for male and female residents governed by North Carolina Department of Public Safety (NCDPS). The detention center was opened in March 19, 1985 with a maximum population of ten (10) juveniles to serve several counties in eastern and northeastern North Carolina. Nine (9) years later, the detention center was expanded to an eighteen (18) bed facility. Pitt RJDC provides short term care for juveniles pending adjudication and/or disposition and commitment by the court or who are pending committed placements to a youth development center or transfer to another jurisdiction or agency. The average age is between 11-18 years old although juvenile jurisdiction could remain until the age of 21 and the average length of stay is fifteen (15) days. There were ten (10) male and female residents at the detention center at the time of the review.

The detention center is staffed with twenty-five (25) full-time and part-time employees. The certified detention staff consisted of: Acting Facility Director; (2) Shift Supervisors; Human Services Coordinator; (15) Youth Counselor Technicians, (3) non-certified staff (Administrative Assistant; Education Specialist and Food Service Staff) and three (3) staff vacancies.

The medical services consists of contracted medical staff (Greenville Healthcare) providing nursing services 2-3 times per week and available 24/7. The detention center has contracts with the local hospital for 24 hour emergency services. Also, the nurse provides health education and counseling about a variety of health topics. The medical staff provides medical care to include: completing the initial intake assessment, review intake referrals, routine and additional lab work as ordered, STD testing and treatment as indicated, updating immunization records, seasonal flu vaccinations, routine eye exams, dietary services and referrals, administration of medications/ treatments as prescribed, assessments of resident injuries and treatment as required, medical assessments and monitoring with any restraint or seclusion, assessments of somatic health complaints with treatment as indicated, develop treatment plans and provide medical discharge plans. Several on-site medical clinics occur including a weekly medical clinic, a weekly mental health clinic, and participation in weekly treatment planning meetings. There are contracted licensed mental health clinicians (PORT Human Service) that come to the detention center on an as needed basis to screen for suicide risk in new admissions, substance abuse services and for one-on-one counseling with the residents.

The educational department consists of an education specialist providing educational services licensed by the N.C. Department of Public Instruction. Following required State law all educational staff in "licensed" positions holds the appropriate licensure for their subject(s), grade level(s) or professional assignment(s). Upon arrival to the detention center each resident under goes a series of pre-tests to determine their level of performance and then given assignments based on the results of the pre-tests. The residents participate in an individual education program that is designed for them. The detention center provides an educational program during the week in order for residents to maintain their grades and the continuity of care upon return to their community schools. The program is designed for residents to have the opportunity to learn at the highest level possible. The instructional program encourages the residents to explore their abilities to learn, understand their cultural backgrounds, and enhance their future. Residents receive instruction in life skills, English, mathematics, social studies and science. Special Education services are offered to residents who qualify and counseling services are offered to all residents. During the school day, residents participate in a one hour structured physical activity which is led by a detention staff member. If a resident prefers not to participate in the physical activity they may go to their room during that time without a consequence.

Along with educational services, the detention center offers nutritional services that promote a healthy lifestyle and volunteer services that include student interns from East Carolina University, and other colleges in the area. Pitt RJDC provides religious services several times during the week and the resident's participation is optional. Church services are scheduled every Sunday provided by the local church (Koinonia Church). The detention center has at least five (5) volunteers from Koinonia Church and Biker Prison Ministry (who work with multiple facilities around the North Carolina area).

DESCRIPTION OF FACILITY CHARACTERISTICS

Pitt Regional Juvenile Detention Center (Pitt RJDC) is located in Greenville, North Carolina. The facility was opened in 1985 and consists of secure lobby area, administrative offices, intake area, storage area, large classroom area with four (4) single cells and a bathroom/shower area, teacher office, medical office, control room, large multi-purpose (activity/classroom) area with fourteen (14) single cells on the other side of the building, kitchen and pantry, laundry/storage area, two (2) bathroom/shower area an outdoor recreation area and designated visiting areas. The detention center is video monitored and recorded to ensure safety and security of all residents. The open floor plan has little to no blind spots and all areas are easily monitored by the control room except for the bathroom/shower areas. Residents have the capability to quietly read in their rooms if not interested in an outdoor activity. Pitt RJDC's fully trained detention staff assist the residents with the admission and coping with being detained at the detention center. Daily physical and mental activities are implemented. Programs and activities are offered to stimulate the residents to think, listen, learn and act responsibly. In addition, the detention staff provides life skills, coping skills, and setting goals as key tools to get the resident back on track.

SUMMARY OF AUDIT FINDINGS

The notification of the on-site audit was posted by January 30, 2017, six weeks prior to the date of the on-site audit. The posting of the notices was verified during the tour and verified by photographs received on the USB flash drive from the Facility Director. The photographs indicated notices were posted in various locations throughout the facility including the front entrance to the detention center, doorway in the intake/copy area, entrance to the multi-purpose/activity area and both male and female hygiene doors. This auditor did not receive any communications from the detention staff or the residents as a result of the posted notices. The Pre-Audit Questionnaire, policies, procedures, and supporting documentation were received by February 13, 2017. The documents, which were uploaded to a USB flash drive, were organized and easy to navigate. The initial review revealed the need for additional information in regard to the Pre-Audit Questionnaire and supporting documentation which did not sufficiently address some of the standards. After a discussion with the Acting Facility Director, Shift Supervisor, and Youth Counselor Technician/PREA Compliance Manager and providing a list of noted concerns, the Acting Facility Director sent the documentation prior to arrival to the detention center. Also several documents were provided during the on-site visit. Specific corrective actions during the on-site visit taken to address some of the deficiencies are summarized in this report under the related standards.

The on-site audit was conducted on March 13-14, 2017. An entrance briefing was conducted with the Acting Facility Director, Youth Counselor Technician/PREA Compliance Manager and DACJJ Director of Juvenile Facilities Operations. During the briefing, it was explained the audit process and a tentative schedule for the two (2) days to include conducting interviews with the detention staff and residents and reviewing the documentation. A complete guided tour of the detention center was conducted including the secure lobby area, administrative offices, intake area, storage area, classroom area, teacher office, medical office, control room, kitchen and pantry, multi-purpose/activity/dining area, outdoor recreation area, laundry/storage area, and eighteen (18) single cells. During the tour, residents were observed to be under constant supervision of the detention staff while involved in various activities. The detention center was not clean nor well maintained. Notification of the PREA audit was posted in all locations throughout the detention center as well as postings informing residents of the telephone numbers for reporting against sexual abuse and harassment and to call for victim advocate services. Cameras and video surveillance system enhance their capabilities to assist in monitoring blind spots and the review of incidents. There are cameras installed in several areas throughout the detention center. There were no cameras installed in the resident's rooms or shower/toileting area so residents are not seen on the surveillance system while showering or toileting, but can be viewed by same sex staff as they supervise the shower area. During the tour, it was observed all shower/toilet areas did allow for privacy. Also each resident's bedroom had a privacy flap for their window that allowed for privacy.

During the two (2) day on-site visit, there were a total of ten (10) residents in the detention center. All ten (10) residents were selected for the interview process. Residents were well informed of their right to be free from sexual abuse and harassment and how to report sexual abuse and harassment using several ways of communication such as trusted staff, administrative staff, family member, and the hotline. Also, the community victims' advocacy service and telephone number is available to the residents. There is evidence of Pitt RJDC's Acting Facility Director of obtaining a Memorandum of Understanding to provide confidential emotional support to residents who are victims of sexual abuse and forensic exams at the detention center. R.E.A.L Crisis Intervention, Inc. is the program identified to provide the victim advocacy services for the residents at the detention center. Vident Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim. Eighteen (18) staff including those from all three (3) shifts, supervisory staff, volunteer, contracted staff (teacher), medical and mental health staff, Acting Facility Director, Shift Supervisor, and Youth Counselor Technician/PREA Compliance Manager were interviewed during the on-site visit. Additionally, interviews were conducted via telephone with the NCDPS Secretary's representative and NCDPS PREA Coordinator prior to the on-site visit. Overall, the interviews revealed the detention staff is knowledgeable of the PREA standards and were able to articulate their responsibilities and their mandated duty to report.

At the end of the second day, an exit briefing with a summary of the findings was conducted with the DACJJ Director of Juvenile Facilities Operations, Acting Facility Director, and Youth Counselor Technician/PREA Compliance Manager. At the exit debriefing, it was discussed additional documentation was required for four (4) standards and it was determined this information would be sent to this auditor within the next two (2) weeks to be in compliance with all the PREA standards. The requested information was sent to this auditor by the detention center's Acting Facility Director prior to the submission of this report. This auditor reviewed all requested information and this detention center is in full compliance with the PREA Standards.

Number of standards exceeded: 2

Number of standards met: 36

Number of standards not met: 0

Number of standards not applicable: 3

Standard 115.311 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator \boxtimes Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) П Does Not Meet Standard (requires corrective action) Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 and NC General Statute 14-27.7 (Intercourse and sexual offenses with certain victims; consent no defense) outlines how each facility implements its approach to preventing, detecting and responding to all approaches of sexual abuse and harassment, including the definitions of prohibited behaviors as well as sanctions for staff, contractors, volunteers and residents who had violated those prohibitions. Additionally, the policy provided comprehensive guidelines and a training foundation for implementing each facility's approach to include the zero tolerance towards reducing and preventing sexual abuse and harassment of residents. NCDPS's PREA Office has also required each facility administrator statewide to designate at their facility a primary and an alternate PREA Compliance Manager. It is evident, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the residents in their care throughout the State of North Carolina. NC Department of Public Safety has a designated PREA Coordinator, her official title is PREA Director and reports directly to the General Counsel, NCDPS. The PREA Director works statewide to implement the PREA Standards and indicated she has sufficient time and authority to develop, implement and oversee the agency's efforts toward PREA compliance of over seventy (70) facilities with the support of the Department. The Pitt RJDC's Acting Facility Director completed an updated memorandum on February 1, 2017 to the NCDPS Office of PREA Administration, her designation of the Youth Counselor Technician and Shift Supervisor as her primary and alternate PREA Compliance Managers. Pitt RJDC's PREA Compliance Manager during her interview indicated she had sufficient time and authority to develop, implement and oversee the detention center's PREA compliance efforts to comply with the PREA standards. Additionally, she has created a PREA Reference Folder that is located in their control room containing the reporting process and forms for the detention staff. Also, the Acting Facility Director has created a PREA Kit (various items for first responders) that is located in the medical office. It was evident during the detention staff interviews, detention staff had been trained and were knowledgeable of NCDPS Sexual Abuse and Harassment Policy and R&P Document including all aspects of sexual abuse and sexual harassment in accordance with the requirements. Standard 115.312 Contracting with other entities for the confinement of residents Exceeds Standard (substantially exceeds requirement of standard) Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (requires corrective action)

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

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion

The documentation reviewed indicated that the Pitt Regional Juvenile Detention Center does not contract for the confinement of residents with private entities or other entities, including other government agencies, therefore this standard is not applicable to this detention center.

Standard 115.313 Supervision and monitoring

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.12 (Staffing) and GS 143B-709 (Security Staffing) contained the required information identifying the facility to develop a staffing plan to provide for adequate staffing levels to ensure the safety and custody of residents, account for departmental resident to staff ratios, physical plant, video monitoring, and federal standards. Additionally, the policies contained information identifying the facility shall comply with staffing requirements including exigent circumstances and supervisory staff conducting unannounced rounds during all shifts. According to the policy, Pitt RJDC's staff-to-youth ratios is identified as 1:8 during the resident waking hours and 1:16 during resident sleeping hours. Pitt RJDC's staffing plan was developed, implemented and approved in November 2016 and in compliance with the standard. An interview with the Acting Facility Director and the documentation confirmed on an annual basis there is a review of the detention center's staffing plan. During the initial documentation review, the detention center did not report deviations from the staffing plan during the past twelve (12) months, however, the detention center's staff-to-resident ratios varied due to the fluxuation of the resident population during the awake and sleep hours in the housing area. In most instances during the past twelve (12) months, the detention center exceeded the minimum requirements of 1:8 during the resident waking hours and 1:16 during resident sleeping hours. Minimum staff ratios are always maintained, the detention center has a mechanism in place for call outs and staff volunteer to stay over if needed.

Pitt RJDC is a secure detention center and utilizes constant video and staff monitoring to protect the residents from sexual abuse and harassment. The Acting Facility Director and both Shift Supervisors conduct and document unannounced rounds on all shifts and in all areas of the detention center to monitor and deter staff sexual abuse and harassment on a quarterly basis. All unannounced rounds are documented in the log books and an email is sent to the Acting Facility Director that contains information and observations of all areas of the detention center. The documentation, Acting Facility Director and staff interviews confirmed the process takes place in the detention center. After the on-site visit, the practice of the detention center conducting unannounced rounds on all shifts has been changed to a monthly basis in accordance with NCDPS policy and procedures. The Pitt RJDC's Acting Facility Director sent the documentation to this auditor prior to the submission of this report. The information was reviewed by this auditor and the detention center is in full compliance with this standard.

Standard 115.315 Limits to cross-gender viewing and searches

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
П	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.13 (Searches); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R & P) Document reviewed and approved in July 2012 – Section 1.8 (Searches) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2.7 (YDC Admission Procedures) and NCDPS DJJ and Deliquency Prevention Policy dated 5/19/04 – Section YD/YC 3.2 (Searches, Population Count and Juvenile Supervision) required each facility to maintain protocols on limited pat-down searches to same gender staff absent exigent circumstances, shower procedures, opposite gender announcing when entering dorm areas, and prohibiting the search of a transgender or intersex resident solely for the purpose of determining the resident's genital status. Additionally, the NCDPS PREA Office in its "Campaign of Awareness" sent a memorandum dated April 22, 2013 to all Directors and Managers on the development of a Cross Gender bulletin board document and announcement to be displayed and shared to all staff. There is a requirement for all staff to sign and date the "Cross Gender Annoucement and Acknowledgment" form acknowledging their completion of the orientation and limitations to cross gender viewing and searches. A review of the training documentation and detention staff interviews confirmed the training on pat down searches, cross-gender pat searches and searches of transgender and intersex residents, and prohibiting cross-gender strip or cross-gender visual body cavity searches of residents.

Most residents stated that they had never been searched by a detention staff member of the opposite sex nor had they ever seen a detention staff conduct a cross gender pat down search. Most detention staff and some residents interviews indicated that both male and female staff entering the multi-purpose/activity area consistently announce themselves. Detention staff and resident interviews confirmed residents are able to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing them. There have been no cross-gender pat down searches, cross-gender strip or cross-gender visual body cavity searches of residents in the past twelve (12) months. Also, there have been no exigent circumstances of cross-gender pat down, strip or visual body cavity searches conducted of residents in the past twelve (12) months. All staff were able to describe what an exigent circumstance would be but in most instances were not knowledgeable of the procedures for securing authorization to conduct such a search as well as the requirements for justifying and documenting those searches. Most staff interviews could identify the NCDPS policy on prohibiting staff from searching or physically examining a transgender or intersex resident for purpose of determining that resident's genital status. After the on-site visit, all staff were retrained on male and female staff announcing their presence went entering into the housing units, cross-gender pat searches and searches of transgender and intersex residents, and prohibiting cross-gender strip or cross-gender visual body cavity searches of residents. The Pitt RJDC's Acting Facility Director sent the documentation to this auditor prior to the submission of this report. The information was reviewed by this auditor and the detention center is in full compliance with this standard.

Standard 115.316 Residents with disabilities and residents who are limited English proficient

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions) contained procedures to be taken to ensure residents with disabilities or who are limited English proficient have an equal opportunity and are provided meaningful access to all aspects of the facility's efforts to prevent, protect and respond to sexual abuse and harassment. Additionally, the policy indicates each facility will not rely on resident interpreters, resident readers or any kind of resident assistants except when a delay in obtaining interpreters services could jeopardize a resident's safety. NCDPS has established a contract with Telephonic Interpreting for statewide services to provide residents with disabilities and residents who are limited English proficient with various interpreter services on an as needed basis. NCDPS DJJ pamphlet "Expect Respect: Your Safety in Juvenile Justice" and JJ Rack Card are provided to the residents and is available in both English and Spanish. The teachers could provide residents with disabilities with various services on an as needed basis. Detention staff training documentation including the Juvenile Educator Manual and NCDPS DJJ pamphlet contained information on providing appropriate explanations regarding PREA to residents based upon the individual needs of the youth. Some detention staff and resident interviews confirmed the detention center does not use resident assistants and there were no instances of resident interpreters or

readers being used in the past 12 months to report sexual abuse or sexual harassment. After the on-site visit, all detention staff were retrained on interpreter services provided at the detention center and the process on how to obtain these services. The Pitt RJDC's Acting Facility Director sent the documentation to this auditor prior to the submission of this report. The information was reviewed by this auditor and the detention center is in full compliance with this standard.

Standa	ard 115.	317 Hiring and promotion decisions	
		Exceeds Standard (substantially exceeds requirement of standard)	
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. Thes recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
Policy a Commis 2013 fro initially screenin pending check, c prior ins or an all detentio regardin and Info informat approve document were ask	nd Requirestioner of om the Offon new endergare criminal hild abuse titutional egation on staff's, ag past min remation Cotion to the differentiation coted and reduced and reduced seed and reduced for hire and reduced and reduced seed and reduced seed and reduced for the seed and reduced and r	rof the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment rements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Adult Corrections and Juvenile Justice in September 2013 and the Administrative Memorandum & Addendum dated 10-fice of PREA Administration contained all the elements required by this standard and all background checks are conducted mployees, current and promotion decisions of employees and contractors. NCDPS has extensive initial background ments that include the screening for criminal record checks (AOC & NCDL), possible checks on criminal convictions and charges, access to local, state and federal criminal databases to conduct background checks, psychological, driving records e registry checks, domestic violence check, Diana screening - sex offender registry checks, and best efforts to contact all employers for information on substantiated allegations of sexual abuse and any resignation during a pending investigation f sexual abuse. The agency conducts 5-year background checks for all employees and contractors. A sampled review of volunteer's and contractor's HR files had documentation on staff completing varied forms containing the questions sconduct (Applicant Verification form, Professional Reference Check, DPS Employment Statements and the PREA Notice Collection for Current Employees) that are completed during the hiring process. The HR staff send the criminal background of Central Office and receive an email on whether an individual is approved or disqualified. Once an individual is, the new employee begins the LMS training and orientation process. The Acting Facility Director's interview and onfirmed the detention staff hired had documented criminal background checks and the questions regarding past conduct esponded to during the hiring process. Additionally, volunteer and contractors who have contact with residents have inal background checks.	
Standa	ard 115.	318 Upgrades to facilities and technologies	
		Exceeds Standard (substantially exceeds requirement of standard)	
		Meets Standard (substantial compliance; complies in all material ways with the standard for the	

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

Pitt Regional Juvenile Detention Center has not been newly designed or had a substantial expansion or modification since August 20, 2012. There was no installation or updating of a video monitoring system, electronic surveillance system, or other monitoring technology at this facility. During the tour, cameras were observed throughout the detention and the Acting Facility Director brought up the video surveillance

relevant review period)

Does Not Meet Standard (requires corrective action)

system on her desk top for this auditor to review. This system will enhance their capabilities to assist in monitoring blind spots and the review of incidents. Additionally, this enables the detention staff to monitor residents more efficiently throughout the physical plant of the detention center.

Standa	ard 115	.321 Evidence protocol and forensic medical examinations
		Exceeds Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern must a recom	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
Policy a Commis NC Gen standard upon the reporting and Dep abuse an	nd Requissioner of eral Statuland idense victim's g to child eartment of sexual	of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment rements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Adult Corrections and Juvenile Justice in September 2013 – Section 2.1 (Reporting, Sexual Abuse and Harassment) and the Chapter 15B (Victims Compensation Article 1 Crime Victim's Compensation Act) contained the elements of the stiffed that all allegations of sexual abuse and sexual harassment be referred to the appropriate investigative agency based age. Additionally, policies requires protocols for informed consent, confidentiality, reporting to law enforcement, and abuse investigative agencies. Documentation and staff interviews confirmed Pitt County Sheriff's Department (PCSD) of Social Services (DSS) conducts the criminal investigations and administrative investigations of allegations of sexual harassment for residents under the age of 18 and they receive reports through their hotline. Residents 18 years of age are propriate law enforcement agency to investigate allegations of sexual abuse and sexual harassment.
Inc. to p (SANE sent a di services harassm this role as a vict	rovide co certified) rective to (commu- ent by an and com im advoc	of the Pitt RJDC's Acting Facility Director obtaining a Memorandum of Understanding from R.E.A.L Crisis Intervention, infidential emotional support to residents who are victims of sexual abuse at the detention center. Vident Medical Center provides the emergency and forensic medical examinations at no financial cost to the victim. Also, NCDPS PREA Office all facilities to establish a standardized role of the PREA Support Person (PSP) that will serve as an advocate to link nity based advocates or mental health professionals) and support to residents who report sexual abuse and sexual other resident, staff member, contractor or volunteer. The Acting Facility Director has designated two (2) detention staff for pleted the required form (OPA-A18) on November 29, 2016. These individuals are screened for appropriateness to serve ate and receive specialized training. Detention staff interviews and training documentation confirmed the PSP individuals he detention center.
Standa	ard 115	.322 Policies to ensure referrals of allegations for investigations
		Exceeds Standard (substantially exceeds requirement of standard)
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and

recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center) requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment. All staff are required to report all allegations, knowledge and suspicions of sexual abuse, sexual harassment, retaliation, staff neglect and/or violations of responsibilities that may have contributed to an incident or retaliation. All staff are required to refer all alleged incidents of sexual abuse or sexual harassment to Department of Social Services (DSS) for investigation and determination of child abuse and Pitt County Sheriff's Department (PCSD) for the determination of criminal charges. Staff refer all allegations of sexual abuse and sexual harassment to the Central Office and the PREA Office for completion of an administrative investigation. The appropriate information will be entered into their internal TROI system. The PREA policy can be found at the North Carolina state's website and information can be found in their PREA pamphlet (Expect Respect: Your Safety in Juvenile Justice) that is available in English and Spanish. The parent/guardian is provided with an information packet identifying the zero tolerance to sexual abuse or sexual harassment and the hotline information on how to report. Pitt RJDC had received no allegations of sexual abuse and sexual harassment resulting in a criminal investigation and/or an administrative investigation. Most detention staff interviews reflected and confirmed their knowledge on the reporting and referral process and policy's requirements on the agency who conducts the administrative and criminal investigation in response to an allegation of sexual abuse, sexual harassment and sexual misconduct.

Standard 115.331 Employee training

\boxtimes	Exceeds Standard (substantially exceeds requirement of standard)
	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.4 (Employee Training) requires an indepth PREA Training upon initially becoming an employee (entry level training) as well as refresher training annually. All the PREA training provided to employees statewide contains all eleven (11) topics consistent with this standard's requirements and is tailored to all facilities with the gender of their resident populations. Also, the staff receive training on professional and ethical boundaries (Daily Dozen) relating not only to PREA but to their role as an employee. The staff training documentation and staff interviews confirmed staff receives PREA training during initial training and during refresher training. All employees are trained as new hires regardless of their previous experience. All new employees receive the NCDPS Employee PREA brochure and sign the "PREA Acknowledgement Form" indicating they received the training and understand their responsibilities for all the different training modules and tested upon completion of the initial PREA training. A review of all detention staff and training education forms as well as detention staff interviews confirmed that detention staff are receiving their required PREA training. The detention staff interviews confirmed their comprehension of the PREA training and their obligation to report any allegation of the sexual abuse and/or sexual harassment. Employee training records are maintained electronically and certain training documents (NCDPS Human Resources On Boarding Checklist form and PREA Acknowledgement Form) are maintained in their personnel file. It is evident, the executive administration has taken the PREA Standards to another level and it is reflected in their commitment to protecting the residents in their care throughout the State of North Carolina by providing extensive training to all employees who work at their facilities.

Standard 115.332 Volunteer and contractor training

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
П	Does Not Meet Standard (requires corrective action)

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.5 (Training for Volunteers, Custodial Agents, Contractors, and Other Persons Providing Services to Residents) requires volunteers, interns and contractors who have contact with residents to receive indepth PREA training. All volunteers, interns and contractors receive the PREA training, PREA Volunteer brochure and sign the "PREA Acknowledgement Form" upon completion of the PREA training they received. Documentation confirmed they are aware of the detention center's requirement for confidentiality and their duty to report any incidents of sexual abuse and/or sexual harassment. Interviews with a teacher and a volunteer confirmed their knowledge of the PREA training.

Standard 115.333 Resident education

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.6 (Resident Education) requires residents to receive comprehensive age appropriate education information regarding safety, their rights to be free from sexual abuse, sexual harassment, retaliation, reporting and the agency's response to allegations within 10 days upon arrival. However, the assigned detention staff provides the residents with this information immediately upon arrival during their initial intake and orientation process. During the initial intake, the assigned detention staff utilizes the Juvenile Educator Manual and the "PREA Juvenile Sequence Checklist" form to review detailed information verbally with the resident and the resident signs the "Juvenile PREA Education Acknowledgement" form verifying receipt for all information regarding orientation to the detention center. Documentation of resident's signatures were reviewed and confirmed during resident interviews. Residents are provided a NCDPS brochure which includes information on prevention/intervention, self-protection, reporting and treatment/counseling and is available in Spanish for future reference. Most residents interviewed stated they received this information the same day they arrived at the detention center and identified the receipt of the pamphlet. The detention staff presents PREA information in a manner that is accessible to all residents and provides education on an ongoing basis individually or in a group session.

Standard 115.334 Specialized training: Investigations

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

corrective actions taken by the facility.

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.3 (Investigations) requires an administrative and/or criminal investigation for all allegations of sexual abuse or sexual harassment and requires staff to refer all alleged incidents of sexual abuse or sexual harassment to Pitt County Sheriff's Department (PCSD) for criminal investigations and NCDPS PREA Office and Department of Social Services (DSS) for administrative investigations. All investigators under go an extensive training prior to conducting administrative investigations which includes the NCDPS PREA Specialized Training: Investigating Sexual Abuse and Sexual Harassment. The detention center's PREA investigators when assigned conduct administrative investigations. There are two (2) staff at the detention center who have completed the NCDPS PREA Specialized Training: Investigating Sexual Abuse and Sexual Harassment. Documentation was reviewed and in compliance with the PREA requirements for specialized training for investigators who investigate allegations of sexual abuse and sexual harassment in confinement.

Standa	ard 115	.335 Specialized training: Medical and mental health care	
		Exceeds Standard (substantially exceeds requirement of standard)	
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.		
The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.7 (Specialized Medical/Mental Health Provider Training) requires PREA training and specialized training for medical and mental health staff. It was evident through the medical and mental health staff interviews they had received the basic PREA training provided to all staff and the specialized training offered by NCDPS (Preventing, Detecting, and Responding to Sexual Abuse of Youth in Confinement: The Role of the Mental Health Clinician). All six (6) medical and mental health staff signed the "Medical & Mental Health Care PREA Training Acknowledgement" form to acknowledge they received the training and understand their responsibilities in the event of an incident. The medical staff do not conduct forensic examinations.			
Standard 115.341 Screening for risk of victimization and abusiveness			
		Exceeds Standard (substantially exceeds requirement of standard)	
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions) requires prior to placement

recommendations must be included in the Final Report, accompanied by information on specific

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These

corrective actions taken by the facility.

as part of the screening process each resident is screened upon admission with an objective screening instrument for risk of victimization and sexual abusiveness within 72 hours. All residents are screened within twenty-four hours upon arrival at the detention center to determine placement and their special needs. Those residents who score vulnerable to victim or sexually aggressive are included into their alert system, as well as receiving further assessments, as identified. NCDPS "Admission and Placement Screening" form, medical and mental health assessment and various other forms are used in combination with information about personal history, medical and mental health screenings, conversations, classification assessments as well as reviewed court records and case files. Residents are reassessed within several days of their arrival and throughout their stay at the detention center. If the resident remains in the detention center beyond thirty (30) days, he or she will be reassessed again. The detention center's policies limits staff access to this information on a "need to know basis". Detention staff interviews confirmed a screening is completed on each resident upon admission to the detention center. Residents reporting prior victimization, according to detention staff, are referred immediately for a follow-up with medical or mental health personnel. Although there have been no transgender or intersex residents admitted to the detention center within the past twelve (12) months, detention staff were aware of giving consideration for the resident's own views of their safety in placement and programming assignments. Most resident interviews and the documentation revealed that risk screenings are being conducted on the same day as the admission.

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 3.3 (Admissions) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 2 (R&P/YC 2: YDC Admissions and Assessments) and NCDPS DJJ and Delinquency Prevention Policy dated 4/15/07 - Section PS/YC 3.0 (Behavior Expectations) prohibits gay, bi-sexual, transgender and intersex residents being placed in a dorm area, bed or other assignments based solely on their identification or status. In addition, the policy describes the screening and assessment process and how that information, along with information derived from medical and mental health screening and assessments, records reviews, database checks, conversations and observations, is used to determine a resident's appropriate placement, housing and bed assignments, as well as work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse. The assigned detention staff utilize various forms, the Admission and Placement Screening, Mental Health Assessment Summary to name a few and any other pertinent information during the resident's admission process. Also, the detention staff determine placement of residents in a specific sleeping assignment according to their risk level (low, medium or high). The detention staff interviews described how information is derived from the various forms and the initial medical and mental health/substance abuse screening forms to determine placement and risk level. Pitt RJDC has two (2) housing units, on one side of the building there are four (4) single cells with bathroom/shower area for female residents and on the other side of the building there are fourteen (14) with two (2) bathroom/shower areas for male residents. Isolation is not utilized at the detention center as a means of protective custody.

Standard 115.351 Resident reporting

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) and NCDPS DJJ and Delinquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility) provides multiple internal ways for residents to report sexual abuse and harassment retaliation, staff neglect or violation of responsibilities that may have contributed to such incidents. Residents are informed verbally and in writing on how to report sexual abuse and sexual harassment. These various ways of reporting include advising an administrator, a staff member, telephoning the hotline number, placing a written complaint in the grievance box and third party. Additionally, residents are provided with access to a locked grievance box with grievance forms, envelopes addressed to (DSS, PREA Office, Facility Director & Director of Facility Operations), posting of the PREA information (reporting resources) and pamphlet. Resident interviews indicated several ways to report sexual abuse and sexual harassment by telephoning the hotline, speak with a staff they trust or third party. Some residents identified the grievance box as a means to report sexual abuse and sexual harassment. Most resident and detention staff interviews along with the resident's pamphlet and supporting documentation verified compliance with this standard.

Standard 115.352 Exhaustion of administrative remedies

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.16 (Grievance Process) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process) describes the orientation residents receive explaining how to use the grievance process to report allegations of abuse and has administrative procedures/appeal process for dealing with resident's grievances regarding sexual abuse or harassment. Residents may place a written grievance or complaint in the locked grievance box located in both housing units of the detention center. The detention center has a multi-layered grievance process enabling timely response and layers of review. The policies and procedures describe an unimpeded process. Residents are not required to utilize an informal process for reporting allegations of sexual abuse or sexual harassment nor are they required to submit it to the staff member involved in the allegation. Some resident interviews and documentation confirmed there is a grievance process relating to sexual abuse or sexual harassment and a written complaint can be placed in the grievance box. Residents indicated they would contact a trusted detention staff or telephone the hotline in relation to sexual abuse or sexual harassment complaints. There have been no grievances relating to sexual abuse or sexual abuse or sexual harassment received in the past twelve (12) months.

Standard 115.353 Resident access to	outside confidential s	support services
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Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.8 (Victim Support); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 - Section 2.7 (Telephone and Mail) and Section 2.8 (Visitation) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 4.4 (Visitation) and Section 4 (R&P/YD 4: Legal Representation) ensures that residents are provided access to outside confidential support services, legal counsel and parent/guardian. NCDPS continues to collaborate with NCCASA (North Carolina Coalition Against Sexual Abuse) to establish advocacy services, education and training statewide. There is evidence of Pitt RJDC's Acting Facility Director obtaining a Memorandum of Understanding from R.E.A.L Crisis Intervention, Inc. to provide confidential emotional support to residents who are victims of sexual abuse at the facility. Vidant Medical Center (SANE certified) provides the emergency and forensic medical examinations at no financial cost to the victim. There have been no calls from residents to outside services in the past twelve (12) months. Resident interviews confirmed they have reasonable and confidential access to their attorneys and reasonable access to their parent/guardian either through visitation, correspondence or by telephone. The detention center provides weekly calls to parents/legal guardians, provides for the toll free hotline to report sexual abuse, permits parental/legal guardians visitation, and letter writing to parents/ legal guardians. The detention center's postings contained limited information of the outside services. Resident interviews revealed knowledge of how to access outside services but limited knowledge of what kind of services are provided to them. The detention staff will be providing additional education to future residents on victim advocate services during their orientation process and the postings have been updated to include information of the outside sources. The Pitt RJDC's Acting Facility Director sent the documentation to this auditor prior to the submission of this report. The information was reviewed by this auditor and the detention center is in full compliance with this standard.

Standard 115.354 Third-party reporting

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) identifies the Department's third party reporting process and instruct staff to accept third party reports. NCDPS website provides the public with information regarding third-party reporting of sexual abuse or sexual harassment on behalf of a resident. In addition, the Department has established a confidential webpage for employees to report allegations fraud, waste, abuse, misconduct or mismanagement in the department and these concerns may be reported anonymously. The detention staff provides the parent/guardian with a packet containing varied forms, victim advocate services and third-party reporting information. Resident interviews confirmed their awareness of reporting sexual abuse or harassment to others outside of the detention center including access to their parent(s)/legal guardian(s) and attorney. Additionally, they are instructed to report allegations of sexual abuse and sexual harassment to a trusted adult, parent/legal guardian, and/or attorney. All detention staff interviews were able to describe how reports may be made by third parties.

Standard 115.361 Staff and agency reporting duties

Exceeds Standard (substanti	ally exceeds requirement of standard)
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		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern must a recomi	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 - Section 2.1 (Reporting Sexual Abuse and Sexual Harassment) and NCDPS DJJ and Deliquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section 1.7 (Availability for Reporting Mechanisms in a Facility) identified the reporting process for all staff to immediately report any knowledge, suspicion or information they receive regarding sexual abuse and harassment, retaliation against residents or staff who report any incidents or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. All detention staff are mandated reporters and random staff interviews confirmed the detention center's compliance with this standard. All detention staff receive information on clear steps on how to report sexual abuse, sexual harassment and to maintain confidentiality through the detention center protocol and/or training. The detention staff would complete an incident report with the details of any incidents that would occur in the detention center in compliance with this standard. Additionally, interviews with medical and mental health staff confirmed their responsibility to inform residents under 18 years old of their duty to report and limitations of confidentiality.		
Standa	ard 115	362 Agency protection duties
		Exceeds Standard (substantially exceeds requirement of standard)
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	detern must a recomi	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.
The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 6 (R&P/YD 6: Non-Disciplinary, Internal Grievance Process) requires that immediate action to be taken upon learning that a resident is subject to a substantial risk of imminent sexual abuse. There were no residents determined to be subject to substantial risk of imminent sexual abuse in the past twelve (12) months. Documentation and interviews with the Acting Facility Director and other random selected detention staff were able to articulate, without hesitation, the expectations and requirements of the policies and PREA Standards, upon becoming aware that a resident may be subject to a substantial risk of imminent sexual abuse. Detention staff indicated if a resident was in danger of sexual abuse or at substantial risk of imminent sexual abuse, they would act immediately to ensure the safety of the resident, separate from the alleged perpetrator and contact their immediate supervisor. Additionally, the resident would be referred for mental health services. All resident interviews reported they feel safe at this detention center and none had ever reported to staff that they were at substantial risk of imminent sexual abuse.		
Standa	ard 115	363 Reporting to other confinement facilities
		Exceeds Standard (substantially exceeds requirement of standard)

	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		
	determ must a recomi	discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific cive actions taken by the facility.		
Policy a Commis Harassm while co NCDPS	The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 - Section 1.11 (Allegation of Juvenile Sexual Abuse or Sexual Harassment at Former Center) requires the Facility/Detention Director, upon receiving an allegation that a resident was sexually abused while confined at another facility, to notify the head of the other facility where the alleged abuse occurred and to report it in accordance with NCDPS policies and procedures. The Acting Facility Director has received no allegations that a resident was abused while confined at another facility nor were there any allegations received from another facility during the past twelve (12) months.			
Standa	ırd 115.	364 Staff first responder duties		
		Exceeds Standard (substantially exceeds requirement of standard)		
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		
	determ must a recomi	discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific cive actions taken by the facility.		
The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 - Section 3.1 (First Response to Concerns of Sexual Abuse, Sexual Harassment and Voyeurism) and NCDPS Sexual Abuse Incident Response Checklist for First Responder requires staff to take specific steps to respond to a report of sexual abuse including; separating the alleged victim from the abuser; preserving any crime scene within a period that still allows for the collection of physical evidence; request that the alleged victim not take any action that could destroy physical evidence; and ensure that the alleged abuser does not take any action to destroy physical evidence, if the abuse took place within a time period that still allows for the collection of physical evidence. There have been no allegations of sexual abuse during the past twelve (12) months. Random detention staff and first responder interviews validated their technical knowledge of actions to be taken upon learning that a resident was sexually abused. Also, every interviewed detention staff, without hesitation, described actions they would take immediately and these steps were all consistent with NCDPS policies and procedures. It was evident that detention staff have been trained in their responsibilities as first responders.				
Standa	ırd 115.	365 Coordinated response		
		Exceeds Standard (substantially exceeds requirement of standard)		
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 - Section 3 (Youth Development Center and Detention Center Sexual Abuse and Sexual Harassment Policy); NCDPS Sexual Abuse & Harassment Coordinated Response Overview and Pitt RJDC's Sexual Abuse Institutional Response Plan provides a written coordinated response system to coordinate actions taken in response to an incident of sexual abuse among staff first responders, administration, executive staff and contacting medical and mental health outside sources. Pitt RJDC's detention staff have a system in place providing the staff with clear actions to be taken by each discipline for accessing, contacting administrative staff, medical and mental health staff, contacting DSS and law enforcement, victim advocate services, & parent/guardian and a number of other individuals. Interviews with the Acting Facility Director and other detention staff validated their technical knowledgeable of their duties in response to a sexual abuse or a sexual harassment.

Standard 115.366 Preservation of ability to protect residents from contact with abusers			
		Exceeds Standard (substantially exceeds requirement of standard)	
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	deterr must a recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	
		Department of Public Safety (NCDPS) does not engage in the collective bargaining process regarding any violation of icy regarding PREA, therefore this standard is not applicable.	
Stand	ard 115	.367 Agency protection against retaliation	
		Exceeds Standard (substantially exceeds requirement of standard)	
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	deterr	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These	

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.8 (Victim Support) and Section 1.15 (Retaliation) requires the protection and monitoring of residents and staff who have reported sexual abuse and sexual harassment or who have cooperated in a sexual abuse or harassment investigation. NCDPS policies and procedures prohibits retaliation against any staff or resident for making a report of sexual abuse as well as retaliation against a victim who has suffered from abuse. The monitoring at a minimum will take place for a period of 90 days or longer, as needed. This monitoring would include resident disciplinary reports, bedroom and program changes,

recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

negative performance reports as well as reassignments of detention staff. The Acting Facility Director is responsible with overseeing the monitoring of the conduct or treatment of residents or detention staff who reported the sexual abuse and of residents who were reported to have suffered sexual abuse to determine if changes that may suggest possible retaliation exist. She is responsible for assigning a PREA Support Person (PSP) that will serve as an advocate to link services (community based advocates or mental health professionals) and support to residents who report sexual abuse and sexual harassment by another resident, detention staff member, contractor or volunteer. The Acting Facility Director has designated two (2) detention staff for this role and completed the required form (OPA-A18). These individuals are screened for appropriateness to serve as a victim advocate and receive specialized training. Detention staff interviews and training documentation confirmed the PSP individuals and their role in the detention center. The PSP individuals will be completing several forms depending on whether it is a detention staff or resident retaliation monitoring. Upon completion of the investigation, a PSP individual will complete a "PREA Sexual Abuse and Harassment Retaliation Report" form [Staff (OPA-I22) or Resident (OPA-I24)]. There were no incidents of retaliation in the past twelve (12) months.

Standard 115.368 Post-allegation protective cus	stody
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	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.2 (Response) & Section PS/YC 3.0 (Behavior Expectations) and NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 2.3.13 (Temporary Confinement) contained information on post-allegation protective custody or guidelines for moving a resident to another facility as a last measure to keep residents who alleged sexual abuse safe and only until an alternative means for keeping the resident safe can be arranged. The detention center restricts any isolation placement, however, Pitt RJDC's has the capabilities to provide protective housing for a resident as a last resort. No residents who have alleged sexual abuse in the past twelve (12) months were secluded or isolated from the other residents. The residents would be placed in another facility or detention staff would be placed on "no contact with resident."

Standard 115.371 Criminal and administrative agency investigations

	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.3 (Investigations) and NCDPS Sexual Abuse & Harassment Coordinated Response Overview require staff to refer all alleged incidents of sexual abuse, harassment or misconduct to the

Department of Social Services (DSS) for investigation and determination of child abuse and Pitt County Sheriff's Department (PCSD) for the determination of criminal charges. Detention staff refer all allegations of sexual abuse and harassment to the Central Office and the PREA Office for completion of an administrative investigation. Additionally, the detention center's PREA investigators could be assigned to conduct the administrative investigation. There have been no reported investigations that appeared to be criminal and referred for prosecution of alleged detention staff's or residents inappropriate sexual behavior that occurred in this detention center in the past twelve (12) months. It was evident, the detention staff reported incidents as required and reports are maintained for as long as the alleged abuser is incarcerated or employed by the detention center, plus 5 years unless the abuse was committed by a juvenile and applicable laws require a shorter period of retention.

Standa	ard 115	.372 Evidentiary standard for administrative investigations		
	☐ Exceeds Standard (substantially exceeds requirement of standard)			
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		
	Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. The recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
Policy a Commis standard prepond Facility informa	nd Requi ssioner of l. Depart erance of Director	of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment rements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Adult Corrections and Juvenile Justice in September 2013 – Section 2.3 (Investigations) contains all the elements of the ment of Social Services (DSS) and NCDPS PREA Office investigates the allegation and indicates a standard of a fithe evidence or a lower standard of proof for determining if allegations are substantiated. An interview with the Acting indicated that they conduct fact finding investigations, make conclusions following the investigation and provide the elements of the Central Office and the PREA Office for consultation with legal and human resources to determine ons.		
Standa	ard 115	.373 Reporting to residents		
		Exceeds Standard (substantially exceeds requirement of standard)		
		Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)		
		Does Not Meet Standard (requires corrective action)		
	detern	r discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These		

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 2.3 (Investigations) and Section 1.8 (Victim Support) requires that any resident who makes an allegation that he suffered sexual abuse is informed in writing contains the process for notifying residents whether the allegation proves substantiated, unsubstantiated or unfounded following an investigation. NCDPS PREA Office has a process to notify the resident. The policies further requires that following a resident's allegation that a staff member who has committed sexual abuse against the resident, the facility informs the resident unless the allegations are "unfounded" whenever the staff member is no longer posted within the resident's housing area; the staff member is no longer employed at the facility; Pitt County Sheriff's Department (PCSD) learns that the staff member has been indicted or convicted on a charge related to sexual abuse within the facility. With regard to

recommendations must be included in the Final Report, accompanied by information on specific

corrective actions taken by the facility.

investigations involving resident-on-resident allegations of sexual abuse, Pitt County Sheriff's Department (PCSD) notifies the Acting Facility Director who will then inform the resident whenever the detention center learns that the alleged abuser has been indicted or convicted on a charge related to sexual abuse within the detention center. There have been no reported investigations of alleged detention staff or resident's inappropriate sexual behavior that occurred in this detention center during the past twelve (12) months. The Acting Facility Director validated her technical knowledge of the reporting process during his interview.

Standard 115.376 I	Disciplinary	sanctions	for staff
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	Exceeds Standard (substantially exceeds requirement of standard)
\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
	Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.14 (Discipline) disciplinary sanctions up to and including termination for violating the facility's sexual abuse or harassment policies. The policy also mandates that the violation be reported to the PREA Office and law enforcement if criminal in nature. All disciplinary sanctions are maintained in the employees HR file in accordance with NCDPS policy and procedures. Termination is the presumptive sanction for staff who have engaged in sexual abuse. Additionally, staff may not escape sanctions by resigning. Staff who resign because they would have been terminated, are reported to the local law enforcement, unless the activities were not clearly criminal. There have been no employees terminated in the past twelve (12) months for violation of the detention center's sexual abuse or harassment policies. The Acting Facility Director interview validated her technical knowledge of the reporting process was consistent with NCDPS policy and procedures.

Standard 115.377 Corrective action for contractors and volunteers

Exceeds Standard (substantially exceeds requirement of standard)
Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.14 (Discipline) requires that volunteers and contractors in violation of the facility's policies and procedures regarding sexual abuse and harassment of residents will be reported to DSS, NCDPS PREA Office, and local law enforcement unless the activity was clearly not criminal and to relevant licensing bodies. Additionally, the policies requires the facility/detention staff to take remedial measures and prohibit future contact with residents in the case of any violation of the facility/detention center's sexual abuse and harassment policies by contractors or volunteers. This was verified during an interview with the Acting Facility Director. There have been no volunteers or contractors reported in the past twelve (12) months for engaging in sexual abuse or harassment of a resident.

Standard 115.378 Disciplinary sanctions for residents Exceeds Standard (substantially exceeds requirement of standard) \boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (requires corrective action) Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility. The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.14 (Discipline); NCDPS Division of Juvenile Justice (DJJ) Detention Policy and Requirements and Procedures (R&P) Document reviewed and approved in July 2012 – Section 2.3 (Rules and Discipline); NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R & P) Document – Section 2 (R&P/YC 2: YDC Admission and Assessments) and NCDPS DJJ and Deliquency Prevention Abuse and Neglect Policy and Requirements and Procedures (R&P) Document – Section PS/YC 3.0 (Behavior Expectations) any resident found to have violated any of the agency's sexual abuse or sexual harassment policies will be subject to sanctions pursuant to the behavior management program. Pitt RJDC's detention staff provides each resident with information that includes their rights and responsibilities, a disciplinary list of violations, disciplinary procedures and transfers. Residents will be offered therapy, counseling or other interventions designed to address and correct the underlining reasons for their conduct. There have been no administrative or criminal findings of guilt for resident-on-resident sexual abuse that have occurred at the detention center in the past twelve (12) months. The Acting Facility Director indicated that residents may also be referred for prosecution if the allegations were criminal. Standard 115.381 Medical and mental health screenings; history of sexual abuse Exceeds Standard (substantially exceeds requirement of standard) \boxtimes Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period) Does Not Meet Standard (requires corrective action)

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

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions) and NCDPS DJJ Youth Development Center Policy and Requirements and Procedures (R&P) Document – Section 1.4 (Mental Health Services) require medical and mental health evaluations and as appropriate, treatment is offered to all residents victimized by sexual abuse and ensure confidentiality of information. Residents who report prior sexual victimization or disclose prior incidents of perpetrating sexual abuse, either in an institution or in the community, are required to be offered a follow-up with a medical or mental health practitioner within 14 days of admission/screening. Medical and mental health staff complete various admission screening forms (i.e. Healthcare Services Medical Screening Interview, Healthcare Services Medical Progress Note, MAYSI, Suicide Risk Screening, and Healthcare Services Admission History and Physical Examination) during the initial intake process including informed consent disclosures. There were no residents who disclosed prior victimization during their initial screening process. Medical and mental health staff interviews confirmed that although there were no disclosures, all residents were offered follow-up meetings with medical and mental health providers.

Stand	ard 115	.382 Access to emergency medical and mental health services	
☐ Exceeds Standard (substantially exceeds requirement of standard)			
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. The recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
Policy a Commi Respon Require Compet and tim standard medical staff. A Crisis In	and Requisioner of sector Consensus an asstion A sely access ds of care a staff havadditional antervention	w of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment irements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and f Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions); Section 3.1 (First cerns of Sexual Abuse, Sexual Harassment and Voyeurism); NCDPS DJJ Youth Development Center Policy and d Procedures (R&P) Document – Section 1.4 (Mental Health Services) and NC General Statute Chapter 15B (Victims rticle 1 Crime Victim's Compensation Act) requires resident victims of sexual abuse are offered timely information about is to emergency contraception and sexually transmitted disease prophylaxis, in accordance with professionally accepted where medically appropriate and unimpeded access to emergency medical treatment and crisis intervention services. The real protocol in place to assist in expediting a resident to the emergency room with specific documentation for the detention ly, documentation provided confirmed treatment services are provided to every victim without financial cost. R.E.A.L on, Inc. is the program identified to provide the victim advocacy services for the residents at the detention center. Vidant SANE certified) provides the emergency and forensic medical examinations.	
Standa	ard 115	.383 Ongoing medical and mental health care for sexual abuse victims and abusers	
		Exceeds Standard (substantially exceeds requirement of standard)	
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)	
		Does Not Meet Standard (requires corrective action)	
	deterr must a recom	or discussion, including the evidence relied upon in making the compliance or non-compliance mination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion also include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific tive actions taken by the facility.	

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 3.2 (Medical Evaluation and Forensic Mental Health Evaluation Following Allegations of Sexual Abuse, Sexual Harassment and/or Voyeurism) and Section 3.3 (Support of the Resident Post-Evaluation for Sexual Abuse, Sexual Harassment and/or Voyeurism) requires ongoing medical and mental health care for sexual abuse victims and abusers. Additionally, the policy requires the facility to offer medical and mental health evaluations and appropriate follow-up treatment. Victims of sexual abuse will be transported to Vidant Medical Center where they will receive treatment and where physical evidence can be gathered by a certified SANE medical examiner. There have been no investigations of alleged resident's sexual abuse that occurred in this detention center in the past twelve (12) months. There is a process in place to ensure medical and mental health staff track on-going medical and mental health services for victims who may have been sexually abused. The medical and mental health staff have a protocol in place to assist residents and their families upon discharge from the detention center to continue services if needed.

Standa	ırd 115.	386 Sexual abuse incident reviews
		Exceeds Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	determ must a recomm	discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific ive actions taken by the facility.
Policy a Commis 2.3 (Invo every se RJDC's There ha twelve (nd Requiresioner of estigations xual abus Sexual Auce been result)	of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment rements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Adult Corrections and Juvenile Justice in September 2013 – Section 1.9 [PREA Compliance Manager (PCM)] and Section and NCDPS Sexual Abuse & Harassment Coordinated Response Overview requires a PREA Post Incident Review of eallegation at the conclusion of all investigations, except those determined to be unfounded within thirty (30) days. Pitt buse Team consists of the Acting Facility Director, both Shift Supervisors, medical and mental health representatives. The investigations of alleged detention staff's or resident's sexual abuse that occurred in this detention center in the past as. The detention staff interviews confirmed they would document their review on the "PREA Post Incident Review" form spects of an incident.
Standa	nrd 115.	387 Data collection
		Exceeds Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)
	determ must a recomm	discussion, including the evidence relied upon in making the compliance or non-compliance nination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion lso include corrective action recommendations where the facility does not meet standard. These mendations must be included in the Final Report, accompanied by information on specific ive actions taken by the facility.
Policy a Commis accurate NCDPS answer a	nd Requir sioner of , uniform PREA Da all question	of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment tements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions) requires the collection of data for every allegation of sexual abuse. The Acting Facility Director inputs information into the TROI system and the frector obtains the data from this system relating to PREA. The NCDPS PREA Director has a data collection instrument to ms for the U.S. Department of Justice Survey of Sexual Abuse Violence. A review of the 2015 annual report revealed it d in accordance with this standard.
Standa	ırd 115.	388 Data review for corrective action
		Exceeds Standard (substantially exceeds requirement of standard)
	\boxtimes	Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)
		Does Not Meet Standard (requires corrective action)

The initial review of the North Carolina Department of Public Safety (NCDPS) Juvenile Justice Facilities Sexual Abuse and Harassment Policy and Requirements and Procedures (R&P) Document reviewed and approved by both the Director of Juvenile Facility Operations and Commissioner of Adult Corrections and Juvenile Justice in September 2013 – Section 1.10 (General Provisions) requires the review of data for corrective action to improve the effectiveness of its prevention, protection and response policies, practices and training. A review of the 2015 Annual Report indicated compliance with the standard and included all of the required elements. The NCDPS 2015 Annual Report is posted on the NCDPS Website for public review. The Acting Facility Director monitors collected data to determine and assess the need for any corrective actions. The 2015 annual report was readily available on the North Carolina Department of Public Safety (NCDPS) website.

Standard 11	15.389 Data storage, publication, and des	truction		
	Exceeds Standard (substantially exceeds re	quirement of standard)		
	Meets Standard (substantial compliance; correlevant review period)	implies in all material ways with the standard for the		
	Does Not Meet Standard (requires corrective	e action)		
deter must recor	Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussio must also include corrective action recommendations where the facility does not meet standard. The recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.			
Harassment Pol Operations and	olicy and Requirements and Procedures (R&P) Doc d Commissioner of Adult Corrections and Juvenile	ety Prisons (NCDPS) Juvenile Justice Facilities Sexual Abuse and ument reviewed and approved by both the Director of Juvenile Facility Justice in September 2013 – Section 1.10 (General Provisions) requires gated sexual abuse data was reviewed and all personal identifiers are		
AUDITOR CE I certify that:	ERTIFICATION :			
\boxtimes	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 ager review, and		my ability to conduct an audit of the agency under		
	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.			
Dorothy Xano	os	April 27, 2017		
Auditor Signat	ature	Date		