Prison Rape Elimination Act
Facility Audit Report
Los Angeles County Sheriff's Department
Lomita Station

Final Report July 18, 2023

PREA Facility Audit Report: Final

Name of Facility: Lomita Sheriff's Station
Facility Type: Lockups
Date Interim Report Submitted: 12/01/2022
Date Final Report Submitted: 07/03/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	■
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	■
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	■
Auditor Full Name as Signed: Barbara Anne Phillips	**Date of Signature:** 07/03/2023

AUDITOR INFORMATION	
Auditor name:	Phillips, Barbara
Email:	bphillips@oig.lacounty.gov
Start Date of On-Site Audit:	10/18/2022
End Date of On-Site Audit:	10/21/2022

FACILITY INFORMATION	
Facility name:	Lomita Sheriff's Station
Facility physical address:	26123 Narbonne Avenue, Lomita, California - 90717
Facility mailing address:	

Primary Contact	
Name:	Lieutenant Michael White
Email Address:	mawhite@lasd.org
Telephone Number:	323-415-2937

Sheriff/Chief/Director	
Name:	Captain James Powers
Email Address:	jcpowers@lasd.org
Telephone Number:	310-891-3223

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Characteristics	
Designed facility capacity:	24
Current population of facility:	4
Average daily population for the past 12 months:	3
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	0-99
Facility security levels/detainee custody levels:	All
Does the facility hold juveniles or youthful detainees?	Yes

Number of staff currently employed at the facility who may have contact with detainees:	84
Number of individual contractors who have contact with detainees, currently authorized to enter the facility:	1
Number of volunteers who have contact with detainees, currently authorized to enter the facility:	0

AGENCY INFORMATION	
Name of agency:	Los Angeles County Sheriff's Department
Governing authority or parent agency (if applicable):	
Physical Address:	4700 Ramona Boulevard, Los Angeles, California - 91754
Mailing Address:	450 Bauchet Street, Suite E826, Los Angeles, California - 90012
Telephone number:	3235265314

Agency Chief Executive Officer Information:	
Name:	Brendan J. Corbett, Assistant Sheriff
Email Address:	bjcorbet@lasd.org
Telephone Number:	2138935001

Agency-Wide PREA Coordinator Information			
Name:	John Barkley	**Email Address:**	jgbarkle@lasd.org

Facility AUDIT FINDINGS

Summary of Audit Findings

The OAS automatically populates the number and list of Standards exceeded, the number of

Standards met, and the number and list of Standards not met.

Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	
0	
Number of standards met:	
19	
Number of standards not met:	
16	• 115.111 - Zero tolerance of sexual abuse and sexual harassment • 115.115 - Limits to cross-gender viewing and searches • 115.116 - Detainees with disabilities and detainees who are limited English proficient • 115.121 - Evidence protocol and forensic medical examinations • 115.122 - Policies to ensure referrals of allegations for investigations • 115.132 - Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy • 115.134 - Specialized training: Investigations • 115.161 - Staff and agency reporting duties • 115.163 - Reporting to other confinement facilities • 115.165 - Coordinated response • 115.167 - Agency protection against

	retaliation • 115.171 - Criminal and administrative agency investigations • 115.172 - Evidentiary standard for administrative investigations • 115.176 - Disciplinary sanctions for staff • 115.177 - Corrective action for contractors and volunteers • 115.188 - Data review for corrective action

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-10-18
2. End date of the onsite portion of the audit:	2022-10-21

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	(●) Yes ( ) No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	The audit team contacted the ACLU of Southern California, Peace Over Violence, Dignity and Power Now, Just Detention International, Strength United, Rape Treatment Center, and Young Women's Christian Association (YWCA).

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	24
15. Average daily population for the past 12 months:	3
16. Number of inmate/resident/detainee housing units:	3
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	(●) Yes ( ) No ( ) Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit	
Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit	
36. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:	2
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	0
38. Enter the total number of inmates/ residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
39. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	0
40. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0

43. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0
44. Enter the total number of inmates/ residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	0
45. Enter the total number of inmates/ residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	0
46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	0
47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The Lomita Station does not have a high volume of detainees at their station jail. The five detainees that were interviewed did not fall into any targeted populations. The audit team also requested booking files for two one-week periods to ensure questions regarding population characteristics were asked and the information was being documented. The reviewed booking packets contained population characteristic information. Population characteristics are obtained by Lomita Station but are not tracked. As such, the audit team relied on interviews with staff and detainees, reviewed booking packets, and toured the housing locations to determine if any detainees fell within targeted populations.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	93
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	30
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	1
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	5

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☐ Housing assignment ☐ Gender ☐ Other ☑ None
If "None," explain:	Due to the small size of the detainee population at Lomita Station, the audit team interviewed all detainees who agreed to be interviewed during the onsite audit.
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	There were five detainees in custody during the entire duration of the onsite audit. The audit team interviewed all detainees who agreed to be interviewed during the onsite audit.
56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?	○ Yes ◉ No
a. Explain why it was not possible to conduct the minimum number of random inmate/resident/detainee interviews:	There were five detainees in custody during the entire duration of the onsite audit. The audit team interviewed all five detainees.
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	0
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/ resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/ residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/detainees. ☐ The inmates/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ detainees).	While performing the onsite audit, the audit team determined that the were no youthful detainees in custody based on booking documentation reviewed onsite, discussions with staff and informal conversations with all detainees in custody.
60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	0

a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any physically disabled detainees in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.
61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any cognitive or functionally disabled detainees in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.

62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any blind or low vision detainees in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.
63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any deaf or hard-of-hearing detainees in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.

64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any Limited English Proficient (LEP) detainees in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.
65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any detainees who identified as lesbian, gay, or bisexual in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.

66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any detainees who identified as transgender or intersex in custody based on booking documentation reviewed onsite, discussions with staff, informal conversations with detainees, and observations while in the station jail.
67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	■ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any detainees who reported sexual abuse in custody based on booking documentation reviewed onsite, discussions with staff, and informal conversations with detainees.

68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/ residents/detainees).	While performing the onsite audit, the audit team determined there weren't any detainees who disclosed prior sexual victimization during risk screening in custody based on booking documentation reviewed onsite, discussions with staff, and informal conversations with detainees.
69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	While performing the onsite audit, the audit team determined there weren't any detainees who were placed in segregated housing or isolation for risk of sexual victimization based on booking documentation reviewed onsite, discussions with staff, and informal conversations with detainees. Lomita Station Jail can house a detainee alone if the detainee is at any risk of sexual victimization.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	13
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☑ Length of tenure in the facility ☑ Shift assignment ☑ Work assignment ☑ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	◉ Yes ○ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.

Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	17
76. Were you able to interview the Agency Head?	(●) Yes ( ) No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	(●) Yes ( ) No
78. Were you able to interview the PREA Coordinator?	(●) Yes ( ) No
79. Were you able to interview the PREA Compliance Manager?	( ) Yes ( ) No (●) NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	☐ Agency contract administrator ☑ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment ☑ Line staff who supervise youthful inmates (if applicable) ☐ Education and program staff who work with youthful inmates (if applicable) ☐ Medical staff ☐ Mental health staff ☑ Non-medical staff involved in cross-gender strip or visual searches ☑ Administrative (human resources) staff ☐ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff ☑ Investigative staff responsible for conducting administrative investigations ☑ Investigative staff responsible for conducting criminal investigations ☑ Staff who perform screening for risk of victimization and abusiveness ☐ Staff who supervise inmates in segregated housing/residents in isolation ☑ Staff on the sexual abuse incident review team ☑ Designated staff member charged with monitoring retaliation ☑ First responders, both security and non-security staff ☑ Intake staff

	☐ Other
81. Did you interview VOLUNTEERS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☐ Religious ☑ Other
82. Did you interview CONTRACTORS who may have contact with inmates/ residents/detainees in this facility?	◉ Yes ○ No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☐ Medical/dental ☐ Food service ☑ Maintenance/construction ☐ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

84. Did you have access to all areas of the facility?	(●) Yes ( ) No
Was the site review an active, inquiring process that included the following:	
85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	(●) Yes ( ) No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	(●) Yes ( ) No
87. Informal conversations with inmates/ residents/detainees during the site review (encouraged, not required)?	(●) Yes ( ) No
88. Informal conversations with staff during the site review (encouraged, not required)?	(●) Yes ( ) No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	No text provided.

Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	(●) Yes ( ) No
91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	The audit team reviewed staff, contractor and volunteer training records, background check records, intake processing records, and reviewed agency-wide investigative files. All files reviewed were selected by the audit team.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

94. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	0	0	0

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

96. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

97. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	0	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	21

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	○ Yes ◉ No ○ NA (NA if you were unable to review any sexual abuse investigation files)
Inmate-on-inmate sexual abuse investigation files	
100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	10
101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	11
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)

105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	7
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	( ) Yes (●) No ( ) NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	3
109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	( ) Yes (●) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	(●) Yes ( ) No ( ) NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	○ Yes ◉ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	◉ Yes ○ No ○ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The Lomita Station did not have any sexual abuse or sexual harassment allegations for the past year. To evaluate the LASD's investigative practices, the audit team selected a random sample of 28 investigative files, including criminal and administrative investigations conducted by investigative staff assigned to ICIB, IAB, JIU, and units (jail facilities and station lockups.)

SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	◉ Yes ○ No

a. Enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during this audit:	2
Non-certified Support Staff	
116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	(●) Yes ( ) No
a. Enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT who provided assistance at any point during this audit:	2
AUDITING ARRANGEMENTS AND COMPENSATION	
121. Who paid you to conduct this audit?	( ) The audited facility or its parent agency (●) My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option) ( ) A third-party auditing entity (e.g., accreditation body, consulting firm) ( ) Other
Identify your state/territory or county government employer by name:	Los Angeles County
Was this audit conducted as part of a consortium or circular auditing arrangement?	( ) Yes (●) No

Standards
Auditor Overall Determination Definitions
• Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
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.

115.111	Zero tolerance of sexual abuse and sexual harassment
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's Pre-Audit Questionnaire (PAQ) Information 2. Los Angeles County Sheriff's Department (hereinafter referred to as "LASD," "the Department," or "the Agency"), Custody Division Manual (CDM), 3-04/025.00, Prison Rape elimination Act of 2003 (PREA), Revised July 27, 2022 3. LASD, CDM, 3-04/025.05, PREA – Sexual Abuse and Sexual Harassment, Revised April 3, 2018 4. LASD, CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, Revised April 3, 2018 5. LASD Organizational Chart, July 31, 2022 6. LASD Custody Operations Organizational Charts 7. Agency PREA Coordinator Interview 115.111 (a) The facility indicated in the PAQ that LASD has a written policy mandating zero

tolerance toward all forms of sexual abuse and sexual harassment in facilities it operates directly or under contract.

CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA), is a two-page policy that includes information related to zero tolerance, PREA Coordinators, supervision and monitoring, Sexual Abuse Incident Review, and data collection and review. While the policy addresses zero tolerance of sexual abuse and sexual assault, it does not address zero tolerance of sexual harassment. Terminology throughout the policy is not uniform, and the policy includes terminology not defined in the PREA standards (i.e., sexual assault). Additionally, the policy does not outline the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment of people in custody. CDM, 3-04/025.05, PREA – Sexual Abuse and Sexual Harassment, includes definitions of prohibited conduct consistent with PREA standards. The PREA Coordinator indicated LASD is currently revising its zero-tolerance policy. LASD is not compliant with provision (a) of this standard.

115.111 (b)

The audit team obtained LASD's most recent organizational chart, effective July 31, 2022. LASD is divided into four main operations: Custody Operations, Patrol Operations, Countywide Services, and Administrative and Professional Standards. Administrative and Professional Standards is overseen by the Undersheriff. Custody Operations, Patrol Operations, and Countywide Services are overseen by separate Assistant Sheriffs. The Agency PREA Coordinator is not included on the organizational chart.

The audit team was provided with 12 LASD Custody Operations organizational charts for review. Since January 2021, the Custody Operations organizational chart has been revised 12 times, and the Agency PREA Coordinator has reported to various positions within Custody Operations, including an Assistant Division Director, Lieutenant, Commander, and a Chief. The most recent organizational chart, effective July 27, 2022, indicates the Agency PREA Coordinator reports to the Chief of Custody Services Division Specialized Programs, who reports to the Assistant Sheriff of Custody Operations. It is important to note that the Facility Director of Lomita Station reports within the chain of command of Patrol Operations overseen by the Assistant Sheriff of Patrol Operations. Therefore, the Agency PREA Coordinator is not within the Facility Director's chain of command and has no authority over Lomita Station's operations.

During the interview with auditors, the PREA Coordinator indicated he has sufficient time and authority to oversee agencywide PREA implementation. The audit team worked very closely with the PREA Coordinator throughout the pre-onsite, onsite, and post-onsite phases of this audit. Throughout the different phases of this audit, it was evident that the Agency PREA Coordinator does not have sufficient authority to develop, implement, and oversee agencywide efforts to comply with the PREA standards in all its facilities. Additionally, the Agency PREA Coordinator did not mention having conversations, interactions, or direct access to the Agency Head. LASD is not compliant with provision (b) of this standard.

	LASD is not compliant with all provisions of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall revise its PREA policy to mandate zero tolerance of sexual abuse and sexual harassment. Additionally, the policy shall outline the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment of people in custody. The policy shall include terminology defined in the PREA standards. Once revised, LASD shall implement, retrain, and institutionalize the revised policy. 2. LASD shall ensure the Agency PREA Coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities. 3. LASD shall ensure the Agency PREA Coordinator reports to an upper-level executive and has authority over all operations that require efforts to comply with the PREA standards. The Agency PREA Coordinator shall also be included on LASD's Organizational Chart. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD revised its PREA policy to mandate zero tolerance of sexual abuse and sexual harassment of people in custody. A draft of the revised policy was provided to the audit team for review. The draft policy outlines the Agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment of people in custody. Additionally, the draft policy includes terminology defined in the PREA standards. The draft policy is consistent with the requirements of this standard. However, LASD did not finalize, implement, retrain, and institutionalize the revised policy. LASD did not demonstrate compliance with provision (a) of this standard. 2. The Agency PREA Coordinator now reports to a Commander who reports to the Chief of Custody Services Division Specialized Programs. The Agency PREA Coordinator does not report to an upper-level executive and does not have authority over all operations that require efforts to comply with the PREA standards. The Agency PREA Coordinator does not have sufficient authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all its facilities. Additionally, the Agency PREA Coordinator is not included on LASD's Organizational Chart. LASD did not demonstrate compliance with provision (b) of this standard. The Agency is not compliant with all provisions of this standard.

115.112	**Contracting with other entities for the confinement of detainees**
	Auditor Overall Determination: Meets Standard

	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. Agency PREA Coordinator Interview 3. Facility Director Interview 4. Correspondence with LASD’s Fiscal Administration Bureau 115.112 (a)-(b) According to information provided by Lomita Station in the PAQ, the facility and its parent agency, LASD, do not contract with any private or public entities for the confinement of its detainees. The audit team confirmed with the Facility Director, Agency PREA Coordinator, and LASD’s Fiscal Administration Bureau that the facility and Agency do not contract with other entities for the confinement of its lockup detainees. Therefore, this standard does not apply to Lomita Station.

115.113	**Supervision and monitoring**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD, CDM, 3-04/025.30, PREA - Supervision and Monitoring, Revised November 17, 2021 3. Agency PREA Coordinator Interview 4. Facility Director Interview 5. Specialized Staff Interview – Security Staff 115.113 (a)-(c) The facility did not respond in the PAQ as to whether LASD develops and documents a staffing plan for each lockup that provides for adequate levels of staffing, and where applicable, video monitoring to protect detainees against sexual abuse. CDM, 3-04/025.30, PREA - Supervision and Monitoring, states the Department shall develop staffing plans for each facility, which provide for adequate levels of staffing and video monitoring to protect inmates against sexual abuse and sexual harassment. This policy states the Department shall take into consideration the following: • Generally accepted detention and correctional practices;

- Any judicial findings of inadequacy;
- Any findings of inadequacy from federal investigative agencies;
- Any findings of inadequacy from internal or external oversight bodies;
- All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- The composition of the inmate population;
- The number and placement of supervisory staff;
- Institutional programs occurring on a particular shift;
- Any applicable state or local laws, regulations, or standards;
- The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- Any other relevant factors

This policy requires the staffing plan be reviewed annually, or as needed, to ensure compliance with the approved staffing plan for each respective facility. This policy states the annual review shall be conducted with the Department's PREA Coordinator, facility PREA Compliance Manager, facility scheduling personnel, and unit commander or designee, and shall assess and document whether adjustments are needed to the following:

- The facility staffing plan
- The facility's deployment of video monitoring systems
- Other monitoring technologies
- The resources the facility has available to commit to ensure adherence to the staffing plan

This policy also states that, in the event there are any deviations to the approved staffing plan, the on-duty watch commander of each shift, shall justify and document all findings in the watch commander's log and the facility PREA Compliance Manager shall also be notified via email.

The Facility Director indicated Lomita Station's staffing plan is documented in the In-Service in the Scheduling Management System (SMS). The audit team reviewed the In-Service for October 18 through 21, 2022, and determined the In-Service is a roster that documents staff on duty, assignments, and scheduled hours. The audit team determined that Lomita Station does not have a documented staffing plan that meets the requirements of the standard. The PREA Coordinator indicated LASD is working on developing a staffing plan for its patrol stations, including Lomita Station. LASD is not compliant with provisions (a) through (c) of this standard.

115.113 (d)

The facility indicated in the PAQ that it utilizes a screening process required by Standard 115.141 to identify vulnerable detainees and vulnerable detainees are provided with heightened protection. Interviews with security staff indicated that vulnerable detainees are provided with heightened protection, including single-cell housing. If single-cell housing in not available, the detainee is transported to LASD's

	Century Regional Detention Facility or Inmate Reception Center. The facility is compliant with provision (d) of this standard. LASD did not demonstrate compliance with provisions (a) through (c) of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall develop and document a staffing plan for Lomita Station that provides for adequate levels of staffing and, where applicable, video monitoring to protect detainees against sexual abuse. The Agency PREA Coordinator shall be consulted with during the development of the staffing plan. In calculating adequate staffing levels and determining the need for video monitoring, LASD shall consider the physical layout of each lockup, the composition of the detainee population, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors. 2. LASD shall develop and implement procedures regarding documentation of non-compliance with the staffing plan. All deviations from the staffing plan shall be documented and justified. 3. Whenever necessary, but no less frequently than once each year, Lomita Station shall assess, determine, and document whether adjustments are needed to the staffing plan established pursuant to paragraph (a) of this section, prevailing staffing patterns, the lockup's deployment of video monitoring systems and other monitoring technologies, and the resources available to the lockup to commit to ensuring adequate staffing levels. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD developed and finalized a staffing plan and provided the audit team with a copy for review. The staffing plan is consistent with the requirements of provision (a) of this standard. During a site visit on June 2, 2023, the audit team confirmed that Lomita Station implemented the staffing plan. 2. The staffing plan includes procedures regarding documentation of non-compliance with the staffing plan. Lomita Station staff responsible for documentation had a copy of the staffing plan and explained the procedures for documenting any deviations from the staffing plan in accordance with LASD policy. 3. Lomita Station and LASD's Office of PREA Compliance plan to conduct a review of the staffing plan whenever necessary, but no less frequently than once annually. The next review is scheduled for March 15, 2024. The Agency is compliant with all provisions of this standard.

115.114	**Juveniles and youthful detainees**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Lomita Station's PAQ Information
2. LASD, CDM, 6-09/020.00, Secure Detention of Juveniles, Revised March 5, 2018
3. LASD, MPP, 5-02/100.45, Juvenile Detention Restrictions and Procedures (601 & 602), Revised December 12, 2013
4. LASD, MPP, 5-02/035.10, Conditions of Secure Detentions, Revised January 15, 2020
5. Facility Director Interview
6. Random Staff Interviews
7. Observations made during the site review and informal discussions with staff

115.114

The facility indicated in the PAQ that it does not hold juvenile detainees in the same location as adult detainees. The facility indicated in the PAQ that it has held no juveniles in the facility in the past 12 months. The audit team was provided with three policies for review.

CDM Section 6-09/020.00, Secure Detention of Juveniles, states if an adult inmate, including an inmate worker, is present with the juvenile in the same room or area, staff of the jail facility trained in the supervision of inmates shall maintain a constant, side-by-side presence with either the juvenile or adult inmate, to ensure there is no communication between the juvenile and adult inmate. This policy states situations in which a juvenile and an adult inmate may be in the same room or passageway shall be limited to the following:

- During booking
- During medical screening
- Inmate worker presence while performing work necessary for the operation of the jail facility, such as meal service and janitorial service
- Movement of inmates within the law enforcement facility

MPP Section 5-02/100.45, Juvenile Detention Restrictions and Procedures (601 & 602), mandates under no conditions shall a juvenile be incarcerated with adult prisoners.

MPP Section 5-02/035.10, Conditions of Secure Detentions, mandates the following:

- The holding cell used to securely detain juveniles shall be equipped so as to allow constant auditory access to the staff by the juvenile.

	• Minors held in secure detention shall be visually checked periodically, no less than every 30 minutes, by a staff member. • There shall be no communication between minors and adult prisoners; and if an adult prisoner, including an inmate worker, is present with the minor in the same room or area, staff of the law enforcement facility trained in the supervision of inmates shall maintain a constant, immediate presence with either the minor or adult prisoner, to ensure there is no communication between the minor and adult prisoner. • Situations in which a minor and an adult prisoner may be in the same room or passageway shall be limited to the following: ◦ Booking; ◦ Awaiting visiting or sick call; ◦ Inmate worker presence while performing work necessary for the operation of the law enforcement facility, such as meal service and janitorial service; and ◦ Movement of persons in custody within the law enforcement facility. During interviews with the Facility Director and random staff, a consistent description was provided regarding monitoring of juveniles and the area where juveniles are held. The Facility Director and staff indicated juveniles are held in the report writing room inside the station, which is outside of the lockup area where adults are held. Staff indicated juveniles are monitored by sworn staff under constant direct supervision and cannot be held at the station for more than six hours before being released to a guardian or juvenile facility. During the site review, the audit team observed the area where juveniles are held. The audit team confirmed the area is inside of the station but outside of the lockup area where adult detainees are held. The designated area is in the station's report writing room, which is a small room with one entry door that remains open and unlocked. Staff explained that juveniles are placed in a chair that is positioned on the far side of the room opposite the entry doorway. Staff indicated that sworn staff sit on the opposite side of the room from the juvenile near the doorway when providing direct supervision. The audit team observed staff restrooms located outside of the report writing room that are available for juveniles to be escorted to, if needed. The audit team did not observe any juveniles at the station during the onsite audit. The facility is compliant with this standard.

115.115	**Limits to cross-gender viewing and searches**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:

1. Lomita Station’s PAQ Information
2. LASD, CDM, 5-08/010.00 Searches, Revised on 4/11/2019
3. LASD, CDM, 6-07/010.00 Inmate Searches, Revised on 3/5/2018
4. LASD, MPP, 5-09/560.00 Interactions with Transgender and Gender Non-Conforming Persons, Revised on 3/13/2017
5. Lesson Plan for Custody Assistant Academy Class #19.8, Person Searches
6. Lesson Plan for Deputy Sheriff Academy Class #33, Search and Control
7. Non-Medical Staff Involved in Cross-Gender Strip or Visual Searches Interviews
8. Random Staff Interviews
9. Detainee Interviews
10. Observations made during the site review and informal discussions with staff

115.115 (a)

According to the information provided by the Lomita Station in the PAQ, staff do not perform strip searches or visual body cavity searches of detainees. However, pat-down searches of detainees are performed.

Interviews with random staff confirmed that they do not perform strip searches or visual body cavity searches of detainees at the Lomita Station lockup. Staff indicated that if exigent circumstances required a strip search or visual body cavity search to be conducted, the detainee would be transported to a medical facility or LASD’s Inmate Reception Center or Century Regional Detention Facility. Staff indicated that pat-down searches are typically conducted by staff of the same gender as the detainee being searched and that there is usually staff of the same gender available to conduct these searches. Staff indicated that in rare circumstances when a pat-down search cannot be conducted by staff of the same gender, cross-gender pat search techniques are utilized. During the site review, the audit team noted staff of all genders available to conduct pat-down searches. The audit team did not observe any strip searches, visual body cavity searches, or cross-gender pat-down searches. The facility demonstrated compliance with provision (a) of this standard.

115.115 (b)

The facility indicated in the PAQ that staff do not perform strip searches or visual body cavity searches of detainees. Interviews with random staff confirmed this information. The audit team did not find any evidence that such searches are performed. Additionally, the audit team did not observe any strip searches, visual body cavity searches, or cross-gender pat- down searches during the site visit. The facility is compliant with provision (b) of this standard.

115.115 (c)

The facility provided CDM 5-08/010.00, Searches, which states that each custody facility shall implement unit orders enabling inmates to shower, perform bodily

	functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine safety checks. This policy mandates that department personnel shall announce their presence whenever they enter areas where inmates of the opposite gender are showering, performing bodily functions, or changing clothing. The audit team requested the unit order for Lomita Station, as required by the policy, and was informed that no such unit order exists. During the site review, the audit team inspected all housing areas of Lomita Station's lockup, including areas where detainees shower and perform bodily functions. There are seven housing cells in the lockup, and each contain a toilet/sink combination. All housing cells have a hard door that has a small window and an additional larger window adjacent to the door from which the inside of the cell can be viewed. There are two shower rooms available for detainees to shower outside of the housing cells, one for male detainees and one for female detainees. The shower rooms have hard doors with no windows. According to staff, showers are offered to detainees daily. During the allotted shower time, lockup staff offer showers to one detainee per shower room at a time. Staff remove the detainee from the housing cell and place them in the shower room. Staff provide detainees with toiletries and towels and let detainees know how much time they will have to shower. To allow for privacy, the shower room door is closed and locked during this time. Staff are aware of when showers are being provided and staff of the opposite gender do not unlock and open the shower room door. Staff knock on the door and give detainees notice that shower time is almost over and instruct them to get dressed. Staff return and knock on the door and notify detainees that they will be entering. During the onsite audit, the audit team spoke to two detainees, one male and one female, regarding shower procedures at the lockup. Both detainees confirmed the shower process described by staff and indicated they were able to shower without being seen by staff of the opposite gender. During the onsite audit, the audit team reviewed the live feed of the video monitoring system from the jailer booth and noted cameras do not capture the inside of any of the cells. Additionally, toilets cannot be seen from the jailer booth. The audit team did not observe any detainees in a state of undress or showering during the onsite audit. During the site review, the audit team observed a yellow sign posted on the secured door leading to the lockup, which states, "Announce your gender before you enter." The audit team observed staff announce their presence when entering the area that houses detainees of the opposite gender. Informal conversations during the site review and formal interviews with random staff indicated this practice has been implemented for several months. The facility is not compliant with provision (c) of this standard due to the absence of the required unit order mandated in CDM 5-08/ 010.00, Searches. 115.115 (d)

	The facility provided three policies related to this provision of the standard. CDM 5-08/010.00 Searches, CDM 6-07/010.00 Inmate Searches, and MPP 5-09/560.00 Interactions with Transgender and Gender Non-Conforming Persons, indicate the following: • In all cases, a transgender or intersex person shall have their identity respected and be treated with dignity. Under no circumstances shall Department personnel search any person for the purpose of determining genital status or presence/absence of breasts or for the purpose of demeaning transgender or intersex individuals. • Under no circumstance shall transgender or intersex individuals be subject to more invasive search procedures than non-transgender or cisgender individuals. • More invasive searches, including strip searches, visual body cavity searches, and physical body searches shall be, in all circumstances, conducted by officers of the gender requested by the transgender or intersex person. No Department personnel may be present who are not directly relevant to the search, and the search shall be conducted in private. • If any deviation occurs regarding the policy for transgender and intersex searches, to include emergencies, an immediate supervisor shall be notified of the deviation, and it shall be noted in the e-UDAL. CDM 5-08/010.00 Searches, includes a section that states, absent exigent circumstances, a pat-down/cursory search on a transgender or intersex inmate shall be conducted by a staff member of the same gender as that with which the inmate identifies, and if the inmate's genital status is unknown, it may be determined during conversations with the inmate, by reviewing medical records, or, by referring the inmate to the Gender Identity Review Board. The policy goes on to mandate that under no circumstances should this information be shared with other Department personnel unless directly pertinent to ensure an inmate's safety. MPP 5-09/560.00 Interactions with Transgender and Gender Non-Conforming Persons, includes a section which states that immediate cursory searches of transgender or intersex individuals may be conducted by a deputy or officer of either gender. The policy goes on to mandate that any deviation from the procedures for transgender searches occurs, including during an emergency, a supervisor shall be notified of the deviation, and the reasons for the deviation shall be documented in the Watch Commander’s Log. During interviews, random staff demonstrated a clear understanding of these policies and stated they would never search or physically examine a transgender or intersex detainee for the sole purpose of determining the detainee’s genital status. Regarding pat-down searches, staff indicated transgender or intersex detainees would be asked their preference regarding the gender of the person to conduct the search. Staff indicated there is always staff of all genders available to conduct pat-down searches. There were no transgender or intersex detainees in custody for the audit team to interview during the onsite audit. The facility demonstrated

compliance with provision (d) of this standard.

115.115 (e)

According to information provided by Lomita Station in the PAQ, all law enforcement staff have received training on conducting cross-gender pat-down searches and searches of transgender and intersex detainees in a professional and respectful manner, consistent with security needs. Staff indicated that pat-down searches are conducted by staff of the same gender as the detainee. Staff indicated transgender or intersex detainees would be asked their preference regarding the gender of the person to conduct the search. Staff indicated there is always staff of all genders available to conduct pat-down searches.

The audit team was provided with the lesson plan for Custody Assistant Academy Class #19.8, Person Searches. We reviewed the lesson plan and determined the training meets the requirements of provision (e) of this standard. The audit team was provided with the lesson plan for Deputy Sheriff Academy Class #33, Search and Control. The deputy course curriculum included cross-gender pat-down searches, however, the curriculum did not include searches of transgender or intersex detainees. Additionally, the audit team was not provided with any training records that demonstrate lockup staff have completed training required by provision (e) of this standard. Additional training documentation is required to demonstrate compliance with provision (e) of this standard.

The facility is not compliant with provisions (c) and (e) of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. Lomita Station shall develop, implement, and institutionalize a unit order that enables detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. Alternatively, LASD can revise CDM 5-08/010.00, Searches, and remove the requirement for a separate unit order for each custody facility and include the requirements of Standard 115.115 within departmental policy.
2. LASD shall provide the audit team with additional training records and course materials that demonstrate that the Agency trains law enforcement staff on how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. This shall include curriculum for training provided to deputies and training records for deputies and CAs.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD revised CDM 5-08/010.00, Searches, and a draft of the revised policy

	was provided to the audit team for review. The draft policy is consistent with the requirements of provision (c) of this standard. However, LASD did not finalize, implement, retrain, and institutionalize the revised policy. The facility/Agency is not compliant with provision (c) of this standard. 2. The audit team received additional curriculum and course materials that demonstrate the Agency trains law enforcement staff on how to conduct cross-gender pat-down searches, and searches of transgender and intersex detainees, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. The facility/Agency is compliant with provision (e) of this standard. The facility/Agency is not compliant with provision (c) of this standard.

115.116	**Detainees with disabilities and detainees who are limited English proficient**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD, CDM, 03-04/025.40, PREA – Inmate Education, Revised April 3, 2018 3. LASD, MPP, 5-09/005.40, Communication Through Telecommunications Devices for the Deaf (TDD), Revised April 1, 1996 4. LASD, MPP, 2-07/140.60, The American with Disabilities Act (ADA) Unit, Revised December 12, 2003 5. LASD, CDM, 5-14/060.00, Use of Interpreter, Revised December 10, 2021 6. LASD, MPP, 3-09/004.00, Limited English Proficiency and Language Assistance Plan, Revised April 8, 2018 7. LASD, CDM, 5-01/005.00, Prioritization List for Sign Language Interpreter Requests 8. LASD, CDM, 6-06/030.00, Developmentally Disabled Inmates 9. LASD, Field Operations Directive #92-001, AT&T Language Line Services 10. LASD Zero Tolerance Posters 11. LASD PREA Zero Tolerance Pamphlet (SH-J-478) 12. LASD Station Jail Orientation Form (SH-R-449), Revised May 2022 13. Agency Head Designee Interview 14. Random Staff Interviews 15. Observations made during the site review and informal discussions with staff 16. Information from LASD’s Sheriff’s Information Bureau 17. Information from Inmate Services Bureau staff

18. Correspondence with LASD’s Fiscal Administration Bureau

115.116 (a)-(b)

According to information provided by Lomita Station in the PAQ, LASD has established procedures to provide disabled and limited English proficient (LEP) detainees with equal opportunity to participate in or benefit from all aspects of the Agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility provided the following policies for review.

CDM, 03-04/025.40, PREA – Inmate Education, states the Department shall provide inmate education in formats accessible to all inmates including those who are limited in English proficiency, deaf, visually impaired or otherwise disabled, as well as those who have limited reading skills.

MPP, 5-09/005.40, Communication Through Telecommunications Devices for the Deaf (TDD), requires that any service or interaction that might ordinarily involve communication via telephone must also be available through TDDs.

MPP, 2-07/140.60, The American with Disabilities Act (ADA) Unit, requires the ADA Unit helps to ensure that inmates with disabilities have access to all programs that all other inmates receive.

CDM, 5-14/060.00, Use of Interpreter, states all facilities shall attempt to make the services of an appropriate bilingual officer available to non-English speaking inmates. This policy also states the bilingual officer shall explain jail house rules and regulations and answer specific questions to ensure clear communications.

MPP, 3-09/004.00, Limited English Proficiency and Language Assistance Plan, states it is the policy of LASD to provide accurate and effective communication with members of the public regardless of their level of English proficiency. This policy states the Department shall strive to eliminate or reduce, to the maximum extent practicable, LEP as a barrier to accessing assistance or utilization of Department programs and services. This policy also states the following:

- Department members shall take reasonable steps to ensure effective and accurate communication with a LEP individual when providing assistance or Department programs and services.
- Personnel will use qualified bilingual persons as translators and interpreters as set forth in this policy. A “qualified bilingual person” as used in this plan is a qualified County interpreter (MPP 3-02/180.00, Bilingual Bonus), including employees or persons available through the civilian volunteer program or persons available through the Sheriff’s Information Bureau bilingual services program who have passed the Los Angeles County fluency examination for the language involved.
- Immigration authorities shall not be used as interpreters for law enforcement matters relating to individuals in Department custody, even if otherwise qualified. Language assistance should be provided at a time and

place that avoids the effective denial of assistance, service, or rights to the LEP person.

- Department members should avoid using persons biased for or against one of the parties and minor children under the age of 12 to assist in interpretation unless there is no available alternative. Department members should also avoid using a family member as an interpreter in a matter involving domestic violence absent exigent circumstances.
- Each station, in the respective booking/detention areas, shall prominently display signage, printed in English as well as the prevalent spoken language(s) for that Department station service area as determined by the unit commander, detailing information regarding access to the Bail Commissioner, the Public Defender's Office, information on minor childcare, and the prisoner's right to complete three phone calls. In the event a LEP individual indicates they cannot read the posted information, department personnel will make reasonable efforts to provide appropriate language services.
- To maintain consistency and uniformity, each facility shall post both the English and Spanish versions of the Custody Services Division Inmate Rules and Regulations as listed in Custody Division Manual section 7- 33/000.00, "Inmate Rules and Regulations." For those inmates who are unable to read English or Spanish, provisions shall be made for the jail staff to verbally instruct them or provide them with material, in an understandable form, regarding jail rules and disciplinary procedures and penalties.

Fiscal Administration Bureau provided the audit team with Field Operations Directive #92-001, AT&T Language Line Services. This directive outlines LASD's policies and procedures for AT&T Language Line Services. This directive states AT&T Language Line Services have been implemented for use by the Field Operations Regions. The service provides 24-hour telephone-based translation service for 144 languages and dialects.

The audit team performed further research and found LASD, CDM, 5-01/005.00, Prioritization List for Sign Language Interpreter Requests, which states LASD shall ensure effective communication for inmates who are deaf or hard of hearing in a custody facility or reception center. This policy states this is achieved through the licensed and contracted interpreter system which provides qualified sign language interpreters and/or captioning by means of video teleconferencing. The policy does not provide guidance to staff on how such assistance can be obtained for detainees.

The audit team spoke with LASD's Americans with Disabilities Act (ADA) Unit staff regarding resources available for staff at patrol stations. ADA Unit staff indicated patrol station staff can utilize the language line for audible interpretation services. They also indicted LASD has an agreement with Life Signs Incorporated for certified sign language interpretation services. Upon request, Life Signs can dispatch a qualified interpreter to a facility 24 hours a day, 7 days a week.

The audit team spoke with Sheriff's Information Bureau (SIB) staff regarding

	interpretation services available to LASD patrol stations. SIB staff indicated LASD staff can call SIB to request an interpreter to translate for LEP and deaf individuals. When a call is received, SIB sends an email to a group for the specific language requested. The available staff calls the contact listed in the email directly to provide interpretation services. SIB staff indicated there are over 60 languages spoken throughout the Department and it is constantly growing with new hires. It is unclear whether individuals providing interpretation through SIB are qualified interpreters. The audit team spoke with Inmate Services Bureau (ISB) staff regarding resources available for staff at patrol stations. ISB indicated CDM, 6-06/030.00, Developmentally Disabled Inmates, provides guidance regarding developmentally disabled inmates. This policy requires that when there is a high probability that a developmentally disabled person will be in LASD's custody for more than 24 hours, a Los Angeles County Regional Center must be contacted and advised. They will have a representative respond and act as legal guardian for the inmate and assist them with arranging bail, etc. If the inmate will not be held more than 24 hours, it is not mandatory that a Los Angeles County Regional Center be contacted. However, the policy indicates they can be a valuable resource if the inmate is uncooperative or uncommunicative during the booking process. There are several LASD policies that identify requirements regarding detainees who are LEP or disabled. However, observations made during the site review and interviews with randomly selected staff indicated that some staff are not aware of all the requirements and resources available to staff. During the site review, the audit team noted LASD PREA Zero Tolerance posters in English and Spanish in the intake area and throughout the lockup. These posters include information regarding how to report allegations of sexual abuse and/or sexual harassment. The audit team observed a demonstration of the intake and booking process. Staff indicated detainees are provided with the PREA Zero Tolerance Pamphlet and the Station Jail Orientation Form. Staff go over the information verbally with the detainees. Staff indicated PREA information is provided in various languages. However, some staff did not know how to obtain PREA information in languages other than English and Spanish. Staff did not know how to obtain PREA information in formats that can be understood by detainees who are visually impaired, developmentally delayed, mentally ill, or have limited reading skills. However, staff indicated they go over the information verbally and would make every effort to assist detainees that require additional assistance. Staff were aware of resources available for interpretation services and indicated interpreters are provided for hearing impaired and LEP detainees if needed. Staff indicated they would call LASD's Mental Evaluation Team (MET) to request assistance for mentally ill detainees. Staff were not aware of any resources for assistance with developmentally delayed detainees. Staff indicated that detainees that require additional assistance can be transported to LASD's Century Regional Detention Facility or Inmate Reception Center. However, staff indicated they are required to book individuals prior to transporting them. Staff were able to successfully demonstrate use of the TDD machine for the audit team. The audit team did not have the opportunity to interview any detainees in any targeted category because

	none were detained at Lomita Station during our onsite audit. The Agency Head Designee indicated LASD PREA information is available in various languages for LEP detainees. Regarding assistance for deaf detainees, he indicated each patrol station lockup has a TDD that can be utilized. As for mentally ill inmates, he indicated lockup staff can call MET for assistance. The Agency Head Designee indicated patrol station lockups can also complete a Behavioral Observation and Mental Health Referral (BOHMR) and transport a detainee to LASD's Inmate Reception Center where they can better assist these detainees. The facility did not demonstrate compliance with provisions (a) and (b) of this standard. 115.116 (c) According to information provided by Lomita Station in the PAQ, LASD policy prohibits use of detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under Standard 115.164, or the investigation of the detainee's allegations. CDM, 5-14/060.00, Use of Interpreter, states that in the event an appropriate bilingual officer is not available, another inmate with knowledge of the desired language may be utilized. This policy states this inmate will translate jail rules and assist as needed in the clarification of jail procedures. This policy language is not consistent with the requirement of this standard. It is recommended that LASD revise CDM, 5-14/060.00, Use of Interpreter, and any other policy regarding use of detainee/inmate interpreters, to be consistent with the requirements of provision (c) of this standard. Interviews with random staff indicated staff would not rely on detainee interpreters, detainee readers, or other types of detainee assistants except in very limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety. The facility is compliant with provision (c) of this standard. LASD is not compliant with provisions (a) and (b) of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall take appropriate steps to ensure that detainees with disabilities (including, for example, detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of the Agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. In addition, LASD shall ensure that written materials are provided in formats or through methods that ensure effective communication with detainees with disabilities, including detainees

who have intellectual disabilities, limited reading skills, or who are blind or have low vision.

2. LASD shall take reasonable steps to ensure meaningful access to all aspects of the Agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to detainees who are LEP, including steps to provide written materials in formats or through methods that ensure effective communication. LASD shall ensure staff are trained on how to obtain LASD PREA information in languages other than English and Spanish.
3. LASD shall institutionalize its current procedures that identify requirements regarding detainees who are LEP and/or disabled. LASD shall train staff on the requirements of these procedures and any available resources. The training shall also include procedures and guidance regarding when it is appropriate to utilize inmate interpreters.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD developed materials and identified additional resources to ensure that detainees with disabilities (including detainees who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities) have an equal opportunity to participate in or benefit from all aspects of the Agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. However, LASD did not finalize, implement, and institutionalize these materials and resources agencywide.
2. LASD did not provide the audit team with any proof that it institutionalized its current procedures that identify requirements regarding detainees who are LEP and/or disabled. As discussed in Standard 115.132, LASD developed a Jail Staff Briefing regarding procedures for Translation/Interpretation of PREA Inmate Educational Materials, and additional tools that staff may utilize to ensure detainees who are LEP, deaf, visually impaired, disabled, developmentally delayed, mentally ill, or have limited reading skills are notified of the Agency's zero-tolerance policy. However, LASD did not disseminate or provide staff with training regarding this briefing.
3. LASD developed training materials that include the requirements of this standard. However, LASD did not implement and institutionalize these materials and instructions.

The Agency is not compliant with provisions (a) and (b) of this standard.

115.117	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, MPP, 2-07/080.20, Pre-Employment Unit, Revised on December 12, 2013 3. LASD, MPP, 3-01/060.05, Pre-Employment Investigations, Revised on December 12, 2013 4. LASD, MPP, 3-01/050.30, Off-Duty Incidents, Revised on August 4, 2021 5. Personal History Statement, Revised in February 2013 6. Intake Interview Questionnaire, Revised in August 2016 7. Pre-Investigative Questionnaire, Not dated 8. Security Clearance Application, Not dated 9. Personnel files 10. Specialized Staff Interviews - Administrative/Human Resources Staff (Personnel Administration Bureau staff) 11. Informal conversations and correspondence with Personnel Administrative Bureau (PAB) staff 12. Informal conversations and correspondence with Pre-Employment Unit staff 115.117 (a)-(d) The facility indicated in the PAQ that Agency policy prohibits hiring or promoting anyone who may have contact with detainees and prohibits enlisting the services of any contractor who may have contact with detainees who: (1) has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. LASD provided two policies for review regarding provision (a) of this standard. MPP, 2-07/080.20, Pre-Employment Unit, which outlines the responsibilities of the Pre-Employment Unit, states the unit has the following responsibilities: • Investigate the character and background of prospective professional staff applicants. • Ensure applicants meet established hiring standards, including Federal, State, and local statutes. • Conduct background investigations on professional staff applicant positions including medical services positions. • Conduct security clearances on employees hired on a contractual basis. MPP, 3-01/060.05, Pre-Employment Investigations, states an investigation to determine suitability shall be conducted into the character and background of each candidate (Deputy or civilian) for employment with the Department. This policy

	mandates that candidates with criminal records, questionable loyalty or morals and unstable personalities shall be rejected when investigation establishes facts which warrant such action. This policy also states the Department has an indispensable obligation to the public to ensure that only suitable individuals are employed, since the functions of the Department involve the protection of life and property and the enforcement of the law; fundamentally, all functions of the Department are in the interest of public welfare and safety; and Peace officers, by law, are endowed with authority far beyond that possessed by the ordinary citizen. The Pre-Employment Unit indicated that LASD conducts a thorough background investigation, including a criminal background records check (federal, state, and local) and contact with prior employers, for all candidates in order to ensure they meet the standards of the LASD. The Pre-Employment Unit indicated that LASD did not implement live scan fingerprinting until January 1, 2001. Therefore, anyone hired prior to this date has not been live scan fingerprinted. The Pre-Employment Unit indicated background checks of contractors are conducted every two years. However, LASD did not provide any departmental policy which requires background checks of contractors every two years. The Pre-Employment Unit provided copies of forms completed by employees and contractors during the hiring process. The audit team reviewed these documents to determine if applicants are asked questions about previous misconduct described in provision (a) of the standard. The audit team noted questionnaires completed by contractors include questions that meet the requirements of (a)(1) and (a)(2), but not (a)(3). At the recommendation of the audit team in November 2022, LASD revised forms completed by employees during the hiring process to include questions that meet the requirements provision (a) of this standard. These revised forms are currently being institutionalized. The facility did not indicate in the PAQ the number of Lomita Station employees who were hired or promoted within the 12 months preceding the audit. However, during the post-onsite phase, the audit team was provided with a roster indicating that 5 employees were promoted in the 12 months preceding the audit. The audit team requested personnel files for six individuals assigned to Lomita Station, including the five recently promoted employees and one contractor who has contact with inmates, in order to determine whether the Department is meeting the requirements of provisions (a), (b) and (d) of this standard. The audit team was provided with the five employee promotional files. The Pre-Employment Unit was unable to provide personnel files for the contractor. According to Pre-Employment Unit staff, a background check and a review of any incidents of sexual harassment were not completed by LASD for the contractor as required by provision (b) and (d) of this standard. The five employee personnel files included documentation indicating a review of LASD’s Performance Recording and Monitoring System (PRMS) for any allegations and/or incidents of sexual harassment involving the employee. LASD did not demonstrate compliance with provisions (a), (b), and (d) of this standard. 115.117 (e)

	LASD did not provide any policy requiring that either criminal background record checks be conducted at least every five years for current employees and contractors who may have contact with detainees or that a system is in place for otherwise capturing such information for all current employees. Pre-Employment Unit staff indicated the live scan fingerprinting system provides real-time notification of employee arrests. However, as stated above, LASD implemented live scan fingerprinting on January 1, 2001. Therefore, employees hired prior to this date were not live scan fingerprinted. As a result, the Department will not be notified of arrests of employees hired prior to January 1, 2001, through live scan. Additionally, PAB staff indicated a background check was not conducted by LASD for the contractor in our sample. LASD did not demonstrate compliance with provision (e) of this standard. 115.117 (f)-(g) As stated above, the audit team noted questionnaires completed by employees during the hiring process were revised to include questions that meet the requirements of provision (a). These forms are currently being institutionalized within the hiring process. These documents include admonishments indicating that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. The audit team was provided with MPP 3-01/050.30, Off-Duty Incidents, which states staff who are arrested or detained for any offense, or named as a suspect, other than an infraction under the Vehicle Code, shall immediately notify their immediate supervisor or watch commander of the facts of the arrest, detention, or allegation. However, provision (f) requires the agency impose upon employees a continuing affirmative duty to disclose any such misconduct described in paragraph (a) of this standard. It is recommended that LASD include this requirement in departmental policy. LASD did not demonstrate compliance with provisions (f) and (g) of this standard. 115.117 (h) LASD did not provide any policies requiring the provision of information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. It is unclear if LASD is prohibited by law from providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The Agency advised that a response from Los Angeles County’s Office of County Counsel is pending. LASD did not demonstrate compliance with this standard. Corrective action is recommended.

	Corrective Action issued December 5, 2022: 1. LASD shall not hire or promote anyone who may have contact with detainees, and shall not enlist the services of any contractor who may have contact with detainees, who: (1) has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section. 2. LASD shall consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with detainees. This consideration shall be documented and retained in the personnel file. 3. LASD shall perform a criminal background record check before enlisting the services of any contractor who may have contact with detainees. LASD shall determine if a criminal background records check was not conducted for any contractor currently assigned to Lomita Station and immediately conduct a criminal background records check. Additionally, these contractors shall be live scanned. Once this process is completed, LASD shall provide the audit team with the contractor personnel files for review. 4. LASD shall conduct a criminal background record check at least every five years of current employees who may have contact with detainees or ensure they are live scan fingerprinted so there is a system in place that meets the requirements of provision (e) of this standard. This shall include ensuring all current employees and contractors who may have contact with detainees that were hired prior to January 1, 2001, are live scan fingerprinted. LASD shall provide the audit team with proof that employees and contractors hired prior to January 1, 2001, have been live scan fingerprinted. 5. LASD shall institutionalize the practice of asking all applicants and employees who may have contact with detainees directly about previous misconduct described in provision (a) of this standard in written applications or interviews for hiring or promotions and in any interviews conducted as part of reviews of current employees. LASD shall impose upon all employees a continuing affirmative duty to disclose any such misconduct. Material omissions regarding such misconduct, or the provision of materially false information, are grounds for termination. 6. LASD shall determine if it is prohibited by law from providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. LASD shall provide this information to the audit team. Unless prohibited by law, LASD shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an

institutional employer for whom such employee has applied to work.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. On November 8, 2022, LASD implemented revised questionnaires for applicants and employees seeking promotion to ask whether the individual (1) has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997); (2) has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or (3) has been civilly or administratively adjudicated to have engaged in the activity described in (2) above. The revised questionnaires are consistent with the requirements of provision (a) of this standard. The Agency demonstrated compliance with provision (a) of this standard.
2. LASD provided the audit team with personnel files for all Lomita Station employees that were promoted during the 12 months preceding the audit. During the promotion process, a review of PRMS is conducted to evaluate any allegations and/or incidents involving the employee, including incidents of sexual harassment. LASD stated that the results of the PRMS review are strongly considered when making promotion and assignment decisions. The Agency demonstrated compliance with provision (b) of this standard.
3. LASD conducted live scan background record checks for all current contractors assigned to Lomita Station. Additionally, LASD now requires station personnel to conduct live scan background record checks prior to contact with detainees. The Agency demonstrated compliance with provision (d) of this standard.
4. LASD added live scan fingerprints to the FBI/DOJ database for all employees hired prior to January 1, 2001, that are assigned to Lomita Station, except for individuals who are currently on relieved of duty status or off work due to an injury. LASD is still in the process of live scanning employees hired prior to January 1, 2001, agencywide. The Agency demonstrated compliance with provisions (c) and (e) of this standard.
5. As stated above, on November 8, 2022, LASD implemented revised questionnaires for applicants and employees seeking promotion. The LASD questionnaires include admonishments indicating that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination. Employees continue to be required to report all contact with law enforcement where they are named as a suspect in a report or arrested for a crime. The Agency demonstrated compliance with provisions (f) and (g) of this standard.
6. LASD provided a response from the Los Angeles County’s Office of County Counsel which states in part, LASD is not prohibited by law from providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an

	institutional employer for whom such employee has applied to work. Additionally, the response stated that a waiver from the former employee is required by law for LASD to provide a prospective employer with any substantiated findings of sexual harassment against a coworker or a member of the public, including a detainee. LASD provided the audit team with the waiver form for review. The Agency demonstrated compliance with provision (h) of this standard. The Agency is compliant with all provisions of this standard.

115.118	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 115.118 (a) According to information provided by Lomita Station in the PAQ, LASD has not acquired a new facility or made a substantial expansion or modification to existing facilities since August 20, 2012. Therefore, provision (a) of this standard does not apply to Lomita Station. 115.118 (b) According to information provided by Lomita Station in the PAQ, LASD has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology at Lomita Station since August 20, 2012. Therefore, provision (b) of this standard does not apply to Lomita Station.

115.121	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:

1. Lomita Station’s PAQ Information
2. LASD, CDM, 3-04/025.10, PREA, First Responder Duties and Coordinated Response Protocol, Revised May 3, 2018
3. LASD PREA Response Card
4. H.R. 5578 — 114th Congress: Survivors’ Bill of Rights Act of 2016
5. California Penal Code section 13823.95
6. U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,” Second Edition, NCJ 228119, April 2013
7. County of Los Angeles, Department of Health Services, Sexual Assault Response Team (SART) Center Standards, Reference No. 324
8. County of Los Angeles, Department of Health Services, SART Center Roster
9. LASD’s Prison Rape Elimination Act: Volunteer and Contractor Training Video
10. Agency PREA Coordinator Interview
11. Facility Director Interview
12. Random Staff Interviews

115.121 (a)

The facility indicated in the PAQ that it conducts its own administrative and criminal sexual abuse investigations. The facility indicated that Agency investigators follow a uniform evidence protocol when conducting a sexual abuse investigation.

The facility did not provide the audit team with a uniform evidence protocol. The Agency PREA Coordinator indicated the protocol is in the policy. Expanded course outlines for LASD’s Criminal Investigations and Sexual Assault Investigations Courses were provided for review. Physical evidence collection and preservation is mentioned in the Criminal Investigations Course outline. However, course curriculum was not provided. Therefore, we could not determine if a uniform evidence protocol is included in these courses. The facility provided the audit team with the following two policies for review.

CDM, 3-04/025.10 PREA, First Responder Duties and Coordinated Response Protocol, outlines staff first responder duties. This policy states that upon learning of an allegation that an inmate was sexually abused, department personnel shall:

- Separate the alleged victim(s) and suspect(s)
- Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence.
- If the abuse occurred within the past 120 hours, request the alleged victim, if known, not take any actions that could destroy physical evidence prior to its collection, including but not limited to, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating.
- If the abuse occurred within the past 120 hours, and the quality of the evidence appears to support criminal prosecution, ensure the alleged abuser, if known, does not take any actions that could destroy physical evidence prior to its collection, including but not limited to, washing,

brushing teeth, changing clothes, urinating, defecating, drinking, or eating (inasmuch as is feasible).

This policy states every facility shall establish a "Coordinated Response Protocol" for procedures that shall be followed when there is a report received, whether made verbally or in writing, including third-party and anonymous reports of sexual abuse involving an inmate. It shall include the following:

- First responder duties
- Supervisor responsibilities
- Notifications to CIS
- Notification to Unit Commander
- Notification to Watch Commander
- Notification to PREA Coordinator
- PREA Compliance Manager responsibilities
- Medical and mental health staff responsibilities for immediate and follow-up care
- Contracted hospital(s) where the inmate will be transported to if a forensic Sexual Assault Rape Treatment Protocol (SART) exam is required
- Procedures for providing outside resources to the inmate (e.g., victim advocate during SART exam, contact with rape crisis centers for emotional support, etc.)

The audit team was not provided with a Coordinated Response Protocol for Lomita Station.

The Agency PREA Coordinator indicated the LASD PREA Response Card was created for deputies as a resource in the event they are a first responder. The instructions included on this card for responding deputies is consistent with instructions provided in CDM, 3-04/025.10, PREA, First Responder Duties and Coordinated Response Protocol.

The audit team researched and found one departmental policy that was not provided in the facility’s PAQ. At the audit team’s request, MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, was provided by the Office of PREA Compliance. The audit team reviewed this policy and noted it is relevant to responding deputies and evidence collection. Pursuant to a report of an alleged rape or sexual assault, this policy requires the first responding deputy proceed as follows:

- If the sexual assault incident occurred within 96 hours, transport the victim to the nearest county contracted hospital for treatment and obtain laboratory specimens in the manner prescribed for Department sexual assault evidence kits (sexual assault incidents which are over 96 hours old, do not require an immediate medical examination).
- If the suspect is detained and the incident occurred within 96 hours,

transport the suspect to the nearest County contracted hospital for treatment and obtain laboratory specimens in the manner prescribed for Department sexual assault evidence kits (sexual assault incidents which are over 96 hours old, do not require an immediate medical examination). If sexual assault exams are conducted on the victim and the suspect, ensure that they are kept separated at all times.
- Immediate notification shall be made to Special Victims Bureau without undue delay.

This departmental policy conflicts with CDM, 3-04/025.10, PREA, First Responder Duties and Coordinated Response Protocol and the LASD PREA Response Card. MPP, 5-09/350.05, instructs first responding deputies to transport the victim(s) for treatment and a forensic medical examination if the incident occurred within 96 hours. This timeline differs from best practice of timing considerations for collecting evidence outlined in the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," which states many jurisdictions have now extended the standard cutoff time (e.g., to 5 days or 1 week) for collecting evidence. Additionally, MPP, 5-09/350.05, instructs responding deputies to make immediate notification to the Special Victims Bureau. However, the Special Victims Bureau does not conduct investigations of allegations of sexual abuse that occur in LASD's custody facilities. LASD should ensure that the conflicting policy is revised.

The Agency PREA Coordinator and Facility Director indicated that upon receiving a report of sexual abuse, the facility would refer to the agency policy to coordinate a response to an incident. Interviews with random staff indicated that first responders would notify their supervisor, separate the alleged victim(s) and suspect(s), and secure the crime scene. Investigative staff indicated first responders and deputies conducting preliminary investigative steps would secure the crime scene and preserve and/or collect evidence. It was also mentioned that LASD's crime lab collects evidence.

The facility did not demonstrate compliance with provision (a) of this standard.

115.121 (b)

Lomita Station does not house juveniles and youthful detainees. Juveniles are not held in the lockup and cannot be held at the station for more than six hours before being released to a guardian or juvenile facility. See Standard 115.114 for additional analysis regarding juveniles and youthful detainees at Lomita Station.

The facility did not provide the audit team with a uniform evidence protocol for review. Therefore, we were unable to determine if the protocol was adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.

	Interviewed random staff indicated they recently viewed LASD’s PREA training video (Prison Rape Elimination Act: Volunteer and Contractor Training Video), which includes basic training regarding how to detect and respond to victims of sexual abuse. The facility did not demonstrate compliance with provision (b) of this standard. 115.121 (c) According to information provided by Lomita Station in the PAQ, the facility offers all detainees who experience sexual abuse access to forensic medical examinations. The facility indicated forensic medical examinations are offered without financial cost to the victim. The facility indicated such examinations are always provide by a Sexual Assault Nurse Examiner (SANE) or Sexual Assault Forensic Examiner (SAFE). The facility did not have any allegations of sexual abuse in the 12 months preceding the audit. CDM, 3-04/025.10 PREA, First Responder Duties and Coordinated Response Protocol, states treatment services shall be provided to the victim without financial cost, regardless of whether the victim names the suspect or cooperates with an investigation from the incident. The Survivors' Bill of Rights Act of 2016 states a sexual assault survivor has a right not to be prevented from, or charged for, receiving a medical forensic examination. Additionally, California Penal Code section 13823.95 states any costs incurred by a qualified health care professional, hospital, clinic, sexual assault forensic examination team, or other emergency medical facility for a medical evidentiary examination of a victim of a sexual assault shall not be charged directly or indirectly to the victim of the assault. The audit team conducted research and found the Los Angeles County Department of Health Services’ Sexual Assault Response Team (SART) Center Standards. Department of Health Services established the minimum standards required for the designation of SART Team Centers in Los Angeles County. The SART Centers provide care to victims of sexual assault by meeting specific requirements for professional staff, quality improvement, education, support services, equipment, supplies, medications, and established policies and procedures. SART Center initial designation and SART Center re-designation is granted for a period of three years after satisfactory review by Department of Health Services’ Emergency Medical Services Agency. The audit team reviewed the SART Center Roster and noted 10 facilities that detainees can be transported to. The Facility Director indicated following an allegation of sexual abuse in Lomita Station’s lockup, victim(s) would immediately be transported for emergency medical treatment. He indicated a forensic medical examination would be provided at Providence Little Company of Mary San Pedro/Torrance Center. The audit team noted this facility is listed on the SART Center Roster. During the onsite audit, the audit team also observed the SART Center Roster posted in the report writing room as a resource for deputies. The facility is complaint with provision (c) of this standard.

115.121 (d)

The Agency PREA Coordinator confirmed detainee victims are transported for a forensic examination to an outside hospital. He indicated that if the hospital offers victim advocacy services, the detainee shall be permitted to use such services to the extent available, consistent with security needs. The facility is compliant with provision (d) of this standard.

115.121 (e)

LASD conducts its own administrative and criminal investigations of sexual abuse. Therefore, provision (e) of this standard does not apply to Lomita Station.

The facility is not compliant with provisions (a) and (b) of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall develop, implement, and institutionalize a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions. This protocol shall be adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011.
2. LASD shall provide the audit team with the following documentation for review:
    - Any additional departmental and/or unit level policy, procedures, and/or protocols detailing uniform evidence protocols and/or evidence collection protocols related to this standard;
    - Lomita Station's Uniform Evidence Protocol;
    - Lomita Station's Coordinated Response Protocol;
    - LASD's Criminal Investigations Course Curriculum; and
    - LASD's Sexual Assault Investigations Course Curriculum.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD provided the audit team with its "Manual of Policy and Procedures (MPP): Chapter 4 - Property and Evidence Procedures" on March 29, 2023, which reportedly serves as its uniform evidence protocol for sworn personnel. This manual does not appear to be consistent with the requirements of provision (b) of this standard. For example, the manual does not include the 120-hour timeframe for recovering DNA evidence in accordance with the U.S. Department of Justice's Office on Violence Against Women 2013 publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents." The audit team also met with members of LASD's Scientific Services Bureau, who are responsible for

	analyzing evidence collected from crime scenes, including SART kits and other DNA evidence collected from PREA-related incidents. Scientific Services Bureau personnel can respond to and process crime scenes throughout Los Angeles County, including LASD lockups. Although it appears that the Scientific Services Bureau has clear protocols for collecting and analyzing evidence, the audit team found instances where the evidence was not analyzed within the required timeframes. In addition, the audit team reviewed PREA-related cases where Scientific Services Bureau personnel were not called to the scene, and deputy personnel collected evidence. In one case reviewed by the audit team, deputy personnel collected evidence from multiple victims/suspects without changing their gloves, a practice that could result in cross-contamination of DNA evidence. LASD informed the audit team that it plans to update its policies, procedures, and training curriculum for evidence collection in accordance with this standard and retrain staff on the updated protocols. 2. LASD provided the audit team with MPP, Chapter 4 - Property and Evidence Procedures, as its proof of practice for this standard. The audit team did not receive Lomita Station's Coordinated Response Protocol, or any relevant course curriculum related to training of the uniform evidence protocol. Additionally, during the audit team's review of investigations, it became apparent that staff are not following the requirements for evidence collection in a uniform manner. For instance, in one investigation, responding deputies and the assigned detective investigator did not collect a reference DNA sample from the victim/suspect, resulting in LASD's Scientific Services Bureau not completing a DNA analysis. The facility/Agency is not compliant with provisions (a) and (b) of this standard.

115.122	**Policies to ensure referrals of allegations for investigations**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/025.15, PREA – Criminal and Administrative Investigations, Revised April 3, 2018 3. LASD, CDM, 8-03/060.00, PREA-Related Grievances, Revised July 15, 2016 4. LASD, MPP, Volume 4, Case Assignment and Reporting 5. Agency Head Designee Interview 6. Information from the Special Victims Bureau (SVB) 115.122 (a)

	Lomita Station indicated in the PAQ that the Agency ensures an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse and staff sexual misconduct). The facility indicated there were zero allegations of sexual abuse and sexual harassment during the 12 months preceding the audit. The facility also indicated there has never been an allegation of sexual abuse or sexual harassment in the station's lockup. Therefore, no criminal and administrative investigations have been completed. CDM, 3-04/025.15, PREA – Criminal and Administrative Investigations, outlines criminal and administrative investigations. CDM, 8-03/060.00, PREA-Related Grievances, states inmate grievances involving allegations described in the Prison Rape Elimination Act (PREA) shall be thoroughly investigated. The Agency indicated this policy is currently being revised. These policies do not include language that mandates an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse and staff sexual misconduct). It is recommended that LASD revise policy to include such language. The Agency Head Designee indicated an investigation is conducted for all allegations of sexual abuse or sexual harassment. He indicated inmate-on-inmate allegations of a criminal nature are referred to Custody Investigative Services, Jail Investigation Unit (JIU) for investigation. The Agency Head Designee indicated MPP, Volume 4, Case Assignment and Reporting, is followed, and depending on the gravity of the crime, an allegation may be assigned to SVB for investigation. He indicated staff-on-inmate allegations of sexual abuse or sexual harassment are referred to Internal Criminal Investigations Bureau (ICIB) or Internal Affairs Bureau (IAB) depending on the nature of the allegations. ICIB conducts criminal investigations and IAB conducts administrative investigations. Additionally, allegations that are not criminal in nature can be investigated by staff assigned to the facility. The audit team reviewed MPP, Volume 4, Case Assignment and Reporting. This policy outlines investigative case assignments by crime. Crimes are listed in alphabetical order. Under "Prisoners," the policy indicates incidents occurring at any custody facility are assigned to JIU or appropriate Detective Bureau or Detail. Under "Rape/Sexual Assault," the policy indicates cases are assigned to SVB. SVB indicated they provide resources or guidance if requested because they have expertise but would never handle an investigation into allegations of sexual abuse or sexual harassment occurring in a custody facility. This policy is discussed in Standard 115.171, and revisions are suggested to provide clear guidance regarding assignments of criminal allegations of sexual abuse occurring in custody facilities, including inmate-on-inmate and staff-on-inmate allegations. As stated above, the policies provided do not include language that mandates an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse and staff sexual misconduct). Additionally, there are no completed investigative reports

	for PREA-related allegations from Lomita Station to review. Agency proof of practice is required to demonstrate compliance with provision (a) of this standard. To determine Agency investigative practices, the audit team requested investigative files. However, the audit team was provided with the requested investigative files just days before this interim report was issued. Therefore, a complete analysis could not be conducted by the audit team for this interim audit report and will be included in the final audit report. LASD did not demonstrate compliance with provision (a) of this standard. 115.122 (b) The Agency conducts its own administrative and criminal investigations of sexual abuse and sexual harassment in its lockups. Therefore, provision (b) of this standard does not apply to Lomita Station. 115.122 (c)-(d) The auditor is not required to audit these provisions. LASD is not compliant with provision (a) of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall provide any additional departmental policy that requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment (including detainee-on-detainee sexual abuse and staff sexual misconduct). 2. LASD shall provide the audit team with proof of practice to demonstrate compliance with this standard. This shall include any requested allegation trackers and investigative files for criminal and administrative investigations into allegations of sexual abuse and sexual harassment occurring in custody facilities. 3. LASD shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. During the corrective action period, LASD revised CDM, 3-04/025.15, PREA – Criminal and Administrative Investigations, and CDM, 8-03/060.00, PREA-Related Grievances, and provided draft policies to the audit team for review. The revised polices are consistent with the requirements of provision (a) of this standard. However, LASD did not finalize, implement, and institutionalize the policies. The Agency is not compliant with provision (a) of this standard.

115.131	Employee and volunteer training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD, CDM, 3-04/025.50, PREA - Employee Training, Revised April 3, 2018 3. LASD Prison Rape Elimination Act: Volunteer and Contractor Training Video 4. Custody Training and Standards Bureau Sexual Assault/Abuse and Harassment Course Curriculum 5. Employee and volunteer training records 6. LASD Intranet Splash Page screenshot 7. Random Staff Interviews 8. Volunteer Interviews 115.131 (a)-(b) CDM, 3-04/025.50, PREA – Employee Training, states the Department shall provide PREA training to all employees who have contact with inmates. This policy also states that all current employees who have not received such training shall be trained within one year of the effective date of the PREA standards and shall receive refresher training every two years to ensure all employees know the Department's sexual abuse and sexual harassment policies and procedures. During years in which an employee does not receive training, updated information on sexual abuse and sexual harassment policies shall be provided, documented, and tracked by the Department member's concerned facility's training unit. The LASD Prison Rape Elimination Act: Volunteer and Contractor Training Video was created by Just Detention International and LASD. The audit team reviewed the video and noted that the video was developed to train volunteers and contractors. However, the video addresses staff throughout the video. The audit team noted the video includes training on topics required by provision (a) of this standard. It would be best practice to ensure training curriculum is tailored to the specific individual receiving the training. While the topics in the video address employee requirements, to avoid any confusion, it is recommended that the video be revised, or a new video is created and tailored to employees. Custody Training and Standards Bureau Sexual Assault/Abuse and Harassment Course Curriculum was provided for review. This course is completed by deputies and custody assistants during their academy training. The audit team reviewed the course curriculum and noted it includes topics required by provision (a) of this standard. The audit team reviewed a random sample of Lomita Station staff and volunteer training records and noted PREA training was implemented in October 2022, just

two weeks prior to the onsite audit. While new deputies and custody assistants receive PREA training during the academy, the audit team was not provided with academy training records and cannot determine when such training was received by deputies and custody assistants assigned to Lomita Station. Additionally, the audit team was not provided with any documentation related to refresher training for employees that may have received PREA training prior to October 2022.

Interviews with randomly selected staff and volunteers confirmed PREA training was recently implemented. Staff and volunteers interviewed indicated they viewed a PREA video in October 2022. Interviewed staff and volunteers demonstrated an understanding of the training they received, including the topics required by provision (a) of this standard.

Lomita Station indicated in the PAQ that annual refresher training is provided to all LASD staff. The facility indicated that between trainings, it provides staff and volunteers who may have contact with detainees with refresher information about current policies and procedures regarding sexual abuse and sexual harassment. The facility provided no additional information or documentation regarding refresher training. The facility also indicated that a monthly “splash page” refresher is provided to all LASD staff. The splash page appears when staff access LASD’s intranet. The facility provided a screen shot of the splash page, which includes information regarding the agency’s zero-tolerance policy, information on how to report PREA violations, and a link to LASD’s PREA resources on the Agency’s intranet.

Institutionalization of practices are required to demonstrate compliance with PREA standards. Because the implementation of PREA training at Lomita Station is recent, the practice is not yet institutionalized. The facility is not compliant with provisions (a) and (b) of this standard.

115.131 (c)

The employee training records reviewed by the audit team included the employee number, name, signature, date, and a “yes,” indicating they understood the training they received. The facility is compliant with provision (c) of this standard.

LASD is not compliant with provisions (a) and (b) of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall institutionalize PREA training which includes topics required by provision (a) of this standard. Training shall be provided to new staff and volunteers prior to having contact with detainees and/or inmate workers.
2. LASD shall provide annual refresher information to all staff who may have contact with detainees and/or inmate workers to ensure that they understand the Agency’s current sexual abuse and sexual harassment policies and procedures.

	Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD provided the audit team with an updated training video for employees, which includes topics required by provision (a) of this standard. LASD also provided completed training rosters which indicate that newly assigned Lomita Station personnel and volunteers completed the training prior to having contact with detainees and/or inmate workers. The Agency demonstrated compliance with provision (a) of this standard. 2. To ensure that employees are provided with ongoing PREA refresher training, LASD implemented the updated training video in its Learning Management System (LMS). All employees are required to watch the updated training video and sign an acknowledgement of understanding annually. Because volunteers do not have access to the LMS, the facility volunteer coordinator is responsible for ensuring volunteers receive annual refresher training. The Agency demonstrated compliance with provision (b) of this standard. The Agency is compliant with all provisions of this standard.

115.132	**Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD Zero Tolerance Posters 3. Detainee Booking Packets 4. LASD Station Jail Orientation Form (SH-R-449), Revised May 2022 5. Prison Rape Elimination Act (PREA) Comprehensive Inmate Education and Acknowledgement Form (SH-J-633), Revised February 2021 6. LASD PREA Zero Tolerance Pamphlet (SH-J-478) 7. LASD Prison Rape Elimination Act: Volunteer and Contractor Training Video 8. Lomita Station contractor training records 9. Detainee Interviews 10. Contractor Interviews 11. Inmate Worker Interviews 12. Observations made during the site review and informal discussions with staff 115.132 (a) The facility indicated in the PAQ that during the intake process, staff notify all detainees of the Agency’s zero-tolerance policy regarding sexual abuse and sexual

	harassment. The facility did not indicate how many detainees were given this information at intake during the past 12 months. The Station Jail Orientation Form, PREA Comprehensive Inmate Education and Acknowledgement Form, and the PREA Zero Tolerance Pamphlet include information regarding LASD's zero-tolerance policy and how to report allegations of sexual abuse. The facility provided the audit team with the PREA Zero Tolerance Pamphlets and the PREA Comprehensive Inmate Education and Acknowledgement Form in 10 different languages. During the site review and informal conversations with staff, it was noted that some staff did not know how to obtain information in other formats that can be understood by detainees who are LEP (foreign languages other than Spanish), visually impaired, mentally ill, or have limited reading skills. During the site review, the audit team noted PREA Zero Tolerance Posters in English and Spanish in the intake area and throughout the lockup. These posters include information regarding how to report allegations of sexual abuse and/or sexual harassment. The audit team observed a demonstration of the intake and booking process and noted detainees are provided with the Station Jail Orientation Form, PREA Comprehensive Inmate Education and Acknowledgement Form, and a verbal explanation of the information. Detainees sign these forms acknowledging they received and understand the information. Staff performing the demonstration indicated PREA information is provided in several different languages. The audit team interviewed, and reviewed the booking packets for, five detainees. We noted that all five detainees signed the PREA Comprehensive Inmate Education Acknowledgement Form and Jail Orientation Form. We requested booking packets for detainees booked at Lomita station for randomly selected dates in the 12 months preceding the onsite audit. The audit team reviewed booking files for these randomly selected dates and noted detainees signed the Jail Orientation Form indicating they received and understand the Agency’s zero-tolerance policy. During interviews, intake staff indicated that information about the Agency’s zero-tolerance policy regarding sexual abuse and sexual harassment is provided to detainees during the booking process. Some intake staff stated they were not aware of how to obtain the PREA Zero Tolerance Pamphlet in foreign languages other than Spanish. Additionally, intake staff were not aware of how to obtain information in formats that can be understood by detainees who are visually impaired, developmentally delayed, mentally ill, or have limited reading skills. During interviews with the five detainees, a majority indicated they were provided with information regarding the Agency’s zero-tolerance policy during the booking process and had the document in their possession. The facility did not demonstrate compliance with provision (a) of this standard. 115.132 (b) The facility indicated in the PAQ that contractors and inmates who work in the facility are informed of the Agency’s zero-tolerance policy regarding sexual abuse and sexual harassment upon entering the facility.

	The LASD Prison Rape Elimination Act: Volunteer and Contractor Training Video was created by Just Detention International and LASD. The audit team reviewed the video and noted the video was developed to train volunteers and contractors. The audit team noted the video includes information regarding the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment. During interviews, the contractor indicated they were informed about the Agency's zero-tolerance policy and demonstrated an understanding of the information. This training consisted of watching the LASD Prison Rape Elimination Act: Volunteer and Contractor Training Video. The audit team interviewed three inmate workers. The inmate workers indicated they were informed about the Agency's zero-tolerance policy and demonstrated an understanding of this information. They indicated they were recently shown a video on sexual safety in confinement. The facility provided the audit team with acknowledgements signed by inmate workers indicated they received and understand the Agency's zero-tolerance policy. The facility demonstrated compliance with provision (b) of this standard. The facility is not compliant with provision (a) of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall notify all detainees of the Agency's zero-tolerance policy regarding sexual abuse and sexual harassment. LASD shall ensure this information is provided to detainees in a manner they can understand. LASD shall ensure Lomita Station staff are informed on how to provide information regarding the Agency's zero-tolerance policy in such formats. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD provided the audit team with a Jail Staff Briefing regarding Translation/ Interpretation of PREA Inmate Educational Materials, and additional tools that staff may utilize to ensure detainees who are LEP, deaf, visually impaired, disabled, developmentally delayed, mentally ill, or have limited reading skills are notified of the Agency's zero-tolerance policy. LASD will need to finalize, implement, retrain, and institutionalize this practice of notifying all detainees of the Agency's zero-tolerance policy. The Agency did not demonstrated compliance with provision (a) of this standard. The Agency is not compliant with provision (a) of this standard.

115.134	**Specialized training: Investigations**
	Auditor Overall Determination: Does Not Meet Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Lomita Station's PAQ Information
2. LASD, CDM, 3-04/025.50 PREA - Employee Training, Revised April 3, 2018
3. LASD, Criminal Investigations, CCN 31410, Expanded Course Outline
4. LASD, Sexual Assault Investigations, CCN 33435, Expanded Course Outline
5. List of Deputy Academy Learning Domains
6. National Institute of Corrections (NIC) PREA Investigating Sexual Abuse in a Confinement Setting Course curriculum
7. Investigative Staff Training Records
8. Investigative Staff Interviews

115.134 (a)-(c)

The facility indicated in the PAQ that agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.

CDM, 3-04/025.50, PREA - Employee Training, states the department shall provide PREA training to all employees who have contact with inmates. In addition to the general training provided to all employees, this policy requires that investigating deputies shall receive specialized training. The training shall include at minimum all training topics required under the PREA standards.

The Agency provided expanded course outlines for LASD's Criminal Investigations and Sexual Assault Investigations Courses and a list of Deputy Academy Learning Domains. According to the Agency PREA Coordinator, all deputy sheriffs attend the LASD Academy and complete the LASD Criminal Investigations course in addition to the regular learning domains. The Agency PREA Coordinator also indicated the Sexual Assault Investigations course is a 40-hour advanced course for investigators that meets the specialized training requirement. The audit team reviewed the expanded course outlines and list of learning domains and was unable to determine if the courses included topics required by this standard, including:

- Techniques for interviewing sexual abuse victims, which includes training about the impact of trauma on a victim's memory and ability to communicate about the event.
- Proper use of Miranda and Garrity warnings, which are warnings that are designed to allow people in criminal or administrative investigations to be silent and are necessary to ensure that any information gathered during an interview is admissible in court should there be a prosecution that arises from the incident.
- Sexual abuse evidence collection in confinement settings, which includes how to preserve evidence in a confinement setting, and the challenges to doing so that are particular to the kind of evidence of sexual abuse that exists in a confinement setting.

- The criteria and evidence required to substantiate a case for administrative action or prosecution referral.

The audit team reviewed the NIC PREA Investigating Sexual Abuse in a Confinement Setting Course curriculum and noted the course includes topics required by this standard.

The audit team interviewed a total of six investigative staff. The audit team reviewed training records for the six investigative staff that were interviewed. All six investigative staff received general PREA training that is provided to all LASD employees. One investigative staff completed the NIC PREA Investigative Sexual Abuse in a Confinement Setting Course, which meets the requirements of this standard. The audit team was unable to determine if the remaining five investigative staff have completed specialized training that meets the requirements of this standard. The audit team will need to review additional training records and course materials in order to determine if the remaining five investigative staff have completed training that meets the requirements of this standard. Additionally, the audit team was not provided with requested investigative files in time to review for this report. Therefore, the audit team could not confirm who conducts PREA-related investigations. LASD did not demonstrate compliance with provisions (a) through (c) of this standard.

LASD is not compliant with all provisions of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall ensure that all staff who conduct sexual abuse investigations receive specialized training for conducting. sexual abuse investigations in a confinement setting. The training shall include the topics required by this standard. The training shall be provided in addition to general PREA training, which is required by Standard 115.131.
2. LASD shall maintain documentation that Agency investigative staff have completed the required specialized training in conducting sexual abuse investigations.
3. LASD shall provide the audit team with any requested investigative files for review. These files are required to determine who conducts PREA-related investigations and determine if they have completed specialized training required by this standard.
4. LASD shall provide the audit team with additional training records and course materials in order to demonstrate that agency investigative staff have completed training that meets the requirements of this standard. This shall include course materials for LASD’s Deputy Academy and Criminal Investigations, and Sexual Assault Investigations Courses, as well as any additional training records required to demonstrate compliance.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD indicated it has initiated NIC PREA Investigating Sexual Abuse in a Confinement Setting Training for all investigators that conduct criminal and administrative investigations of PREA-related incidents. LASD provided the audit team with a LASD Sworn Personnel Briefing regarding a Garrity Advisement that it plans to provide to staff upon approval. LASD has not trained or institutionalized the specialized training for all investigators. The Agency did not demonstrate compliance with provisions (a) and (b) of this standard.
2. LASD indicated that operations staff in the three units that investigate PREA-related incidents will maintain the training records once staff complete the required specialized training. However, LASD has not provided proof of practice and did not finalize, implement, train, and institutionalize this practice. The Agency did not demonstrate compliance with provision (c) of this standard.
3. LASD provided the audit team with requested investigative files during the corrective action period. The audit team determined that responding deputies conducted initial investigations. These deputies have not received specialized training for conducting sexual abuse investigations in a confinement setting that is consistent with the requirements of this standard. LASD currently has two investigators that have completed specialized training consistent with the requirements of this standard. LASD should ensure only qualified investigators that have received specialized training consistent with the requirements of this standard conduct investigations into PREA-related incidents.
4. The audit team attended employee PREA training at LASD's Deputy Academy and Jail Operations Academy to determine if the training provided is consistent with the requirements of provision (b) of this standard. The audit team noted the training does not include the proper use of Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The Agency did not demonstrate compliance with provision (b) of this standard.

The Agency is not compliant with provisions (a), (b), and (c) of this standard.

115.141	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information

2. LASD, CDM, 6-04/020.00, Station Jail Inmate Classification Questionnaire, Revised March 5, 2018
3. LASD, CDM 6-02/030.00, Jailer, Revised January 10, 2020
4. Station Jail Inmate Classification Questionnaire, Revised December 2011
5. Los Angeles County Unified Arrestee Medical Screening Form, Revised April 2020
6. 9-Line Booking Form
7. Specialized Staff Interview - Staff who perform screening for risk of victimization and abusiveness
8. Random Staff Interviews
9. Detainee Interviews
10. Observations made during the site review and informal discussions with staff

115.141(a)

This provision is not applicable because the facility houses detainees overnight.

115.141(b)-(d)

The facility did not indicate in the PAQ how many detainees were screened for risk of sexual victimization or risk of sexually abusing other detainees in the 12 months preceding the audit. The current intake assessment consists of questions from multiple screening instruments, including the 9-Line Booking Form, Station Jail Inmate Classification Questionnaire, and the Los Angeles County Unified Arrestee Medical Screening Form.

The 9-Line Booking Form displays basic identifying information, including name, date of birth, charges, height, and weight. The Station Jail Inmate Classification Questionnaire uses a point system that assigns points related to charges, current behavior, gang affiliation, whether the detainee is a member of the LGBT community, whether the detainee cannot be housed with anyone or in the general population, and other miscellaneous classification criteria to determine housing.

CDM, 6-04/020.00, Station Jail Inmate Classification Questionnaire, delineates requirements for classifying and segregating detainees, in addition to instructing jailers on how to utilize the questionnaire to determine housing. However, the policy does not mention sexual safety, nor does it provide guidance on how jailers should utilize the information collected through the questionnaire to screen and assess the risk of being sexually abused by other detainees or sexually abusive toward other detainees. The audit team was also provided with CDM, 6-02/030.00, Jailer, which describes the duties and responsibilities of the jailers at station jails. This policy also does not reference sexual safety or the mandate to screen detainees for PREA-related risk factors prior to making housing determinations.

Additionally, the audit team was provided with the Los Angeles County Unified Arrestee Medical Screening Form, which is typically completed by arresting deputies, but can also be completed by the jailer. The form also includes questions

	that the arresting deputy and jailer must complete based on observations of the detainee. These questions include whether the detainee has a mental, physical, or developmental disability, the detainee's behavior, and other medical and mental-health-related questions. The audit team was unable to observe an actual screening because there were no new bookings during the onsite audit. However, auditors were able to observe a demonstration of the intake and booking process, which included the screening instruments. Interviews and informal discussions with random staff and staff who perform screening for risk of victimization and abusiveness indicate the information collected in these instruments is used to identify safe housing in accordance with the standard. The audit team reviewed the booking files for the detainees interviewed by the audit team and determined the three documents that collect the data required by this standard were included in the files. The audit team also requested booking files for detainees arrested between December 29, 2021, and January 4, 2022, and June 29, 2022, and July 5, 2022, to ensure the required questions were being asked and the information was being documented. During these time frames, there were 30 detainees booked and housed at Lomita Station and all 30 booking files included the required documents. Each of the screening instruments gather pertinent information such as whether the detainee has a mental, physical, or developmental disability, the age of the detainee, the physical build and appearance of the detainee, whether the detainee has previously been incarcerated, the nature of the detainee's alleged offense and criminal history, and the detainee's own perception of their vulnerability. It is evident that staff are utilizing the gathered data to assess risk of sexual abuse and abusiveness and the data is being used to make housing determinations. The facility demonstrated compliance with all applicable provisions of this standard.

115.151	**Detainee reporting**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. CDM, 3-04/025.40, PREA – Inmate Education, Revised April 3, 2018 3. LASD, CDM, 3-04/025.50, PREA – Employee Training, Revised April 3, 2018 4. LASD, CDM, 4-01/000.00, Crime Reporting Procedures, Revised December 8, 2021 5. LASD, CDM, 6-03/010.00, Booking and Property Record Form (SH-J-293),

Revised May 31, 2022

6. LASD, MPP, 3-02/290.10, Specific Guidelines, Revised August 11, 2017
7. LASD PREA Zero Tolerance Posters
8. LASD PREA Zero Tolerance Pamphlet (SH-J-478)
9. LASD PREA Comprehensive Inmate Education Acknowledgment Form (SH-J-632), Revised February 2021
10. LASD Station Jail Orientation Form (SH-R-449), Revised May 2022
11. Los Angeles Regional Crime Stoppers Participation Agreement with the Los Angeles County Sheriff's Department, Dated July 14, 2022
12. A Guide Through Custody – Los Angeles County Jail, SH-J-447, Revised November 2020
13. Pre-Audit Guidebook for Random Staff, Dated August 3, 2022
14. PREA Coordinator Interview
15. Random Staff Interviews
16. Detainee Interviews

115.151 (a)

According to the information provided in Lomita Station's PAQ, the Agency reports that it has established procedures allowing for multiple internal ways for detainees to privately report sexual abuse, sexual harassment, retaliation by other detainees or staff, and staff neglect or violation of responsibilities that may have contributed to such incidents. This information is provided to detainees through various means.

Under CDM 6-03/010.00, Booking and Property Record Form (SH-J-293), the booking packet is required to include the PREA Zero Tolerance Pamphlet, the Station Jail Orientation Form, and the PREA Comprehensive Inmate Education Acknowledgment Form. This policy was last revised on May 31, 2022. Prior to this revision, the booking packet was not required to include the PREA Zero Tolerance Pamphlet, the Station Jail Orientation Form, or the PREA Comprehensive Inmate Education Acknowledgment Form.

The PREA Zero Tolerance Pamphlet provides that detainees may report sexual abuse or sexual harassment by:

- Calling Los Angeles Crime Stoppers' reporting hotline by dialing *21;
- Telling any person who works or volunteers at the station;
- Filling out an inmate request or grievance form; or
- Telling someone outside the facility or family members who can report to Los Angeles Crime Stoppers at (800) 222-8477.

The Station Jail Orientation Form provides that detainees may report sexual assault or sexual abuse by:

- Notifying Sheriff's Department personnel;
- Filling out a confidential Inmate Grievance Form; or

- Dialing *21 from a county facility phone.

The PREA Comprehensive Inmate Education Acknowledgment Form provides that detainees may report sexual abuse, sexual harassment, and retaliation by staff or other detainees by:

- Telling any person who work or volunteers at the station;
- Submitting a written grievance;
- Submitting a written medical request form;
- Calling Los Angeles Crime Stoppers at (800) 222-8477 or dialing *21 from any inmate phone; or
- Asking a family member or friend to report on behalf of the detainee.

During the site review, the audit team observed LASD PREA Zero Tolerance Posters in English and Spanish in the intake area and throughout the lockup. The posters provide the following information for detainees on “How to Report” allegations of sexual abuse and sexual harassment:

- Reporting to any staff, volunteer, contractor, or medical or mental health staff;
- Calling the Los Angeles Crime Stoppers by dialing *21;
- Telling family, friend, or the OIG; or
- Submitting a confidential request/Grievance Form.

The audit team did not observe the intake process as there were a limited number of detainees at the facility that arrived prior to the onsite audit and subsequent bookings of detainees occurred while the audit team was not onsite. A jailor performed a mock booking/intake for the audit team. The audit team interviewed five detainees who reported that most of them received PREA information during intake. The audit team interviewed the detainees regarding their understanding of how to make reports of sexual abuse, sexual harassment, and retaliation. Most detainees indicated that they could report sexual abuse and sexual harassment in writing or verbally. Staff indicated that they provide detainees with pencils and grievance forms, upon request.

CDM, 3-04/025.50, PREA - Employee Training, provides that the Department shall provide PREA training to all employees who have contact with inmates. The audit team verified that staff and volunteers conveyed a good understanding of the requirements to report sexual abuse, sexual harassment, and retaliation. Interviewed staff named a few ways to report abuse, such as, privately reporting the incident to Los Angeles Regional Crime Stoppers or reporting to a supervisor. The audit team visited the housing area of the station jail during the onsite review and noted that the PREA Zero Tolerance Posters informing detainees on ways in which to report abuse were posted in the station jail in English and Spanish, including near the telephones.

	Lastly, none of the documentation provided by LASD that apply to detainees in the lockup indicate ways in which detainees can privately report staff neglect or violation of responsibilities that may have contributed to incidents of sexual abuse, sexual harassment, or retaliation. While LASD did provide the “A Guide Through Custody – Los Angeles County Jail” packet that does note the ability to report staff neglect or violation of responsibilities which may have contributed to incidents of sexual abuse and/or sexual harassment, this packet is not provided to detainees in the station lockups. Inmates are provided this packet upon entering LASD’s Inmate Reception Center. LASD did not demonstrate compliance with this provision (a) of this standard. 115.151 (b) The PREA Zero Tolerance Pamphlet, the Station Jail Orientation Form, and the PREA Comprehensive Inmate Education Acknowledgment Form all inform the detainees of their ability to report sexual abuse or sexual harassment to Crime Stoppers, an entity that is not a part of LASD. Pursuant to the Crime Stoppers Participation Agreement with LASD, Crime Stoppers operates a system through which members of the community can submit completely anonymous crime tips via the toll-free telephone number (as well as text messaging and email). The Participation Agreement further provides that all tips received by Crime Stoppers will be forwarded to the predestinated contacts within the agency. The audit team performed multiple test calls to Crime Stoppers from a holding cell within the lockup. Upon initially dialing *21, the phone rang multiple times and disconnected. A few minutes later, the audit team called Crime Stoppers again. The telephone system did not require a pin number to reach Crime Stoppers. The auditor spoke to Operator #862 and asked the operator to submit a “test” report. The audit team contacted the Agency PREA Coordinator and confirmed receipt of the test call. The audit team was unable to verify whether calls to Crime Stoppers from the lockup telephones are monitored and/or recorded. The Agency PREA Coordinator provided the audit team with LASD’s contact from Global Tel Link, the telecommunication company that operates the telephones, to request additional information. The audit team emailed the representative but has yet to hear back. This information is required to demonstrate compliance with provision (b) of this standard. 115.151 (c) CDM, 4-01/000.00, Crime Reporting Procedures, provides that custody personnel shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment involving an inmate, whether made verbally or in writing, including third-party and anonymous reports (regardless of whether the alleged incident occurred at another facility or agency) to their immediate supervisors and complete the necessary report(s). This policy also requires that staff immediately report any knowledge of retaliation against inmates or staff who have reported an incident of sexual abuse or sexual harassment

	involving an inmate. MPP, 3-02/290.10, Specific Guidelines, provides that all deferred crime and arrest reports shall be approved by the watch sergeant and that the deputy personnel shall complete a deferred report by the end of shift the next day. A report may be deferred for the following types of incidents: • No workable information; • Misdemeanor field releases; • Misdemeanor non-desirous Felony, no workable information; • Traffic collision with no injuries; • Traffic collisions with minor injuries and no follow-up; or • Any report that the watch sergeant or watch commander approved to be deferred During interviews, staff conveyed an understanding of the requirement to accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. In addition, most staff understood the requirement to document verbal reports of sexual abuse, sexual harassment, and retaliation immediately. Some staff stated that they would immediately report any verbal reports of sexual abuse, harassment, and retaliation to a supervisor and that the supervisor would be responsible for documenting the report promptly. The facility is in compliance with provision (c) of this standard. 115.151 (d) Lomita Station indicated in the PAQ that the Agency has established procedures for staff to privately report sexual abuse and sexual harassment of detainees. The facility indicated that staff are informed of these procedures through PREA training and the Agency’s intranet “splash page.” CDM, 4-01/000.00, Crime Reporting Procedures, provides that if Department members would like to privately report an incident of sexual abuse or harassment of an inmate, they shall report it to the on-duty watch commander. CDM, 3-04/025.50, PREA - Employee Training, states that all employees who have contact with inmates shall be provided with PREA training. The audit team was provided with a screenshot of the Agency’s intranet splash page, which indicates the following ways to report PREA violations: • Advise your supervisor; • Call the Internal Affairs Bureau tip line at 800-698-8255; • Call LA Crime Stoppers at 800-222-8477; and • Go to www.LaCrimeStoppers.org. The splash page also provides staff with a link to LASD’s PREA Resources page on the intranet. Some random staff were provided with a “Pre-Audit Guidebook” in preparation of the PREA audit. The audit team reviewed this guidebook and noted that it states

staff may refer to the splash screen for information on how to report.

Interviewed staff were aware of several ways to privately report sexual abuse and sexual harassment of detainees. Staff indicated that they can privately report incidents of sexual abuse or harassment of an inmate to LASD's Internal Affairs Bureau Tip Line or Crime Stoppers. The facility is in compliance with provision (d) of this standard.

LASD did not demonstrate compliance with provisions (a) and (b) of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall establish procedures on and inform detainees of ways in which detainees can privately report staff neglect or violation of responsibilities that may have contributed to incidents of sexual abuse, sexual harassment, or retaliation.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. On May 18, 2023, LASD provided the audit team with a revised copy of the Zero Tolerance Poster. LASD added language to the poster that includes, "[r]eport staff neglect or a violation of staff responsibilities that contributed to sexual abuse or sexual harassment against inmates of the Los Angeles County Jails." The poster provides instruction on how to report sexual abuse, sexual harassment, staff neglect or violation of staff responsibilities. On June 2, 2023, the audit team conducted a site visit at Lomita Station and confirmed that the revised PREA Zero Tolerance Posters were posted in the station jail. LASD finalized and implemented the revised PREA Zero Tolerance Poster. The facility is compliant with provision (a) of this standard.
2. LASD also provided the audit team with a copy of the revised PREA Comprehensive Inmate Education Form. It includes the following language, "[y]ou have the right to report staff neglect or a violation of staff's responsibilities that contributed to sexual abuse or sexual harassment." Detainees receive a tangible copy of this document upon being booked. The revised language is consistent with the requirements of provision (a) of this standard. However, the audit team determined that Lomita Station was not utilizing the newly drafted document during the site visit. The audit team recommends implementing the newly drafted PREA Comprehensive Inmate Education Form.
3. The audit team verified with Global Tel Link that calls to Crime Stoppers from lockups are not monitored or recorded. The Agency is compliant with provision (b) of this standard.

The Agency is compliant with all provisions of this standard.

115.154	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD PREA Zero Tolerance Posters 3. Los Angeles County Sheriff's Department Website – Prison Rape Elimination Act (https://lasd.org/custody/#prea) 4. Observations made during the on-site review 115.154 (a) According to the information provided by Lomita Station in the PAQ, LASD reports that it has established methods to receive third-party reports of sexual abuse and sexual harassment in its lockups from Crime Stoppers, American Civil Liberties Union (ACLU) and the Los Angeles County Office of Inspector General (OIG). The Agency also reports that it publicly distributes information on how third parties can report detainee sexual abuse or sexual harassment on LASD's Website at the following url: https://lasd.org/custody/#prea. During the site review, the audit team observed LASD PREA Zero Tolerance Posters in English and Spanish in the intake area, throughout the lockup, and in the lobby of the station with information on "How to Report" allegations of sexual abuse and sexual harassment. The posters list five ways to report allegations of sexual abuse and harassment. Of the five ways, the following three pertain to third-party reporting: • Reporting to any staff, volunteer, contractor, or medical or mental health staff; • Calling the LARCS at 800-222-8477; or • Telling family, friend, or the OIG. Lomita Station staff and volunteers conveyed a good understanding of the requirement to report sexual abuse and sexual harassment immediately, whether the report was made verbally, in writing, anonymously, or from a third party. Depending on whether staff were law enforcement or non-law enforcement, they would either document the report and initiate a response or notify a supervisor who would be responsible for documenting the report and initiating a response. As discussed under Standard 115.151, Crime Stoppers operates a system through which members of the community can submit completely anonymous crime tips via the toll-free telephone number (as well as text messaging and email). The Participation Agreement provides that all tips received by Crime Stoppers will be forwarded to the predestinated contacts within the agency. During the onsite

	inspections, the audit team submitted a test report to Crime Stoppers and received written confirmation from the PREA Coordinator that the call was forwarded to LASD. As the oversight entity for LASD, the OIG accepts complaints from detainees, inmates, members of the public, community organizations and other County agencies. This includes all allegations of sexual abuse, sexual harassment, retaliation, and staff neglect or violation of responsibilities that may have contributed to such incidents. Each complaint is reviewed by OIG staff and forwarded to the appropriate facility or station for proper handling. If the complaint alleges sexual abuse and/or sexual harassment, the OIG also submits the complaint to LASD's PREA Coordinator. Furthermore, the audit team, which is comprised of OIG staff, is apprised of the ACLU's complaint process and notes that complaints received by the ACLU, including allegations of sexual abuse and/or sexual harassment, are also forwarded to LASD for handling. LASD's Custody Operations website has a section dedicated to providing PREA information to the public. In addition to providing general information about PREA, the website also provides that reports of sexual abuse and sexual harassment can be made by inmates, friends or family of inmates, attorneys, community members, or anyone who suspects or witnesses sexual abuse or sexual harassment. The website states that the public can report sexual abuse or sexual harassment to any LASD staff member, contractor, or volunteer, and that they would be required to report the allegation to the unit administration in accordance with Department policies. Furthermore, the website states that the public can report to Crime Stoppers via the toll-free telephone number or email, both of which are listed, or by contacting LASD's PREA Coordinator by emailing prea-coordinator@lasd.org. The audit team sent a test message to the PREA Coordinator email address listed on the website and received confirmation that the message was received. LASD demonstrated compliance with this standard.

115.161	**Staff and agency reporting duties**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 4-01/000.00, Crime Reporting Procedures: Notification of Sexual Abuse or Sexual Harassment Involving an Inmate, Revised December 8, 2021 3. Agency PREA Coordinator Interview 4. Facility Director Interview

5. Random Staff Interviews
6. Informal discussions with staff during the site review

115.161 (a)

CDM, 4-01/000.00, Crime Reporting Procedures: Notification of Sexual Abuse or Sexual Harassment Involving an Inmate, states that staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment involving an inmate, whether made verbally or in writing, including third-party and anonymous reports (regardless of whether the alleged incident occurred at another facility or agency) to their immediate supervisor and complete necessary report(s). The audit team interviewed 13 random staff. All interviewed staff indicated that they would immediately report sexual abuse or sexual harassment of a detainee to their supervisor and generate necessary reports.

CDM, 4-01/000.00, Crime Reporting Procedures: Notification of Sexual Abuse or Sexual Harassment involving an Inmate, states that in accordance with the Prison Rape Elimination Act (PREA) of 2003, custody personnel shall immediately report any knowledge of retaliation against inmates or staff who have reported an incident of sexual abuse or sexual harassment involving an inmate. Interviews with random staff also reflected a good understanding of this policy and their lawful obligation to report all incidents.

The standard requires that the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse, sexual harassment, retaliation, and staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The facility provided two policies (CDM, 3-04/025.55, PREA- Protection Against Retaliation and CDM, 5-12/005.05, Anti-Retaliation Policy) to support a compliance finding. A review of both policies reflects that the policies fail to include language that requires staff to immediately report knowledge, suspicion, or information regarding staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Interviewed random staff indicated that they would immediately report staff neglect or violation of responsibilities to their immediate supervisor. Based on the policy language not addressing staff neglect or violation of responsibilities, LASD did not demonstrate compliance with provision (a) of this standard.

115.161 (b)

CDM, 4-01/000.00, Crime Reporting Procedures, last revised on December 8, 2021, states that Department members shall not reveal any information related to a sexual abuse or sexual harassment report to anyone other than to the extent necessary to obtain treatment or aid in the investigation. Interviewed random staff members all had a good understanding of the policy. They are aware of the importance of confidentiality involving sexual abuse information and only share internally with those who need to know.

	During the site review, the audit team observed the physical storage area of hard copy booking packets located in the Administrative Jailors Office. The booking packets are in a locked and secured area. The booking packets are also maintained electronically and requires a log-in by the user. The facility is compliant with provision (b) of this standard. 115.161 (c) The standard requires that if an alleged victim is under the age of 18 or considered a vulnerable adult under a state or local vulnerable persons statute, the agency shall report the allegation to the designated state or local services agency under applicable mandatory reporting laws. The Facility Director indicated that the incident would be handled in the same manner as allegations involving adult sexual abuse victims except that the Department of Child and Family Services would be contacted because they are mandatory reporters of child abuse and neglect. LASD does not refer criminal activity to outside agencies to investigate. The PREA Coordinator indicated that he has not experienced this situation because underage detainees are only held for a maximum of six hours. It is unclear whether a report of sexual abuse of a juvenile or a vulnerable adult would be reported to a state or local services agency under applicable reporting laws, if handled by the facility because they have not had any incidents involving a victim under the age of 18 and no documentation to verify this practice. Interviews of random staff reflected a good understanding of how to handle and keep youthful detainees safe. Staff indicated juveniles are held in the report writing room inside the station, which is outside the lockup area where adults are held. Staff indicated juveniles are monitored by sworn staff under constant direct supervision and cannot be held at the station for more than six hours before being released to a guardian or juvenile facility. The Special Victims Bureau indicated that if a victim is under the age of 18 and is sexually abused while in custody, the agency will contact the Department of Children and Family Services to report the incident. The information is entered into the Electronic Suspected Child Abuse Report System (ESCARS). The County of Los Angeles utilizes ESCARS to aid in parallel investigations by facilitating the transfer of information between social workers and law enforcement. LASD documents their investigative files to reflect that they contacted the Department of Children and Family Services to report the abuse. Agency proof of practice is required to determine compliance with provision (c) of this standard. Additionally, these requirements should be memorialized in current policy. 115.161 (d) The standard requires that the agency shall report all allegations of sexual abuse, including third-party and anonymous reports, to the agency’s designated investigators. The Agency Head Designee confirmed that all allegations of sexual abuse, including third-party and anonymous reports, are handled by designated investigators within LASD. For inmate-on-inmate allegations, the investigation would be handled by Jail Investigations Unit (JIU). Staff-on-inmate allegations are assigned

	to Internal Criminal Investigations Bureau (ICIB) for investigation. Interviews with investigative staff corroborated that LASD conducts their own investigations, including third-party and anonymous reports. The facility is compliant with provision (d) of this standard. LASD is not compliant with provisions (a) and (c) of this standard. Corrective action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall revise CDM, 4-01/000.00, Crime Reporting Procedures: Notification of Sexual Abuse or Sexual Harassment Involving an Inmate, to include specific language requiring staff to immediately report any knowledge, suspicion, or information of any staff neglect or violation of responsibilities that may have contributed to an incident of retaliation. 2. LASD shall train staff to immediately report any knowledge, suspicion, or information of any staff neglect or violations of responsibilities that may have contributed to an incident or retaliation. LASD shall provide staff with examples so they can identify staff neglect or violation of responsibilities. 3. LASD shall provide investigative files to the audit team to support the proof of practice that the agency reports allegations of sexual abuse to designated state or local services under applicable mandatory reporting laws. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD revised CDM, 4-01/000.00, Crime Reporting Procedures: Notification of Sexual Abuse or Sexual Harassment Involving an Inmate, to include specific language requiring staff to immediately report any knowledge, suspicion, or information of any staff neglect or violation of responsibilities that may have contributed to an incident of retaliation. The revised draft policy is consistent with the requirements of provision (a) of this standard. However, LASD did not finalize, implement, train, and institutionalize the revised policy. 2. Since the onsite audit, LASD has not trained staff to immediately report any knowledge, suspicion, or information of any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. The Agency indicated that training is contingent upon policy approval. 3. Within the preceding three years, Lomita Station has not had any allegations of sexual abuse that required LASD to report to designated state or local services under applicable reporting laws. The Agency is not compliant with provision (a) of this standard.

115.162	**Agency protection duties**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Lomita Station’s PAQ Information
2. LASD, CDM, 6-04/020.00, Station Jail Inmate Classification Questionnaire (SH-R-456)
3. LASD, CDM, 6-04/040.00, Administrative Segregation
4. LASD, CDM, 5-02/050, Classification, Screening, and Housing of Gay, Gender Non-Conforming, Intersex and Transgender Inmates, Revised February 8, 2018
5. LASD, CDM, 6-03/000.00, Policies and Procedures
6. LASD, CDM, 5-01/030.00, Inmate Classification and Identification
7. LASD, CDM, 3-04/025.10, Staff First Responder Duties
8. Agency Head Designee Interview
9. Facility Director Interview
10. Random Staff Interviews

115.162

LASD provided the audit team with four policies relating to classification and screening of detainees, one policy addressing administrative segregation and a policy pertaining to staff first responder duties for our analysis. The policies provide proactive steps to protect detainees upon entering the lockup, but none specifically address incidents involving imminent sexual abuse that occur after classification, screening, and housing. CDM, 3-04/025.10, Staff First Responder Duties, addresses the Departments response after learning of an allegation that a detainee was sexually abused.

Lomita Station indicated in the PAQ that it has not had any instances in the last 12 months where a detainee was subjected to substantial risk of imminent harm. However, the information is not tracked by the facility. The facility should ensure any incidents where a detainee is subjected to substantial risk of imminent harm is tracked. LASD should develop a tracking mechanism to include the time the risk was recognized, the time that action was taken by staff to protect the detainee, and the details of the incident. The documentation should include the average amount of time and longest amount of time that passed before acting.

Interviews with randomly selected custody staff indicated a good understanding of steps to ensure immediate protection of a detainee who is subject to a substantial risk of imminent sexual abuse. Interviewed staff indicated that they would act immediately to remove the detainee from the dangerous situation and separate for their safety. If there is not enough room to house the detainee alone, the detainee will be transported by patrol car to LASD's Inmate Reception Center (IRC) or Century Regional Detention Facility (CRDF) to be housed. The Agency Head Designee and Facility Director confirmed a detainee would be sent to LASD's Inmate Reception Center if they could not be housed safely at Lomita Station. Although this standard

	does not require policy, LASD should consider memorializing expectations and practice in current PREA policies and develop a tracking mechanism. The facility demonstrated compliance with this standard.

115.163	Reporting to other confinement facilities
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/025.15, Criminal and Administrative Investigations, Revised April 3, 2018 3. LASD, CDM, 8-03/060.00, PREA - Related Grievances, Revised July 15, 2016 4. Facility Director Interview 5. Agency Head Designee Interview 115.163 (a)-(d) CDM, 3-04/025.15 Criminal and Administrative Investigations, states a courtesy report shall be taken for inmates who report criminal incidents of sexual abuse that occurred in a Department facility at a previous time or confinement facility outside of the Departments purview. The agency where the incident occurred shall be notified of the courtesy report or any allegation where a courtesy report was not taken within 72 hours of the allegation. The PREA Compliance Manager of the facility shall track all courtesy reports/allegations and notifications made to other agencies. The policy language fails to require the "head of the facility" receiving the inmate report to notify the head of the other facility or appropriate office of the agency where the sexual abuse is alleged to have occurred. The policy language also does not include clear language that the notification must be made as soon as possible, but no later than 72 hours and documented in the same time frame. In the past 12 months, the facility indicated in the PAQ that they have not had any allegations that a detainee was sexually abused while confined at another facility. The Facility Director indicated that they have not received any allegations from another facility or agency that an incident of sexual abuse occurred at Lomita Station, nor have they sent courtesy reports to other agencies providing notification that sexual abuse occurred while someone was detained at another facility. The Facility Director indicated that upon receiving an allegation that a detainee was sexually abused while confined at Lomita Station or another facility. JUI or ICIB would be notified, the allegation would be documented, and an inquiry into the allegation would commence. The Agency Head Designee indicated that LASD's PREA Coordinator is the

designated point of contact. However, this is not consistent with the Agency's PREA policy that states that the PREA Compliance Manager is responsible for tracking all courtesy reports/allegations and notifications made to other agencies.

The audit team was advised by the Agency Head Designee that a PREA alert would be generated and everyone that needs to be notified will be notified, including the facility commander, captain, PREA Compliance Team and grievance team. He stated that the policy provides guidance on how to respond. The Agency Head Designee indicated that the Office of PREA Compliance has records of the notifications. LASD did not provide proof of practice to verify notifications are documented or investigated.

LASD did not demonstrate compliance with this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall revise CDM, 3-04/025.15, Criminal and Administrative Investigations, to ensure it is consistent with the requirements of this standard.
2. LASD shall provide proof of practice to verify that notifications are made within 72 hours, notifications are documented, and allegations are investigated in accordance with this standard.
3. LASD shall ensure that upon receiving an allegation that a detainee was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. LASD shall train the Facility Head regarding how to handle reporting to other confinement facilities in accordance with this standard. The Agency shall provide proof that the Facility Head was provided with such training.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD revised CDM, 3-04/025.15, Criminal and Administrative Investigations to include language that PREA-related sexual abuse shall be reported "as soon as possible" but no later than 72 hours of the allegation. In addition, LASD added language to the draft policy that states, "[u]pon receiving an allegation that a detainee was sexually abused while confined at a facility outside of the Department's purview, the responsible LASD Unit Commander shall notify the head of the facility or the appropriate office of the agency where the alleged sexual abuse occurred." The draft policy is consistent with the requirements of provision (a) of this standard. However, LASD did not finalize, implement, or institutionalize the revised policy.
2. Lomita Station was unable to provide proof of practice because there were no sexual abuse incidents at the facility. However, the audit team examined a notification from a different LASD facility where the notification was made within 72 hours. However, the notification was not made by the head of the

	facility as required by provision (a) of this standard. 3. LASD's Office of PREA Compliance developed a PowerPoint presentation to train Unit Commanders on their role and responsibilities pertaining to PREA notifications made to outside agencies. The audit team was also provided with a template that assists the Unit Commander with making notifications to outside law enforcement agencies. Although the Unit Commander received training on June 2, 2023, the Unit Commander was unable to demonstrate a sufficient understanding of the notification requirements to outside confinement agencies during an interview with an audit team member. The Agency is not compliant with provision (a) of this standard.

115.164	**Staff first responder duties**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ information 2. LASD, CDM, 3-04/025.10, PREA - First Responder Duties and Coordinated Response Protocol, Revised May 3, 2018 3. LASD, MPP, 5-09/350.05 - Responsibilities of Station/Unit Personnel and Responding 4. LASD PREA Response Card 5. Random Staff Interviews 6. Law Enforcement Staff and Non-Law Enforcement Staff First Responders Interviews 115.164 (a) According to the information provided by Lomita Station in the PAQ, the Agency has established a first responder policy for allegations of sexual abuse. In addition, the PAQ notes that in the past 12 months, there were zero allegations that a detainee was sexually abused at Lomita Station. As such, no documentation was provided for responses to allegations of sexual abuse. CDM, 3-04/025.10, PREA - First Responder Duties and Coordinated Response

	Protocol, provides that, upon learning of an allegation that an inmate was sexually abused, staff shall: Separate the alleged victim(s) and suspect(s); Preserve and protect the crime scene until appropriate steps can be taken to collect any evidence; If the abuse occurred within the past 120 hours, request the alleged victim, if known, not take any actions that could destroy physical evidence prior to its collection, including but not limited to, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating; and If the abuse occurred within the past 120 hours, and the quality of the evidence appears to support criminal prosecution, ensure the alleged abuser, if known, does not take any actions that could destroy physical evidence prior to its collection, including but not limited to, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating (inasmuch as is feasible). Custody personnel have a LASD PREA Response Card with step-by-step instructions to follow that align with this CDM policy. This CDM policy meets all the required elements of this provision and, as discussed under Standard 115.121, comports with current best practices, which indicates that DNA evidence may be recoverable up to 120 hours after sexual abuse. The audit team also reviewed MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, which directs responding deputies to transport the victim for treatment and a forensic exam if the assault occurred within 96 hours. This MPP policy not only contradicts the CDM policy, but it also does not conform with current best practices. LASD should re-evaluate the MPP policy. Interviews with random custody staff revealed an understanding of all first responder steps, including separating the alleged victim(s) and suspect(s), securing the crime scene; and preserving and protecting the crime scene until appropriate steps can be taken to collect any evidence, including protocols that maximizes the potential for obtaining usable physical evidence. LASD is compliant with provision (a) of this standard. 115.164 (b) According to the information provided by Lomita Station in the PAQ, the Agency reports that all staff first responders are law enforcement, and thus, no agency policy requires the first staff responder who is not a law enforcement staff to request that the alleged victim not take any actions that could destroy physical evidence and notify law enforcement staff immediately. All staff members who work at the Lomita Station have some level of contact with inmate workers who are regularly at the facility. As such, non-law-enforcement staff might find themselves in a situation where they are the first to be notified of an allegation of sexual abuse by an alleged victim. The PAQ completed by the Lomita Station provides that no non-law-enforcement staff enter the lockup area. The PAQ indicated that Custody Assistants are Corrections Officers as dictated by the Board of State and Community Corrections. The audit team did not observe any non-law-enforcement staff in the lockup area during the onsite audit.

	During interviews, non-law-enforcement staff conveyed an understanding of the requirement to notify law enforcement staff immediately if they are notified of an allegation of sexual abuse. Most non-law-enforcement staff also indicated that they would take steps to ensure the safety of the alleged victim, such as not allowing the alleged victim to return to their housing unit in the event of imminent danger of further abuse. However, most non-law-enforcement staff did not indicate that they would request that the alleged victim not take any actions that could destroy physical evidence as required by provision 115.164 (b). LASD did not demonstrate compliance with provision (b) of this standard. LASD did not demonstrate compliance with this standard. Recommended Corrective Action as of December 5, 2022: 1. LASD shall revise MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, to ensure that it reflects best practices for the preservation of evidence and that it does not conflict with any other existing policies. 2. LASD shall develop and implement training for all Lomita Station staff regarding staff first responder duties consistent with this standard. The Agency shall provide the audit team with proof that such training was provided. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD revised and finalized MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Special Victims Bureau Personnel on Rape and Sexual Assault Cases on December 16, 2022, to comport with current best practices, which provides that DNA evidence is recoverable up to 120 hours after an assault. The revised policy is now consistent with CDM, 3-04/025.10, First Responder Duties and Coordinated Response Protocol. 2. On December 23, 2022, LASD’s Field Operations Support Services Unit issued a department-wide email containing the updated version of MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Special Victims Bureau on Rape and Sexual Assault Cases. During the post onsite visit on June 2, 2023, and subsequent conversations with the audit team, seasoned staff indicated that DNA evidence is recoverable up to 120 hours. The Agency is compliant with all provisions of this standard.

115.165	**Coordinated response**

Auditor Overall Determination: Does Not Meet Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Lomita Station’s PAQ information
2. LASD, CDM, 3-04/025.10, PREA - First Responder Duties and Coordinated Response Protocol, Revised on May 3, 2018
3. 45 Code of Federal Regulations (CFR) section 164.512 (k)(5)(i)(A)-(F)
4. Facility Director Interview

115.165 (a)

According to the information provided by Lomita Station in the PAQ, LASD reports that it has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and Agency leadership.

CDM, 3-04/025.10, PREA - First Responder Duties and Coordinated Response Protocol, states that every facility shall establish a “Coordinated Response Protocol” for procedures that shall be followed when there is a report received, whether made verbally or in writing, including third-party and anonymous reports of sexual abuse involving an inmate. It shall include the following: First responder duties; Supervisor responsibilities; Notifications to CIS; Notification to Unit Commander; Notification to Watch Commander; Notification to PREA Coordinator; PREA Compliance Manager responsibilities; Medical and mental health staff responsibilities for immediate and follow-up care; Contracted hospital(s) where the inmate will be transported to if a forensic Sexual Assault Rape Treatment Protocol (SART) exam is required; and Procedures for providing outside resources to the inmate (e.g., victim advocate during SART exam, contact with rape crisis centers for emotional support, etc.)

Lomita Station does not have a written “Coordinated Response Protocol” to respond to allegations of sexual abuse as required by LASD's policy. During the interview, the Facility Director stated that, upon receiving a report of sexual abuse, the facility would refer to the above Agency policy to coordinate a response to an incident and take necessary steps to provide medical care to the victim. Yet, the Agency policy requires that every facility establish its own Coordinated Response Protocol. Likewise, the provision requires that facilities develop a facility-specific written institutional plan to coordinate responses to incidents of sexual abuse. In addition, the provision requires that the written plan identify, describe, and coordinate the duties of, at a minimum, the following individuals: staff first responders, medical and mental health practitioners, investigators, and facility leadership. The written plan must also establish how the responsible staff will perform their required functions and work together in response to an incident of sexual abuse. LASD did not demonstrate compliance with provision (a) of this standard.

115.165 (b)

	According to the information provided by Lomita Station in the PAQ, the Agency reports that it is permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse, of the incident and the victim's potential need for medical or social services pursuant to 45 CFR section 164.512 (k)(5)(i)(A)-(F), which provides: (5) Correctional institutions and other law enforcement custodial situations – (i) Permitted disclosures. A covered entity may disclose to a correctional institution or a law enforcement official having lawful custody of an inmate or other individual protected health information about such inmate or individual, if the correctional institution or such law enforcement official represents that such protected health information is necessary for: (A) The provision of health care to such individuals; (B) The health and safety of such individual or other inmates; (C) The health and safety of the officers or employees of or others at the correctional institution; (D) The health and safety of such individuals and officers or other persons responsible for the transporting of inmates or their transfer from one institution, facility, or setting to another; (E) Law enforcement on the premises of the correctional institution; or (F) The administration and maintenance of the safety, security, and good order of the correctional institution. While this section of the CFR does discuss uses and disclosures of protected health information without the authorization of the individual or the opportunity for the individual to agree or object in certain situations, it applies only to covered entities as defined by 45 CFR section 160.103. Under 45 CFR section 160.103, a "covered entity" is defined as (1) a health plan, (2) a health care clearinghouse, and (3) a health care provider who transmits any health information in electronic form in connection with certain transactions. As such, the CFR section provided by the Agency pertains to situations where the three covered entities may disclose protected health information to a correctional institution or a law enforcement representative, not situations where a correctional institution or law enforcement agency may inform a jail, prison, or medical facility of an allegation of sexual abuse or the victim's potential need for medical or social services as discussed under provision 115.165 (b). The PAQ reflected that there were zero instances within the last 12 months where a victim was transferred from the lockup to a jail, prison, or medical facility that would have triggered the Agency's requirements under provision 115.165 (b) to inform the receiving facility of an incident and the victims potential need for medical or social services due to a sexual assault or otherwise.

	The Facility Director indicated that Lomita Station has never transferred a detainee who has been sexually abused to a medical facility for treatment. Although unsure of the legality of disclosing detainee medical information to a medical facility, the Facility Director indicated that LASD has an obligation to ensure that medical aid is rendered, and the victim is safe. It is unclear what information LASD is permitted by law to share and whether or not a victim's request not to share is considered. LASD indicated an opinion from Los Angeles County's Office of County Counsel is pending. LASD is not compliant with provisions (a) and (b) of this standard. Recommended Corrective Action as of December 5, 2022: 1. Lomita Station shall develop, implement, and institutionalize a written institutional plan to coordinate actions taken in response to a lockup incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators, and Agency leadership. The plan must provide detailed guidance to staff, so they have a clear understanding for each staff member’s role and responsibilities. 2. LASD shall provide training to Lomita Station staff regarding the coordinated response protocol and how to fulfill their respective responsibilities. LASD shall provide proof that such training was conducted. 3. LASD shall determine if it is permitted by law to inform a receiving facility, where a victim is transferred because of an allegation of sexual abuse, of the incident and the victim’s potential need for medical or social services. LASD shall provide the audit team with this information. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. LASD revised CDM, 3-04/025.10, PREA - First Responder Duties and Coordinated Response Protocol, which now excludes the requirement that each facility establish their own Coordinated Response Protocol. The policy now applies to all custody facilities to include all patrol stations. The revised policy outlines responsibilities for staff first responders, supervisors, and PREA Compliance Managers, and provides a resource guide for contracted hospitals that perform Sexual Assault Rape Treatment (SART) exams. While the revised policy states that the PREA Compliance Manager is responsible for ensuring that the handling sergeant investigates and renders a disposition promptly, thoroughly, and objectively, it does not provide detailed guidance on investigations. The audit team recommends expanding the policy to include clearly defined investigator duties as many interviewed staff did not understand basic investigative practices or who is responsible for conducting PREA investigations in the station jails. In addition, the draft policy has not been finalized, implemented, or institutionalized for Standard provision 115.165 (a). 2. LASD provided the audit team with a PowerPoint presentation entitled “First Responder Duties and Coordinated Response Protocol” but did not provide

proof that Lomita Station staff received training regarding the coordinated response protocol or how to fulfill their respective responsibilities.

3. Los Angeles County Counsel provided a legal analysis for Standard provision 115.165 (b) which states, in part, that “it would be a violation of California Penal Code Section 673 for a Department member to allow any lack of care whatever which would injure or impair the health of the prisoner, inmate, or person confined. Therefore, when a Department member escorts an inmate to a medical facility or transfers an inmate to another facility, it would violate California Penal Code Section 673 to fail to inform the hospital or receiving facility that the inmate is in need of care. Additionally, per MPP 2-01/000.00, Code of Ethics, Department members have a fundamental duty to serve mankind and safeguard lives. Failure to provide relevant information to medical personnel would violate this policy. Per CDM 3-04/025.00 Prison Rape Elimination Act of 2003 (PREA), Department personnel are required to care for and protect inmates remanded to the custody of the Sheriff. Failure to provide relevant information to medical personnel would violate this policy.” LASD should provide guidance and training to sworn personnel regarding what information can and should be shared so that they have a clear understanding of their responsibilities.

The Agency is not compliant with provisions (a) of this standard.

115.166	Preservation of ability to protect detainees from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Association for Los Angeles Deputy Sheriffs (ALADS) Memorandum of Understanding (MOU) 2. Los Angeles County Professional Peace Officers Association (PPOA) MOU for Custody Assistants/Correctional Officers 3. PPOA MOU for Supervisory Peace Officers 4. Los Angeles County Bargaining Unit; Service Employees International Union (SEIU) Local 721, MOU for Supervising Administrative, Technical, and Staff Services 5. Agency Head Designee Interview 6. Email correspondence from ALADS, PPOA, and SEIU Local 721 7. Email correspondence from PAB 8. Administrative Investigation Dispositions

	115.166 (a)-(b) LASD entered into four collective bargaining agreements with the following labor unions: ALADS MOU, entered into on October 16, 2018, and expired on January 31, 2021; PPOA MOU for Custody Assistants/Correctional Officers entered into a MOU on February 19, 2019, and expired on September 30, 2021; PPOA for Supervisory Peace Officers, entered into a MOU on October 16, 2018, and expired on January 31, 2021; and SEIU Local 721 MOU for Supervising Administrative, Technical and Staff Services entered on December 8, 2015, and expired on September 30, 2018. All four agreements were entered into after August 2012, which complies with this standard. In addition, all four agreements state in varying language that LASD can exercise control and discretion over its organization and operations. LASD has the exclusive right to direct its employees, take disciplinary action for proper cause, relieve its employees from duty, effect work furloughs or any other alternatives, because of lack of work or for other legitimate reasons. Nothing in these agreements limits the Agency's ability to remove alleged staff abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. All the collective bargaining agreements provided by LASD have expired. The Agency Head Designee indicated that the unions have no control over relieving staff of duty or moving them to another role when necessary. The audit team was advised that a deputy can be easily moved to a desk job with no contact with inmates, if needed. It was explained that it is not punitive as it protects both the deputy and inmate victim. LASD has both "line" and "off-line" positions. Policy violation or a criminal allegation will be fully investigated. To ensure that LASD has maintained the right to discipline as appropriate regardless of the expired agreements, the audit team requested and received dispositions for the five most recently closed/completed administrative investigations conducted by IAB involving staff on inmate sexual abuse or sexual harassment allegations at the Agency's custody facilities. All five investigations were closed after the expiration of the collective bargaining agreements. Four out of five of the investigations were founded and resulted in discipline of involved employees which demonstrates that LASD has maintained the right to discipline as appropriate, regardless of the expired agreement. PAB confirmed that despite having expired collective bargaining agreements, LASD maintains the right to discipline as appropriate. The audit team reviewed email correspondence from ALADS, PPOA, and SEIU Local 721 that provided assurances that the expired and upcoming new MOU's do not restrict the Agency's compliance with Standard 115.166. We did not receive correspondence from any other labor unions. Although LASD provided expired Collective Bargaining Agreements, the Agency demonstrated it has maintained the right to discipline as appropriate. The Agency demonstrated compliance with this standard.

115.167	Agency protection against retaliation
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ information 2. Lomita Station Interview Information Request Form 3. LASD, CDM, 3-04/025.55, PREA – Protection Against Retaliation, Revised on April 3, 2018 4. LASD, CDM, 5-12/005.05, Anti-Retaliation Policy, Revised on November 15, 2018 5. LASD, MPP, 3-01/121.35, Policy of Equality – Retaliation, Revised on November 20, 2020 6. LASD, MPP, 3-01/121.55, Policy of Equality – No Retaliation, Revised on November 20, 2020 7. Agency Head Interview 8. Facility Director interview 9. Designated Staff Member Charged with Monitoring Retaliation Interviews 115.167 (a) – (d) According to the information provided by Lomita Station in the PAQ, the Agency reports it has a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or harassment investigations from retaliation by other detainees or staff. Lomita Station indicated in the PAQ that there were no incidents of retaliation that occurred during the 12 months preceding the audit. CDM, 3-04/025.55, PREA - Protection Against Retaliation, provides that the Department does not tolerate any form of retaliation against an inmate for reporting incidents of sexual abuse or sexual harassment by another inmate, Department personnel, volunteers, or contractors, per CDM, 5-12/005.05, Anti-Retaliation Policy. CDM, 5-12/005.05, Anti-Retaliation Policy, states inmates shall not be subject to retaliation for any reason. The policy requires that inmates not be threatened, intimidated, abused, denied privileges or access to programs or services, or disciplined for speaking with a legal representative, advocacy organization, and investigative entity or for expressing any dissatisfaction with any LASD personnel or conditions of confinement. While LASD's anti-retaliation policy is broad, it does not include the specific language to protect detainees and staff who cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff. MPP, 3-01/121.35, Policy of Equality – Retaliation, provides that retaliation for the purpose of the policy is an adverse employment action against another for reporting protected incident, filing a complaint of conduct, or opposing conduct that violates

	this policy or related state or federal law, participating in an investigation, administrative proceeding, or otherwise exercising their rights or performing their duties under this policy or related state or federal law. MPP, 3-01/121.55, Policy of Equality – No Retaliation, absolutely prohibits retaliation and states that no person will be retaliated against for making a complaint of conduct that violates this policy or the law, cooperating in any investigation or corrective action, or otherwise preventing prohibited practices under this policy or the law. These policies, when taken together, demonstrate compliance with the requirement to establish policy to protect all staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation. According to the Lomita Station Interview Information Request Form, the facility has designated Custody Assistants to monitor retaliation for inmate-on-inmate allegations and staff-on-inmate allegations. During interviews with staff who are charged with monitoring retaliation for both inmate-on-inmate allegations and staff-on-inmate allegations, staff advised that they have not had to monitor for retaliation. Staff stated that detainees are typically held at the station for a short period of time before being transferred. Despite not having had to monitor for retaliation, staff conveyed an understanding of the requirements to employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. The Agency has also delineated these requirements under CDM, 3-04/025.55, PREA - Protection Against Retaliation. The Agency Head Designee stated that medical and mental health care is offered to inmate victims and services are offered to staff via the Psychological Service Bureau, and that there are several protective measures that facilities may employ. The Facility Director also explained the various protective measures that may be employed and directed us to related policy. The Agency has established a formal process for monitoring retaliation. CDM, 3-04/025.55, PREA - Protection Against Retaliation, provides that any inmate who reports an incident of sexual abuse or sexual harassment shall be monitored for at least 90 days following the report to see if there is evidence that suggests possible retaliation by other inmates or staff. The policy also requires that monitoring continue beyond the 90 days if the initial monitoring indicates an ongoing need. Additionally, the policy requires that monitoring shall include periodic in-person conversations with inmates by the facility’s PREA Compliance Manager; review of disciplinary incidents involving the inmate; and review of housing or program changes involving the inmate. Furthermore, if retaliation is identified, the policy requires that the facility take appropriate measures to ensure the inmate is protected and that the facility acts promptly to remedy any such retaliation. Staff charged with monitoring retaliation conveyed a good understanding of these requirements, including the requirement to act promptly to remedy retaliation. Although, CDM, 3-04/025.55, Protection Against Retaliation, does not address

monitoring the conduct or treatment of staff who reported sexual abuse of a detainee, conversations with the Agency Head Designee, as detailed below, demonstrated that the Agency would monitor the treatment of staff who have reported sexual abuse and promptly remedy any such retaliation.

This standard also requires that if any other individual who cooperates with an investigation expresses fear of retaliation, the Agency shall take appropriate measures to protect the individual against retaliation. The Agency Head Designee indicated allegations of retaliation are taken very seriously, regardless of whether it is a detainee, staff member, or other individual who is expressing a fear of retaliation. Further, the Agency would apply the same protective measures described above to any detainee that expresses a fear of retaliation for cooperating with an investigation. Allegations of retaliation made by staff would be reported up the chain of command and an inquiry and/or formal investigation would be conducted to determine if there is any misconduct. LASD demonstrated compliance with provisions (b), (c), and (d).

LASD did not demonstrate compliance with provision (a). Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall revise CDM, 3-04/025.55, PREA - Protection Against Retaliation, to include specific language to protect detainees who cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff.
2. LASD shall designate which staff members are charged with monitoring treatment of staff who have reported sexual abuse. This information shall be provided to the audit team. Relevant staff shall be briefed on the revised policy.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD revised CDM, 3-04/025.55, PREA - Protection Against Retaliation, to include language that states, “[t]he Department does not tolerate any form of retaliation against an inmate or a staff member for reporting or cooperating with the investigation of incidents of sexual abuse or sexual harassment by another inmate, Department personnel, volunteers, or contractors.” In addition, the draft policy added language that states, “[t]he station or facility captain or designee shall monitor the retaliation of any staff member who reports or cooperates with the investigation of incidents of sexual abuse or sexual harassment by another inmate, Department personnel, volunteers, or contractors. Any staff who reports an incident of sexual abuse or sexual harassment shall be monitored for at least 90 days following the report to see if there is evidence that suggests possible retaliation by other inmates or staff. Monitoring shall continue beyond the 90 days if the initial monitoring indicates an ongoing need.” The policy revision

	is consistent with the requirements of provision (a) of this standard. However, LASD did not finalize, implement, or institutionalize the revised policy. 2. On May 18, 2023, the audit team received a copy of a PowerPoint presentation developed to train the Lomita Station Facility Director on revised draft policy, CDM, 3-04/025.55 PREA - Protection Against Retaliation. On June 2, 2023, the Facility Director received the training and signed a training roster. The training roster was provided to the audit team for review, which documented that two additional Lomita Station staff also received the training. The revised policy designates the facility's PREA Compliance Manager or designee as the staff member responsible for monitoring retaliation. The audit team received a PREA Contact Roster reflecting the designated PREA Compliance Manager as the staff member responsible for monitoring retaliation for the Lomita Station. During the post onsite visit on June 2, 2023, supervisory staff provided the audit team with the name of the employee charged with monitoring retaliation as reflected in the PREA Contact Roster. The Agency is not compliant with provision (a) of this standard.

115.171	**Criminal and administrative agency investigations**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, April 3, 201 3. LASD's Administrative Investigations Handbook 4. LASD, MPP, Section 5-09/350.05, Responsibilities of Station/Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, Revised 12/12/2013 5. LASD, MPP, 3-01/060.10, Personnel Incident Investigations 6. LASD, MPP, Volume 4, Case Assignment and Reporting 7. Investigative Staff Interviews 8. PREA Coordinator Interview 9. Information from Special Victims Bureau (SVB) 115.171 (a)

	The standard requires that when an agency conducts its own investigations into allegations of sexual abuse and sexual harassment, it shall do so promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports and that the facility has a policy related to criminal and administrative agency investigations. CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, covers both criminal and administrative investigations. However, the policy fails to include language that the investigations shall be conducted promptly, thoroughly, and objectively for all PREA-related allegations, including third-party and anonymous reports. LASD's Administrative Investigations Handbook references MPP, 3-01/060.10, Personnel Incident Investigations. This policy states that incident investigations applicable to all members of the Department shall be conducted in an impartial and objective manner and the purpose is to disclose and report all facts relevant to the matter. However, this policy does not include language that investigations shall be conducted promptly, nor does it include language regarding third-party and anonymous reports. MPP, 5-09/350.05, Responsibilities of Station/Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, states in part, that immediate notification shall be made to SVB without delay. This policy was not conveyed to our audit team by any of the investigative staff interviewed. MPP, Volume 4, Case Assignment and Reporting, outlines investigative case assignments by crime. Crimes are listed in alphabetical order. Under "Prisoners," the policy indicates incidents occurring at any custody facility are assigned to Jail Investigations Unit or appropriate Detective Bureau or Detail. Under "Rape/Sexual Assault," the policy indicates cases are assigned to SVB. It is recommended that LASD revise MPP, 5-09/350.05, Responsibilities of Station/ Unit Personnel and Responding Deputies on Rape and Sexual Assault Cases, and MPP, Volume 4, Case Assignment and Reporting, to provide clear guidance regarding assignments of criminal allegations of sexual abuse occurring in custody facilities, including inmate-on-inmate and staff-on-inmate allegations. The audit team interviewed five investigative staff that work in three different investigative bureaus: Jail Investigations Unit (JIU), Internal Affairs Bureau (IAB), and Internal Criminal Investigations Bureau (ICIB). SVB indicated they provide resources and guidance if requested because they have expertise but would never handle an investigation into allegations of sexual abuse or sexual harassment occurring in a custody facility. Therefore, we did not interview any investigative staff from SVB. Additionally, the audit team interviewed one investigative staff assigned to Lomita Station. All six interviewed investigative staff indicated that they initiate investigations immediately and handle anonymous and third-party reports of sexual abuse and sexual harassment in the same manner as all other complaints. Interviewed random staff were less clear on which investigative bureau gets contacted or deployed when there is an allegation of sexual assault or sexual harassment at the station lockup. Interviews with random staff indicated that

following an allegation of sexual abuse, they would be responsible for immediately conducting preliminary investigative steps and completing an incident report. After the preliminary investigative steps, staff provided mixed responses regarding the investigative process.

The facility indicated that there have not been any investigations involving sexual abuse or sexual harassment at Lomita Station in the last 12 months. Because there were no investigative reports for PREA related allegations to review to determine compliance with this standard, the audit team requested agency investigative files to determine agency investigative practices. The audit team was not provided with requested investigative files in time to review for this report. Therefore, a complete analysis could not be conducted by the audit team for this standard. Agency proof of practice is required to demonstrate compliance with provision (a) of this standard. LASD did not demonstrate compliance with provision (a) of this standard.

115.171 (b)

As stated above, the audit team interviewed a total of six randomly selected investigative staff. Five of the six of the interviewed investigators indicated that they received specialized training in sexual abuse investigations. However, as discussed in Standard 115.134, the audit team was only able to confirm that one investigator completed training that meets the requirements of the standard. Additionally, the audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate compliance with provision (b) of this standard. LASD did not demonstrate compliance with provision (b) of this standard.

115.171 (c)

Interviews with investigative staff reflected they gather and preserve direct and circumstantial evidence, consisting of, physical and DNA evidence, video evidence, detainee movement documentation, interviews of staff, witnesses, victims and suspects, medical documentation and any other reports that are relevant, including grievances, investigations, prior reports of sexual abuse, and complaints. The audit team was not provided with requested investigative files in time for review. Agency proof of practice is required to demonstrate compliance with provision (c) of this standard. LASD did not demonstrate compliance with provision (c) of this standard.

115.171 (d)

CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states that substantiated allegations of sexual abuse that appear to be criminal shall be referred for prosecution. If any additional interviews are required after an incident of sexual abuse has been referred for prosecution, investigators shall consult with prosecutors to review if they create an obstacle for subsequent criminal prosecution. Interviews of criminal investigators indicated that they do not conduct compelled interviews. However, administrative investigators conduct compelled interviews. The audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate

	compliance with provision (d) of this standard. LASD did not demonstrate compliance with provision (d) of this standard. 115.171 (e) CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states, in part, that the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the persons status as an inmate or Department member. The policy continues to state that inmates who make allegations of sexual abuse shall not be subjected to a polygraph examination as a condition for proceeding with an investigation. LASD policy is consistent with the standard. Interviews with Investigative Staff reflected that they do not judge credibility of the individuals interviewed based on their status as an inmate or staff member. They indicated that their assessments are based on facts gathered during their investigation. Furthermore, all investigators stated that they do not require detainees who allege sexual abuse to submit to a polygraph examination. The audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate compliance with provision (e) of this standard. LASD did not demonstrate compliance with provision (e) of this standard. 115.171 (f) CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states that during administrative investigations, investigators shall make an effort to determine whether staff actions or failures to act contributed to an incident of sexual abuse, which is consistent with the standard. However, the same language of determining if staff actions or failures to act contributed to the sexual abuse is not included in the criminal portion of the policy. Investigative staff indicated they consider staff actions or failures to act in their administrative investigations. The audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate compliance with provision (f) of this standard. LASD did not demonstrate compliance with provision (f) of this standard. 115.171 (g) CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states that administrative reports shall also include a description of the physical and/or testimonial evidence, the reasoning behind credibility assessments, investigative facts, and findings under the administrative caption of the policy and not criminal. LASD should consider revising the language in the policy so that documentation requirements for both administrative and criminal investigations are clear. Interviewed criminal investigators indicated that their reports contain physical, testimonial, and documentary evidence. The audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate compliance with provision (g) of this standard. LASD did not demonstrate compliance with provision (g) of this standard.

115.171 (h)

CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states substantiated allegations of sexual abuse that appear to be criminal shall be referred for prosecution. Interviews with investigative staff indicate substantiated allegations of sexual abuse that appear to be criminal are referred for prosecution. The PAQ reflected that Lomita Station has not had any substantiated allegations of conduct that were referred for prosecution since August 20, 2012. The audit team was not provided with requested investigative files in time to review for this report. Agency proof of practice is required to demonstrate compliance with provision (h) of this standard. LASD did not demonstrate compliance with provision (h) of this standard.

115.171 (i)

CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states that all criminal and administrative reports shall be retained as long as the alleged abuser is incarcerated or employed by the Department, plus five years. LASD policy is consistent with the PREA standard. The audit team was not provided with requested investigative files in time to review. Agency proof of practice is required to demonstrate compliance with provision (i) of this standard. LASD did not demonstrate compliance with provision (i) of this standard.

115.171 (j)

The standard requires that the departure of the alleged abuser or victim from the employment or control of the lockup or agency shall not provide a basis for terminating an investigation. CDM, 3-04/025.15, PREA - Criminal and Administrative Investigations, states all sexual abuse investigations shall continue regardless of whether the alleged abuser or victim is no longer in custody or no longer employed with the Department. Interviewed staff indicated that the investigation continues regardless of the departure of the alleged abuser or victim. The audit team was not provided with requested investigative files in time to review. Agency proof of practice is required to demonstrate compliance with provision (j) of this standard. LASD did not demonstrate compliance with provision (j) of this standard.

115.171 (k)

The auditor is not required to audit this provision.

115.171 (l)

The agency conducts its own administrative and criminal investigations of sexual abuse. Therefore, provision (l) of this standard does not apply.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall provide the audit team with proof of practice to demonstrate compliance with this standard. This shall include requested trackers and

investigative files for criminal and administrative investigations into allegations of sexual abuse and sexual harassment occurring in custody facilities.

2. LASD shall ensure investigations into sexual abuse and sexual harassment, including third party and anonymous reports, are conducted promptly, thoroughly, and objectively.
3. LASD shall ensure where sexual abuse is alleged, the Agency uses investigators who have received special training in sexual abuse investigations pursuant to Standard 115.134.
4. LASD shall ensure investigators: (1) gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; (2) interview alleged victims, suspected perpetrators, and witnesses; and (3) review prior complaints and reports of sexual abuse involving the suspected perpetrator.
5. LASD shall ensure the credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as detainee or staff. Additionally, LASD shall not require a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.
6. LASD shall ensure that administrative investigations: (1) include an effort to determine whether staff actions or failures to act contributed to the abuse; and (2) be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.
7. LASD shall ensure criminal investigations are documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence, as well as copies of all documentary evidence where feasible.
8. LASD shall ensure substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.
9. LASD shall retain all written reports referenced in paragraphs (f) and (g) of this section for as long as the alleged abuser is incarcerated or employed by the Agency, plus five years.
10. LASD shall ensure the departure of the alleged abuser or victim from the employment or control of the lockup or Agency shall not provide a basis for terminating an investigation.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

Lomita Station did not have any sexual abuse allegations during the audit period. To evaluate LASD's investigative practices, the audit team selected a random sample of 28 investigative files, including criminal and administrative investigations conducted by investigative staff assigned to ICIB, IAB, JIU, and units (jail facilities and station lockups). The 28 investigative files reviewed include 10 allegations of inmate-on-inmate sexual abuse, 3 allegations of inmate-on-inmate sexual harassment, 11 allegations of staff-on-inmate sexual abuse, and 4 allegations of

staff-on-inmate sexual harassment.

Of the 28 investigations reviewed, 10 were conducted by investigative staff assigned to LASD's IAB or ICIB, and were conducted promptly, thoroughly, and objectively. However, the remaining 18 investigations were conducted by unit level or JIU investigative staff and were not all conducted promptly, thoroughly, and/or objectively. Of the 18 investigations, 17 were initiated promptly, 6 concluded within 30 days, 3 concluded within 90 days, 4 concluded within 120 days, 2 concluded within 150 days, and 3 concluded after more than 180 days (247, 446, 822 days).

Furthermore, of the 18 investigations, 7 did not include a written investigative report or were missing initial or supplemental reports, 9 did not include a through description of physical and testimonial evidence, 5 did not appear to interview all potential involved persons, and 6 did not document preserving and reviewing any available electronic monitoring data. None of the investigative files included documentation regarding if prior complaints or reports involving the suspected perpetrator were reviewed. Additionally, the audit team noted some investigative files were incomplete and did not include documents and correspondence referenced in investigative reports or notes.

In one inmate-on-inmate sexual harassment investigation, documentation indicates the alleged victim requested to move to a cell on the upper tier of the module due to months of sexual harassment by another inmate housed in a nearby cell on the lower tier. The investigation was initiated 26 days after the department received a grievance from the alleged victim and concluded on the same day. In the grievance, the alleged victim indicates they filed another grievance approximately 10 weeks prior and did not receive a response. The investigative file indicates the inmate was interviewed, module staff would "look into a cell move to the upper tier," and module staff were told to "monitor future interactions between the two inmates." The investigative file did not contain a written investigative report or any documentation regarding whether the investigator interviewed the alleged suspect, interviewed any potential witnesses, or reviewed any available CCTV video footage. The allegation was not sustained and relief for the inmate was denied. The audit team reviewed housing location history in LASD's Inmate Total Movement History database and confirmed the alleged victim and suspect were not moved.

In three inmate-on-inmate sexual abuse investigations, initial investigative staff failed to collect DNA evidence during the initial investigation. In one investigation into allegations of battery and sexual battery, several items were collected during the initial investigation and submitted to LASD's Scientific Services Bureau for analysis. However, analysis could not be conducted because a DNA reference sample was not obtained from the alleged suspect or victims. This investigation concluded approximately 106 days after the allegations were reported. This case was referred to the Los Angeles County District Attorney's Office for filing consideration and is pending a response. In another investigation into an allegation of sodomy, a DNA reference sample was obtained from the alleged suspect by JIU investigative staff approximately 31 months after the incident occurred and matched DNA recovered from the victim. This investigation concluded

approximately 822 days after the allegation was reported. The suspect was charged with one felony count of sodomy, two felony counts of forcible oral copulation, and one felony count of sodomy by use of force. According to JIU investigative staff, the suspect was convicted.

In another investigation into an allegation of sodomy, a reference DNA sample was not obtained from the alleged suspect. The alleged victim indicated they were sexually abused by the alleged suspect every day over a three-day period. The victim underwent a sexual assault forensic examination. The Biological Evidence and DNA Examination Report indicates the alleged victim had seminal fluid from two contributors on their anus; however, an insufficient amount of DNA was detected in this sample for analysis. Initial investigative staff documented only reviewing approximately five hours of CCTV video footage from the first day the victim reported being sexually abused due to "time constraints." The case was referred to the Los Angeles County District Attorney's Office for filing consideration and was declined for prosecution. The District Attorney Evaluation Sheet indicated JIU investigative staff should advise deputies involved in the initial investigation that a buccal swab should be requested from a suspect in a case in which a victim receives a sexual assault forensic examination. According to the investigative notes, the District Attorney's Office requested JIU investigative staff review CCTV video for a nine-hour period on each of the three days the victim indicated they were sexually abused. JIU investigative staff reviewed the additional CCTV video and concluded there was no evidence of a crime. The investigative file did not include any preserved CCTV video evidence. The investigation concluded approximately 247 days after the allegation was reported with a disposition of unsubstantiated.

While reviewing JIU investigative files, the audit team noted several extension advisory memos which indicate cases could not be closed "due to large caseloads, court and jury trial appearances, numerous employee assault cases and felony cases that take priority." When the audit team inquired with JIU investigative staff about the lack of promptness and thoroughness in some of the investigations reviewed, JIU investigative staff indicated issues with time restraints due to heavy caseloads and a lack of resources (e.g., County assigned vehicles and cellular telephones). JIU reports there were 63 inmate-on-inmate sexual abuse cases in 2022. Until December 2022, JIU only had one investigator permanently assigned to investigate allegations of inmate-on-inmate sexual abuse referred to JIU for investigation. In December, JIU assigned one additional investigator to investigate PREA-related allegations. The investigators were recently provided one County assigned vehicle and cellular telephones.

The audit team noted that substantiated allegations of conduct that appeared to be criminal were referred for prosecution. LASD did not conduct any compelled interviews during these investigations. The Agency demonstrated compliance with provisions (d) and (h) of this standard.

As discussed under Standard 115.134, LASD only has two investigators within the Agency that have completed specialized training consistent with the requirements of Standard 115.134. Of the 28 investigations reviewed, only 10 were conducted by

	an investigator that has received specialized training consistent with the requirements of Standard 115.134. The Agency did not demonstrate compliance with provisions (a), (b), (c), (e), (f), (g), (i), and (j) of this standard. The Agency is not compliant with provisions (a), (b), (c), (e), (f), (g), (i), and (j) of this standard.

115.172	**Evidentiary standard for administrative investigations**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/020.25, Administrative Investigation Terminology, Revised December 12, 2013 3. Investigative Staff Interviews 115.172 The facility indicated in the PAQ that LASD imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated. LASD, CDM, 3-04/020.25, Administrative Investigation Terminology, is a one-page policy that includes definitions of dispositions for allegations. The policy includes the following definitions: • Founded - when the investigation reveals that the allegation is true and when the action on the part of the Department members is prohibited by law or Department policy. • Unfounded - when the investigation establishes by a preponderance of the evidence that the allegation is not true. • Unresolved - when the investigation fails to resolve the conflict between the complainant's allegation and the Department member's version of the incident; when there is no preponderance of the evidence to support either version of the incident. LASD did not provide the audit team with any additional policies regarding this standard for review.

	During interviews, investigative staff did not convey a consistent understanding of the standard required to substantiate allegations of sexual abuse or sexual harassment. The Agency did not provide the audit team with any proof or documentation to support the standard of proof used in its administrative investigations. LASD did not demonstrate compliance with this standard. Corrective Action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. 2. LASD shall provide the audit team with proof of practice to support the standard of proof used in its administrative investigations. This shall include any investigative files requested by the audit team. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. It is unclear if MPP, 3-04/020.25, Administrative Investigation Terminology, will be revised to include verbiage consistent with the requirements of this standard. However, LASD revised CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, to require that investigators impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. However, this policy was not finalized, implemented, and institutionalized. 2. The proof of practice submitted by LASD did not demonstrate compliance with this standard. Additionally, two staff-on-inmate sexual harassment investigative files reviewed by the audit team did not include a written report that thoroughly described the investigative steps taken to reach the dispositions. Therefore, the audit team was unable to determine what standard of proof imposed by investigators. The Agency is not compliant with this standard.

115.176	**Disciplinary sanctions for staff**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:

1. Lomita Station’s PAQ Information
2. LASD, CDM, 3-04/025.15, PREA- Criminal and Administrative Investigations
3. LASD, CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, Revised April 13, 2018
4. LASD, MPP, 3-04/020.30, Internal Administrative and Criminal Investigations
5. Guidelines for Discipline Handbook, Dated January 1, 2017
6. Personnel files

115.176 (a)

CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, states “Department personnel shall be subject to disciplinary sanctions, up to and including termination, for violating the Departments sexual abuse and/or sexual harassment policies under the Prison Rape Elimination Act of 2003 (PREA).” The language of this policy is consistent with PREA Standard 115.176 (a).

115.176 (b)

The standard requires that termination shall be the presumptive disciplinary sanction for staff who engage in sexual abuse. This language is not located in CDM, 3-04/025.45, CDM, 3-04/025.15, or the Guidelines for Discipline Handbook. The Guidelines for Discipline Handbook provides a discipline and education guide for disciplinary options. The chart provides that inappropriate/disorderly conduct relating to sexual misconduct is punishable by three days to discharge. It is recommended that LASD revise CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, to include language that states that termination is the presumptive disciplinary sanction for staff who engage in sexual abuse.

In the PAQ, Lomita reported that there were no staff members in the last 12 months who had violated sexual abuse and sexual harassment policies. The facility did not provide any policy or proof of practice demonstrating that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. The facility did not demonstrate compliance with provision (b) of this standard.

115.176 (c)

In the PAQ, Lomita reported that there were no staff members from the facility in the last 12 months who have been disciplined, short of termination, for violation of agency sexual abuse or harassment policies (other than engaging in sexual abuse).

The Guidelines for Discipline Handbook, Decision to Discipline (page 6 of 42), states the imposition of the proper discipline stems from a determination of the facts, an evaluation of whether the facts reflect employee misconduct, an assessment of the significance of the misconduct, and the proper disciplinary action response. The extent of the investigation is determined by the nature and seriousness of the allegations, performance problem, or misconduct involved. It further states that the judgment of whether discipline is appropriate should be based upon several factors, including (1) seriousness of the offense; the impact, actual or potential, upon the

Department and/or the community; (2) the length of service and overall performance of the employee; (3) the attitude and culpability of the employee; (4) previous discipline and the length of time since imposed; and (5) harm to the public. The language of the Guidelines for Discipline is general and does not specifically speak to violations of agency policy relating to sexual abuse or sexual harassment. Further, the language does not address sanctions imposed for comparable offenses by other staff with similar history. As such, LASD did not demonstrate compliance with provision (c) of the standard.

115.176 (d)

The PAQ indicated that there were no incidents where staff were reported to law enforcement agencies or licensing boards following their termination or resignation. The audit team recognizes that LASD conducts its own investigations, but the audit team was unable to locate policy language that addresses reporting to relevant licensing bodies. LASD did not provide any additional documents and/or proof of practice demonstrating compliance with provision (d) of this standard.

LASD is not compliant with provisions (b), (c) and (d) of this standard. Corrective action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall provide proof of practice that demonstrates termination is the presumptive disciplinary sanction for staff who engage in sexual abuse.
2. LASD shall provide the audit team with proof of practice that staff disciplinary sanctions relating specifically to sexual abuse and sexual harassment that address violations of agency policy (other than engaging in sexual abuse) are commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offences by other staff with similar histories. This shall include records of disciplinary sanctions taken against staff for violations of the agency sexual abuse or sexual harassment policies.
3. LASD shall provide the audit team with proof of practice that terminations for violations of agency sexual abuse and sexual harassment policies, or resignations by staff who have been terminated if not for their resignation, are reported to relevant licensing bodies. This shall include any departmental policy that includes such language, written procedures that describe the current process in place for reporting such conduct to relevant licensing bodies, or samples of such reports.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD revised CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards, to include, "[t]ermination shall be the presumptive disciplinary sanction for Department employees, contractors and volunteers who have been found to have substantiated allegations of sexual abuse of an inmate."

	The policy revision is consistent with provision (b) of this standard. However, the draft policy has not yet been finalized, implemented, or institutionalized. 2. LASD revised CDM, 3-04/025.45, to include language that states, “[d]isciplinary sanctions for sexual abuse or sexual harassment, other than engaging in sexual abuse, shall be commensurate with the nature and circumstances of the acts committed, the personnel’s disciplinary history, and the sanctions imposed for comparable offenses by previous personnel with similar histories.” The policy revision is consistent with Standard 115.176 (c). However, the draft policy has not yet been finalized, implemented, or institutionalized. 3. LASD further revised CDM, 3-04/025.45 to include language that states, “[d]epartment employees, contractors and volunteers who have been found to have substantiated allegations of sexual abuse of an inmate shall be investigated and reported to the appropriate law enforcement agency and to relevant licensing bodies such as the Commission on Peace Officers Standards and Training, the State Bar of California, or the Contractor State License Board, unless the activity was clearly not criminal.” The policy revision is also consistent with Standard 115.176 (d). However, the draft policy has not been finalized, implemented, or institutionalized. The Agency is not compliant with provisions (b), (c), and (d) of this standard.

115.177	**Corrective action for contractors and volunteers**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD, CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA) Zero Tolerance Policy, Revised May 20, 2013 3. LASD, CDM, 3-04/025.45 Disciplinary Measures for Violating PREA Standards; Contractors and Volunteers, Revised April 3, 2018 4. Facility Director Interview 115.177 (a) In the PAQ, LASD reported that there were no reported incidents of sexual abuse that occurred at Lomita Station involving contractors or volunteers in the last 12 months. CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards under Contractors and Volunteers, states any contractor or volunteer who is found to have

engaged in sexual abuse or sexual harassment of an inmate shall be prohibited from any further contact with inmates. The policy language satisfies the standard requirement.

CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA) Zero Tolerance Policy, states that sexual assault shall not be tolerated at any custody facility operated by the Sheriff. Sexual abuse by an employee, vendor, contracted agency, volunteer, inmate or other non-Department member with a business association with the Department, shall be prohibited. No individual, no matter his or her title or position has the authority to commit or allow sexual abuse of inmates. In accordance with California Penal Code section 673, Department personnel are required to care and protect inmates remanded to the custody of the Sheriff. Violation of Penal Code section 673 is a misdemeanor. LASD conducts its own criminal investigations and would not report the sexual assault to an external law enforcement agency. However, the policy fails to include language on reporting sexual abuse to relevant licensing bodies. LASD is compliant with provision (a) of this standard.

115.177 (b)

CDM, 3-04/025.45 Disciplinary Measures for Violating PREA Standards, states that any contractor or volunteer who is found to have engaged in sexual abuse or sexual harassment of an inmate shall be prohibited from any further contact with inmates. The PAQ stated that there is no supporting documentation for this provision because there have been no contractors or volunteers disciplined for violating the Agency's sexual abuse or sexual harassment policies. The Facility Director indicated that the contractor would immediately be removed from any further contact with detainees. In addition, LASD would initiate a criminal or administrative investigation. As a result, LASD takes appropriate measures to internally investigate a violation of agency sexual abuse or harassment policies involving contractors and volunteers. LASD is not compliant with provision (b) of this standard.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall provide the audit team with proof of practice that any contractor or volunteer who engages in sexual abuse is reported to relevant licensing bodies. This shall include any departmental policy that includes such language, written procedures that describe the current process in place for reporting such conduct to relevant licensing bodies, or samples of such reports.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD revised CDM, 3-04/025.45, Disciplinary Measures for Violating PREA Standards. A draft policy was provided to the audit team for review. The revised language states, in part, “department employees, contractors and volunteers found to have engaged in sexual abuse of an inmate shall be investigated and reported to relevant licensing bodies such as the

	Commission on Peace Officers Standards and Training, the State Bar of California, or the Contractors State License Board." However, LASD did not finalize, implement, or institutionalize the revised policy. The Agency is not complaint with provision (a) of this standard.

115.178	Referral for prosecution for detainee-on-detainee sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/025.15, Criminal and Administrative Investigations, Revised April 3, 2022 115.178 (a) The Lomita Station reported in the PAQ that when there is probable cause to believe that a detainee sexually abused another detainee in a lockup, agency policy requires that the matter be referred to the appropriate prosecuting authority. CDM, 3-04/025.15, Criminal and Administrative Investigations, states in part, substantiated allegations of sexual abuse that appear to be criminal shall be referred for prosecution. After an incident of sexual abuse has been referred for prosecution, if any additional interviews are required, investigators shall consult with prosecutors to review if they create an obstacle for subsequent criminal prosecution. The policy language is consistent with this standard. The PAQ reflects that there have been zero allegations where there was probable cause to believe that a detainee sexually abused another detainee in the facility and that there were zero cases referred to an appropriate prosecuting authority. The Facility Director indicated that JIU would investigate a sexual assault, and substantiated allegations would be referred to the District Attorney's Office for prosecution. LASD did not provide the audit team with proof of practice that when there is probable cause to believe that a detainee sexually abused another detainee in a lockup, the Agency refers the matter to the appropriate prosecuting authority. Additionally, the audit team was not provided with requested Agency investigative files for review. Therefore, the facility did not demonstrate compliance with

	provision (a) of this standard. 115.178 (b) LASD is responsible for all administrative and criminal investigations of allegations of sexual abuse and does not utilize outside agencies to conduct their investigations. As such, provision (b) is not applicable. Recommended Corrective Action as of December 5, 2022: 1. LASD shall provide the audit team with proof of practice that when there is probable cause to believe that a detainee sexually abused another detainee in a lockup, the agency refers the matter to the appropriate prosecuting authority. This shall include any investigative files requested by the audit team for review. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. During the corrective action period, the Agency provided investigative files for the audit team to review. The audit team determined that when there is probable cause to believe that a detainee sexually abused another detainee, the Agency refers the matter to the appropriate prosecuting authority. On March 29, 2023, the audit team reviewed eight additional JIU investigative files that were referred to the appropriate prosecuting authorities involving inmate-on-inmate sexual abuse. LASD has provided proof of practice and met the requirements of Standard 115.178 (a) during the corrective action period. The Agency is compliant with this standard.

115.182	**Access to emergency medical and mental health services**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ 2. LASD, CDM, 304/025.20, PREA – First Responder Duties and Coordinated Response Protocol, Revised June 15, 2021 3. Facility Director Interview 4. Agency PREA Coordinator Interview

5. Random staff Interviews
6. Investigative Staff Interview
7. Correspondence with Correctional Health Services
8. The Sexual Assault Survivors' Right Act of 2016
9. California Penal Code section 13823.95

115.82 (a)

CDM, 3-04/025.20, PREA - Support Services for Inmate Victims of Sexual Abuse, requires that all inmate victims of sexual abuse shall be provided with prompt emergency and crisis intervention services from medical and mental health providers, and victim advocates. The Facility Director and the Agency PREA Coordinator reported that access to emergency medical treatment is provided immediately, and detainees are transported to the hospital for a Sexual Assault Response Team (SART) examination. Interviews with randomly selected staff all indicated that immediate medical treatment would be provided following a report of sexual abuse. The audit team observed a SART Center Roster posted on the wall of the report writing room. The roster provides contact information for Los Angeles County designated sexual assault centers. The facility is compliant with provision (a) of this standard.

115.82 (b)

CDM, 3-04/025.20, PREA - Support Services for Inmate Victims of Sexual Abuse, further states that treatment services for victims shall be provided without financial cost regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The Facility Director confirmed that there would be no financial cost to the victim for medical services.

California Penal Code section 13823.95 states any costs incurred by a qualified health care professional, hospital, clinic, sexual assault forensic examination team, or other emergency medical facility for a medical evidentiary examination of a victim of a sexual assault shall not be charged directly or indirectly to the victim of the assault.

During an interview with an ICIB investigator, the investigator indicated that they have never in their career known of a victim to pay for any medical services due to a sexual assault and cited The Sexual Assault Survivors' Right Act of 2016 that provides statutory rights for sexual assault survivors, including the right to receive a forensic medical examination at no cost. The facility is compliant with provision (b) of this standard. LASD demonstrated compliance with this standard.

115.186	**Sexual abuse incident reviews**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

	The following evidence was analyzed in making the compliance determination: 1. Lomita Station’s PAQ Information 2. LASD, CDM, 3-04/025.25, PREA - Sexual Abuse Incident Review, Revised November 17, 2021 3. LASD, CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA), Revised May 20, 2013 4. LASD’s Sexual Abuse Incident Review and Report Form 5. Agency Head Designee Interview 6. Agency PREA Coordinator Interview 7. Facility Director Interview 8. Incident Review Team Interview 115.186 (a)-(b) According to information provided by Lomita Station in the PAQ, the facility conducts a Sexual Abuse Incident Review meeting at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. The facility indicated in the PAQ that there were zero criminal and/or administrative investigations of sexual abuse completed at the facility in the 12 months preceding the audit. The facility provided the audit team with two policies regarding incident reviews. CDM, 3-04/025.25, PREA – Sexual Abuse Incident Review, states a Sexual Abuse Incident Review shall be conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined unfounded. This policy states the review shall ordinarily occur within 30 days of the conclusion of the investigation to identify any recommendations for improvement. This policy also states a Sexual Abuse Incident Review and Report shall be completed for each review and maintained by the PREA Compliance Manager (PCM). CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA), states the Custody division shall conduct a Sexual Abuse Incident Review as soon as possible after the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. The audit team noted the timeframe in which the incident review is required to be completed is inconsistent within policies. While one policy states such reviews shall ordinarily occur within 30 days of the conclusion of the investigation, the other policy states the review shall be conducted as soon as possible at the conclusion of the investigation, unless the allegation is determined to be unfounded. Interviews with the Agency Head Designee, Agency PREA Coordinator, Facility Director, and Incident Review Team members indicated an understanding of the purpose and process of sexual abuse incident reviews. The facility is complaint with provisions (a) and (b) of this standard. 115.186 (c) According to information provided by Lomita Station in the PAQ, the Sexual Abuse Incident Review team includes upper-level management officials and allows for

input from line supervisors and investigators.

The facility provided two policies for the audit team to review. CDM, 3-04/025.00, Prison Rape Elimination Act of 2003 (PREA), states the Sexual Abuse Incident Review shall be attended by the following personnel:

- The executive PREA Coordinator
- Concerned facility Commander
- Jail Investigations Unit Personnel
- Custody Support Services staff
- Medical and/or mental health practitioners

CDM, 3-04/025.25, Sexual Abuse Incident Review, states the sexual abuse incident shall be reviewed by the following personnel:

- PREA Coordinator (PC)
- Concerned facility's unit commander and PREA Compliance Manager (PCM)
- Personnel who conducted the investigation, i.e., facility supervisor, Jail Investigation Unit (JIU), Internal Criminal Investigations Bureau (ICIB), etc.
- Correctional Health Services (CHS), medical and mental health personnel
- County Counsel

The audit team noted inconsistencies in the personnel listed in policy as being required to attend Sexual Abuse Incident Reviews. Interviews with the Agency PREA Coordinator and Incident Review Team members indicate not all personnel listed as being required to attend Sexual Abuse Incident Reviews have attended recent incident reviews for other facilities within the Agency. The Facility Director indicated the facility has not completed any incident reviews because there have never been any allegations or completed investigations of sexual abuse at the facility. The facility is complaint with provision (c) of this standard.

115.186 (d)-(e)

The Facility Director indicated the facility has not completed any incident reviews because there have never been any allegations or completed investigations of sexual abuse at the facility. Therefore, no reports for the Lomita Station were submitted to the audit team for review. The Facility Director indicated the facility would conduct a sexual abuse incident review at the conclusion of every future criminal or administrative sexual abuse investigation unless the allegation has been determined to be unfounded.

CDM, 3-04/025.25, PREA – Sexual Abuse Incident Review, states a Sexual Abuse Incident Review and Report form shall be completed for each review and maintained by the PREA Compliance Manager.

The Facility Director provided the audit team with a blank Sexual Abuse Incident Review and Report form. The Facility Director indicated this form would be completed by the Sexual Abuse Incident Review Team during an incident review. The

	audit team reviewed the form and interviewed incident review team members and noted the incident review team considers the following: • Whether the allegations or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. • Whether the incident or allegation was motivated by race, ethnicity, gender identity, lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility. • Examines the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse. • Assess the adequacy of staffing levels that area during different shifts. • Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. • Proposes corrective action and/or recommendations. The audit team requested the Agency PREA Coordinator provide incident reports recently completed by other facilities within the Agency to determine if the Agency has a system in place for incident review and to ensure that facilities comply with provision (d) of this standard. The audit team was provided with one completed Sexual Abuse Incident Review and Report form from another facility within the LASD. The audit team noted the form is a worksheet-like document with check boxes and areas for narrative to be included. The form includes points from paragraphs (d)(1) through (d)(5) of this standard. The facility is complaint with provisions (d) and (e) of this standard. The facility is complaint with all provisions of this standard.

115.187	**Data collection**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. LASD, CDM, 3-04/025.05, PREA – Sexual Abuse and Sexual Harassment, Revised April 3, 2018 3. LASD’s PREA Allegation Alert Guide 4. PREA Reports posted on LASD’s Transparency Website (https://lasd.org/transparency/custodyreports/) 5. Agency PREA Coordinator Interview

6. Blank PREA Allegation Alert Form

115.187 (a)-(d)

According to information provided by Lomita Station in the PAQ, the Agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

The audit team was provided with CDM, 3-04/025.05, PREA – Sexual Abuse and Sexual Harassment, a blank PREA Allegation Alert Form and a copy of LASD's PREA Allegation Alert Guide for review. The policy provides definitions of sexual abuse and sexual harassment. LASD's PREA Alert Guide is a table that includes directions for inputting a PREA allegation into the Department's PREA Allegation Alert system.

The PAQ referred the audit team to LASD's Transparency Website for the Agency's annually aggregated incident-based sexual abuse data. The audit team reviewed the website and noted reports for two quarters: quarter four of 2021 and quarter one of 2022. The audit team noted these reports include data related to the PREA Allegation Alerts, including the number of pending, unfounded, unsubstantiated, and substantiated allegations of sexual abuse. The audit team was not provided with any additional reports or data for review. LASD did not demonstrate compliance with provisions (a) through (d) of this standard.

115.187 (e)

According to information provided by Lomita Station in the PAQ, the facility and its parent agency, the LASD, do not contract with any private or public entities for the confinement of its detainees. The audit team confirmed with the Facility Director and Agency PREA Coordinator that neither the facility nor the Agency contract with other entities for the confinement of its detainees. Therefore, provision (e) of this standard does not apply.

115.187 (f)

According to information provided by Lomita Station in the PAQ, the Agency provided the Department of Justice with data from the previous calendar year upon request. However, the audit team's review indicates the Department does not consistently aggregate incident-based sexual abuse data. The Department did not provide completed Surveys of Sexual Victimization to the audit team for review. The Department's transparency website only included reports for two quarters and no additional reports were provided to the audit team for review. LASD did not demonstrate compliance with provision (f) of this standard.

LASD is not complaint with provisions (a) through (d) and (f) of this standard. Corrective Action is recommended.

Recommended Corrective Action as of December 5, 2022:

	1. LASD shall collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions. The incident-based data collected shall include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups. 2. LASD shall aggregate the incident-based sexual abuse data at least annually. LASD shall provide the Department of Justice with such data from the previous calendar year upon request. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. The audit team confirmed LASD utilizes a standardized set of definitions and instruments to collect uniform data for every allegation of sexual abuse occurring in its custody facilities. The audit team reviewed LASD's PREA Allegation Alert database and noted it includes the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice. LASD provided a copy of the Survey of Sexual Victimization and the two Substantiated Incident Forms submitted for calendar year 2021. The Agency demonstrated compliance with provisions (a), (c), (d), and (f) of this standard. 2. LASD updated their transparency website to include data for quarter four of 2021 through quarter one of 2023. LASD provided a copy of LASD's 2022 PREA Annual Report that is now posted on its website. The annual report includes aggregate incident-based sexual abuse data. The Agency demonstrated compliance with provision (b) of this standard. The Agency is compliant with all provisions of this standard.

115.188	**Data review for corrective action**
	Auditor Overall Determination: Does Not Meet Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. PREA Reports posted on LASD's Transparency Website (https://lasd.org/transparency/custodyreports/) 3. Agency PREA Coordinator Interview

115.188 (a)-(d)

This standard correlates with Standard 115.187. As indicated under Standard 115.187, LASD does not consistently aggregate incident-based sexual abuse data. Therefore, LASD cannot be compliant with this standard. LASD did not demonstrate that uniform data, using a standardized instrument and definitions, was collected during the 12 months preceding the audit. The Agency PREA Coordinator indicated the Agency is currently working on compiling an annual report. LASD did not demonstrate compliance with provisions (a) through (d) of this standard.

LASD is not compliant with all provisions of this standard. Corrective Action is recommended.

Recommended Corrective Action as of December 5, 2022:

1. LASD shall review data collected and aggregated pursuant to Standard 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas and corrective action on an ongoing basis, and preparing an annual report of its findings and corrective actions for each lockup, as well as the Agency as a whole. LASD's annual report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Agency's progress in addressing sexual abuse.
2. The annual report shall be approved by the Agency Head Designee and made available through LASD's website. LASD may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup. However, LASD must indicate the nature of the material redacted.

Implemented Corrective Action as of June 3, 2023, and Final Reporting:

1. LASD provided a copy of its 2022 PREA Annual Report that is now posted on LASD's website. While the annual report does include data collected and aggregated by LASD, it does not include an assessment of the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. The annual report indicates that LASD conducted 15 Sexual Assault Incident Reviews and zero resulted in recommendations for corrective action. However, the report does not describe any corrective action that is taken on an ongoing basis or include findings and corrective actions for the agency as a whole. Therefore, LASD's Annual Report is not consistent with the requirements of this standard. The Agency is not compliant with provisions (a) and (b) of this standard.
2. LASD's 2022 PREA Annual Report was approved by the Agency Head and was made available through LASD's website. LASD did not redact any information within the report. The Agency is compliant with provisions (c) and (d) of this standard.

	The Agency is not compliant with provisions (a) and (b) of this standard.

115.189	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. Lomita Station's PAQ Information 2. PREA Reports posted on LASD's Transparency Website (https://lasd.org/transparency/custodyreports/) 3. Agency PREA Coordinator Interview 115.189 (a)-(c) This standard correlates with Standard 115.187. As indicated under Standard 115.187, LASD does not consistently aggregate incident-based sexual abuse data. Therefore, LASD cannot be compliant with this standard. LASD did not demonstrate that uniform data, using a standardized instrument and definitions, was collected during the 12 months preceding the audit. The Agency PREA Coordinator indicated the Agency is currently working on compiling an annual report. LASD did not demonstrate compliance with provisions (a), (b), and (c) of this standard. LASD is not compliant with all provisions of this standard. Corrective Action is recommended. Recommended Corrective Action as of December 5, 2022: 1. LASD shall implement a secure system for retention of data collected pursuant to Standard 115.187. 2. LASD shall make all aggregated sexual abuse data from lockups under its direct control, readily available to the public at least annually through its website. Prior to making any aggregated sexual abuse data publicly available, LASD shall remove all personal identifiers. Implemented Corrective Action as of June 3, 2023, and Final Reporting: 1. The audit team confirmed LASD utilizes the PREA Allegation Alert database to collect uniform data for every allegation of sexual abuse occurring at its custody facilities. The PREA Allegation Alert database is securely retained in SharePoint, a browser-based application. The PREA Allegation Alert database is only accessible to individuals that are granted access. LASD demonstrated compliance with provisions (a) and (d) of this standard.

	2. LASD provided a copy of LASD's 2022 PREA Annual Report that is now posted on its website. The annual report includes aggregated sexual abuse and sexual harassment data and does not include any personal identifiers. LASD demonstrated compliance with provisions (b) and (c) if this standard. The Agency is complaint with all provisions of this standard.

115.401	**Frequency and scope of audits**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination: 1. The Agency's website 2. Information from the Agency PREA Coordinator 3. Informal conversations with staff and observations made during the site review 115.401 (a) This is the first audit for Lomita Station. 115.401 (b) This is the first audit for Lomita Station. 115.401 (h) During the onsite phase of the audit, the audit team was given access to, and observed, all areas of Lomita Station. The facility is compliant with provision (h) of this standard. 115.401 (i) During the corrective action period, the audit team was provided with requested documentation and information required to perform a complete evaluation related to PREA standards. The Agency/facility is compliant with provision (i) of this standard. 115.401 (m) During the onsite phase of the audit, the audit team requested to interview detainees and inmate workers. The Lomita Station ensured privacy for the audit team to conduct the interviews. The facility is compliant with provision (m) of this

	standard. 115.401 (n) The Lomita Station posted the required audit notices in every housing unit in English and Spanish. The audit notices were observed in the public lobby and throughout the facility. The audit notices included the auditor’s contact information and explained that confidential correspondence could be sent by detainees. During the onsite audit, staff confirmed their understanding of handling detainee correspondence to the auditor in the same manner as legal mail. LASD is compliant with provision (n) of this standard. The facility is compliant with all provisions of this standard.

115.403	**Audit contents and findings**
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	LASD does not have any final audit reports. This standard is not applicable.

Appendix: Provision Findings		
115.111 (a)	**Zero tolerance of sexual abuse and sexual harassment**	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	no
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	no
115.111 (b)	**Zero tolerance of sexual abuse and sexual harassment**	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	no
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its lockups?	no
115.112 (a)	**Contracting with other entities for the confinement of detainees**	
	If this agency is law enforcement and it contracts for the confinement of its lockup detainees in lockups operated by private agencies or other entities, including other government agencies, has the agency included the entity's obligation to adopt and comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees.)	na
115.112 (b)	**Contracting with other entities for the confinement of detainees**	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the law enforcement agency does not contract with private agencies or other entities for the confinement of detainees OR the response to 115.112(a)-1 is "NO".)	na
115.113 (a)	**Supervision and monitoring**	

	Does the agency ensure that it has developed for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it has documented for each lockup a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect detainees against sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The physical layout of each lockup?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the detainee population?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that it takes into consideration the 4 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.113 (b)	**Supervision and monitoring**	
	In circumstances where the staffing plan is not complied with, does the lockup document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.113 (c)	**Supervision and monitoring**	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: 1. The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The lockup’s	yes

	deployment of video monitoring systems and other monitoring technologies?	
	In the past 12 months, has the lockup assessed, determined, and documented whether adjustments are needed to: The resources the lockup has available to commit to ensure adequate staffing levels?	yes
115.113 (d)	**Supervision and monitoring**	
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Continuous direct sight and sound supervision?	yes
	If vulnerable detainees are identified pursuant to the screening required by § 115.141, does security staff provide such detainees with heightened protection, to include: Single-cell housing or placement in a cell actively monitored on video by a staff member sufficiently proximate to intervene, unless no such option is determined to be feasible?	yes
115.114 (a)	**Juveniles and youthful detainees**	
	Are juveniles and youthful detainees held separately from adult detainees? (N/A if the facility does not hold juveniles or youthful detainees (detainees <18 years old).)	yes
115.115 (a)	**Limits to cross-gender viewing and searches**	
	Does the lockup always refrain from conducting any cross-gender strip searches or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.115 (b)	**Limits to cross-gender viewing and searches**	
	Does the lockup document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
115.115 (c)	**Limits to cross-gender viewing and searches**	
	Does the lockup implement policies and procedures that enable detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent	no

	circumstances or when such viewing is incidental to routine cell checks?	
	Does the lockup require staff of the opposite gender to announce their presence when entering an area where detainees are likely to be showering, performing bodily functions, or changing clothing?	yes
115.115 (d)	**Limits to cross-gender viewing and searches**	
	Does the lockup always refrain from searching or physically examining transgender or intersex detainees for the sole purpose of determining the detainee's genital status?	yes
	If a detainee's genital status is unknown, does the lockup determine genital status during conversations with the detainee, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.115 (e)	**Limits to cross-gender viewing and searches**	
	Does the agency train law enforcement staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the agency train law enforcement staff in how to conduct searches of transgender and intersex detainees in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.116 (a)	**Detainees with disabilities and detainees who are limited English proficient**	
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Detainees who are blind or have low vision?	no

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

(b)	**English proficient**	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to detainees who are limited English proficient?	no
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.116 (c)	**Detainees with disabilities and detainees who are limited English proficient**	
	Does the agency always refrain from relying on detainee interpreters, detainee readers, or other types of detainee assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the detainee's safety, the performance of first-response duties under §115.164, or the investigation of the detainee's allegations?	yes
115.117 (a)	**Hiring and promotion decisions**	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: o Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been	yes

	convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with detainees who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
115.117 (b)	**Hiring and promotion decisions**	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with detainees?	yes
115.117 (c)	**Hiring and promotion decisions**	
	Before hiring new employees who may have contact with detainees, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with detainees, does the agency: Consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.117 (d)	**Hiring and promotion decisions**	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with detainees?	yes
115.117 (e)	**Hiring and promotion decisions**	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with detainees or have in place a system for otherwise capturing such information for current employees?	yes
115.117 (f)	**Hiring and promotion decisions**	

	Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with detainees directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.117 (g)	**Hiring and promotion decisions**	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.117 (h)	**Hiring and promotion decisions**	
	Unless prohibited by law, does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.118 (a)	**Upgrades to facilities and technologies**	
	If the agency designed or acquired any new lockup or planned any substantial expansion or modification of existing lockups, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect detainees from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.118 (b)	**Upgrades to facilities and technologies**	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the	na

	agency’s ability to protect detainees from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
115.121 (a)	**Evidence protocol and forensic medical examinations**	
	If the agency is responsible for investigating allegations of sexual abuse in its lockups, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	no
115.121 (b)	**Evidence protocol and forensic medical examinations**	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	no
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice’s Office on Violence Against Women publication, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents,” or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	no
115.121 (c)	**Evidence protocol and forensic medical examinations**	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes

	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.121 (d)	**Evidence protocol and forensic medical examinations**	
	If the detainee is transported for a forensic examination to an outside hospital that offers victim advocacy services, does the agency permit the detainee to use such services to the extent available, consistent with security needs?	yes
115.121 (e)	**Evidence protocol and forensic medical examinations**	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting any form of criminal or administrative sexual abuse investigations.)	na
115.122 (a)	**Policies to ensure referrals of allegations for investigations**	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	no
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	no
115.122 (b)	**Policies to ensure referrals of allegations for investigations**	
	If another law enforcement agency is responsible for conducting investigations of allegations of sexual abuse and sexual harassment in its lockups, does the agency have a policy in place to ensure that such allegations are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na

	Has the agency published such policy, including a description of responsibilities of both the agency and the investigating entity, on its website or, if it does not have one, made the policy available through other means? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
	Does the agency document all such referrals? (N/A if agency is responsible for conducting administrative and criminal investigations of sexual abuse or sexual harassment. See 115.121(a).)	na
115.131 (a)	**Employee and volunteer training**	
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: Its zero-tolerance policy and detainees' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The dynamics of sexual abuse and sexual harassment in confinement, including which detainees are most vulnerable in lockup settings?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: The right of detainees and employees to be free from retaliation for reporting sexual abuse or harassment?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to communicate effectively and professionally with all detainees?	yes

	Does the agency train all employees and volunteers who may have contact with lockup detainees to be able to fulfill their responsibilities under agency sexual abuse prevention, detection, and response policies and procedures, including training on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.131 (b)	**Employee and volunteer training**	
	Have all current employees and volunteers who may have contact with detainees received such training?	yes
	Does the agency provide each employee and volunteer with annual refresher information to ensure that they know the agency’s current sexual abuse and sexual harassment policies and procedures?	yes
115.131 (c)	**Employee and volunteer training**	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.132 (a)	**Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy**	
	During the intake process, do employees notify all detainees of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?	no
115.132 (b)	**Detainee, contractor, and inmate worker notification of the agency's zero-tolerance policy**	
	Does the agency ensure that, upon entering the lockup, all contractors and any inmates who work in the lockup are informed of the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
115.134 (a)	**Specialized training: Investigations**	
	In addition to the general training provided to all employees and volunteers pursuant to §115.131, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not	no

	conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	
115.134 (b)	**Specialized training: Investigations**	
	Does this specialized training include: Techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	no
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	no
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	no
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	no
115.134 (c)	**Specialized training: Investigations**	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.121(a).)	no
115.141 (a)	**Screening for risk of victimization and abusiveness**	
	If the lockup is not utilized to house detainees overnight, before placing any detainees together in a holding cell do staff consider whether, based on the information before them, a detainee may be at a high risk of being sexually abused? (N/A if the lockup is utilized to house detainees overnight.)	na
	When appropriate, do staff take necessary steps to mitigate such danger to the detainee? (N/A if the lockup is utilized to house detainees overnight.)	na
115.141	**Screening for risk of victimization and abusiveness**	

(b)		
	If the lockup is utilized to house detainees overnight, are all detainees screened to assess their risk of being sexually abused by other detainees or sexually abusive toward other detainees? (N/A if lockup is NOT used to house detainees overnight.)	yes
115.141 (c)	**Screening for risk of victimization and abusiveness**	
	In lockups described in paragraph (b) of this section, do staff always ask the detainee about his or her own perception of vulnerability? (N/A if lockup is NOT used to house detainees overnight.)	yes
115.141 (d)	**Screening for risk of victimization and abusiveness**	
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has a mental, physical, or developmental disability. (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The age of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The physical build and appearance of the detainee? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: Whether the detainee has previously been incarcerated? (N/A if lockup is NOT used to house detainees overnight.)	yes
	Does the screening process in the lockups described in paragraph (b) of this section consider, to the extent that the information is available, the following criteria to screen detainees for risk of sexual victimization: The nature of the detainee’s alleged offense	yes

	and criminal history? (N/A if lockup is NOT used to house detainees overnight.)	
115.151 (a)	**Detainee reporting**	
	Does the agency provide multiple ways for detainees to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Retaliation by other detainees or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple ways for detainees to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.151 (b)	**Detainee reporting**	
	Does the agency also provide at least one way for idetainees to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the detainee to remain anonymous upon request?	yes
115.151 (c)	**Detainee reporting**	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment ?	yes
115.151 (d)	**Detainee reporting**	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of detainees?	yes
115.154 (a)	**Third-party reporting**	

	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment in its lockups?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a detainee?	yes
115.161 (a)	**Staff and agency reporting duties**	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in an agency lockup?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against detainees or staff who reported such an incident?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	no
115.161 (b)	**Staff and agency reporting duties**	
	Apart from reporting to designated supervisors or officials, do staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, and investigation decisions?	yes
115.161 (c)	**Staff and agency reporting duties**	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.161 (d)	**Staff and agency reporting duties**	
	Does the agency report all allegations of sexual abuse, including third-party and anonymous reports, to the agency’s designated investigators?	yes
115.162	**Agency protection duties**	

(a)		
	When the agency learns that a detainee is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the detainee?	yes
115.163 (a)	**Reporting to other confinement facilities**	
	Upon receiving an allegation that a detainee was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	no
115.163 (b)	**Reporting to other confinement facilities**	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.163 (c)	**Reporting to other confinement facilities**	
	Does the agency document that it has provided such notification?	yes
115.163 (d)	**Reporting to other confinement facilities**	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.164 (a)	**Staff first responder duties**	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating,	yes

	defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	
	Upon learning of an allegation that a detainee was sexually abused, is the first law enforcement staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.164 (b)	**Staff first responder duties**	
	If the first staff responder is not a law enforcement staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify law enforcement staff?	yes
115.165 (a)	**Coordinated response**	
	Has the agency developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to a lockup incident of sexual abuse?	no
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law and unless the victim requests otherwise, inform the receiving facility of the incident and the victim’s potential need for medical or social services?	no
115.165 (b)	**Coordinated response**	
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the receiving facility of the incident unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim’s potential need for medical or social services.)	yes
	If a victim is transferred from the lockup to a jail, prison, or medical facility, does the agency, as permitted by law, inform the	yes

	receiving facility of the victim[1]s potential need for medical or social services unless the victim requests otherwise? (N/A if the agency is not permitted by law to inform a receiving facility, where a victim is transferred from the lockup to a jail, prison, or medical facility as a result of an allegation of sexual abuse of the incident and the victim's potential need for medical or social services.)	
115.166 (a)	**Preservation of ability to protect detainees from contact with abusers**	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with detainees pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.167 (a)	**Agency protection against retaliation**	
	Has the agency established a policy to protect all detainees and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff?	no
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.167 (b)	**Agency protection against retaliation**	
	Does the agency employ multiple protection measures, such as housing changes or transfers for detainee victims or abusers, removal of alleged staff or detainee abusers from contact with victims, and emotional support services for detainees or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.167 (c)	**Agency protection against retaliation**	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees or staff who have reported sexual abuse?	yes

	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Monitor the conduct and treatment of detainees who were reported to have suffered sexual abuse?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, does the agency: Act promptly to remedy any such retaliation?	yes
115.167 (d)	**Agency protection against retaliation**	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.171 (a)	**Criminal and administrative agency investigations**	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	no
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/ facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.121(a).)	yes
115.171 (b)	**Criminal and administrative agency investigations**	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.134?	no
115.171 (c)	**Criminal and administrative agency investigations**	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	no
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	no
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	no

115.171 (d)	**Criminal and administrative agency investigations**	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.171 (e)	**Criminal and administrative agency investigations**	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as detainee or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a detainee who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.171 (f)	**Criminal and administrative agency investigations**	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	no
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	no
115.171 (g)	**Criminal and administrative agency investigations**	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	no
115.171 (h)	**Criminal and administrative agency investigations**	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.171 (i)	**Criminal and administrative agency investigations**	
	Does the agency retain all written reports referenced in 115.171(f)	no

	and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	
115.171 (j)	**Criminal and administrative agency investigations**	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the lockup or agency does not provide a basis for terminating an investigation?	no
115.171 (l)	**Criminal and administrative agency investigations**	
	When outside agencies investigate sexual abuse, does the agency cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.121(a).)	na
115.172 (a)	**Evidentiary standard for administrative investigations**	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	no
115.176 (a)	**Disciplinary sanctions for staff**	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.176 (b)	**Disciplinary sanctions for staff**	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	no
115.176 (c)	**Disciplinary sanctions for staff**	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	no

115.176 (d)	**Disciplinary sanctions for staff**	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: o Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	no
115.177 (a)	**Corrective action for contractors and volunteers**	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with detainees?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	no
115.177 (b)	**Corrective action for contractors and volunteers**	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with detainees?	yes
115.178 (a)	**Referral for prosecution for detainee-on-detainee sexual abuse**	
	When there is probable cause to believe that a detainee sexually abused another detainee in a lockup, does the agency refer the matter to the appropriate prosecuting authority?	yes
115.178 (b)	**Referral for prosecution for detainee-on-detainee sexual abuse**	
	If the agency itself is not responsible for investigating allegations of sexual abuse, does the agency inform the investigating entity of this policy? (N/A if the agency/facility is responsible for administrative and criminal investigations. See	na

	115.121(a).)	
115.182 (a)	**Access to emergency medical and mental health services**	
	Do detainee victims of sexual abuse in lockups receive timely, unimpeded access to emergency medical treatment?	yes
115.182 (b)	**Access to emergency medical and mental health services**	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.186 (a)	**Sexual abuse incident reviews**	
	Does the lockup conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.186 (b)	**Sexual abuse incident reviews**	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.186 (c)	**Sexual abuse incident reviews**	
	Does the review team include upper-level management officials, with input from line supervisors and investigators?	yes
115.186 (d)	**Sexual abuse incident reviews**	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the lockup?	yes
	Does the review team: Examine the area in the lockup where the incident allegedly occurred to assess whether physical barriers in	yes

	the area may enable abuse?	
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.186(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the lockup head and agency PREA coordinator?	yes
115.186 (e)	**Sexual abuse incident reviews**	
	Does the lockup implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.187 (a)	**Data collection**	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at lockups under its direct control using a standardized instrument and set of definitions?	yes
115.187 (b)	**Data collection**	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.187 (c)	**Data collection**	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Local Jail Jurisdictions Survey of Sexual Violence conducted by the Department of Justice, or any subsequent form developed by the Department of Justice and designated for lockups?	yes
115.187 (d)	**Data collection**	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.187 (e)	**Data collection**	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its detainees? (N/A if the agency does not contract for the confinement of its detainees.)	na
115.187 (f)	**Data collection**	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.188 (a)	**Data review for corrective action**	
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	no
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	no
	Does the agency review data collected and aggregated pursuant to § 115.187 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each lockup, as well as the agency as a whole?	no
115.188 (b)	**Data review for corrective action**	
	Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse?	no
115.188 (c)	**Data review for corrective action**	
	Is the agency’s annual report approved by the agency head and made readily available to the public through its website or, if it	yes

	does not have one, through other means?	
115.188 (d)	**Data review for corrective action**	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a lockup?	yes
115.189 (a)	**Data storage, publication, and destruction**	
	Does the agency ensure that data collected pursuant to § 115.187 are securely retained?	yes
115.189 (b)	**Data storage, publication, and destruction**	
	Does the agency make all aggregated sexual abuse data, from lockups under its direct control and any private agencies with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.189 (c)	**Data storage, publication, and destruction**	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.189 (d)	**Data storage, publication, and destruction**	
	Does the agency maintain sexual abuse data collected pursuant to § 115.187 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	**Frequency and scope of audits**	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	no
115.401 (b)	**Frequency and scope of audits**	

	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	**Frequency and scope of audits**	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	**Frequency and scope of audits**	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	**Frequency and scope of audits**	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	**Frequency and scope of audits**	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	**Audit contents and findings**	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of	na

	single facility agencies, there has never been a Final Audit Report issued.)	