

August 17, 2015

Sheriff Dwight Baird
1102 Cornell Lane
Yorkville, IL 60560

Dear Sheriff Baird:

An audit of the Kendall County Jail's compliance with the Prison Rape Elimination Act (PREA) was completed on August 17, 2015. After reviewing Kendall County Sheriff Department's Policies and Procedures, conducting interviews with inmates and staff, reviewing video and conducting a two day on site audit including a tour of all housing units and observing operations, I am pleased to inform you that the Kendall County Jail is in compliance with all of the standards of the Prison Rape Elimination Act.

The commitment of your Department to the prevention of sexual abuse and sexual harassment was evident throughout the audit process. It was an honor to work with Undersheriff Martin, Director Gillespie, Commander Jennings and Sergeant Russo during the audit process.

A copy of the complete audit is attached. If you have any questions, please do not hesitate to call.

Sincerely,



Brenda Welch
PREA Compliance Auditor

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: August 16, 2015

Auditor Information			
Auditor name: Brenda Welch			
Address: P.O. Box 122, Aurora, IL 60506			
Email: BrendaWelch1@yahoo.com			
Telephone number: 847-754-5198			
Date of facility visit: July 29-30, 2015			
Facility Information			
Facility name: Kendall County Jail			
Facility physical address: 1102 Cornell Lane, Yorkville, IL 60560			
Facility mailing address: (if different from above).			
Facility telephone number: 630-553-7500			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
Facility type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Name of facility's Chief Executive Officer: Sabrina Jennings, Commander			
Number of staff assigned to the facility in the last 12 months: 48			
Designed facility capacity: 203			
Current population of facility: 114			
Facility security levels/inmate custody levels: none defined			
Age range of the population: 18 and above			
Name of PREA Compliance Manager: Jeanne Russo		Title: Sergeant	
Email address: jrusso@co.kendall.il.us		Telephone number: 630-553-7500 Ext 1162	
Agency Information			
Name of agency: Kendall County Sheriff's Department			
Governing authority or parent agency: (if applicable) Kendall County Sheriff's Department			
Physical address: 1102 Cornell Lane, Yorkville, IL 60560			
Mailing address: (if different from above)			
Telephone number: 630-553-7500			
Agency Chief Executive Officer			
Name: Dwight Baird		Title: Sheriff	
Email address: dbaird@co.kendall.il.us		Telephone number: 630-553-7500	
Agency-Wide PREA Coordinator			
Name: N/A		Title:	
Email address:		Telephone number:	

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: August 3, 2015

Auditor Information			
Auditor name: Brenda Welch			
Address: P.O. Box 122, Aurora, IL 60506			
Email: BrendaWelch1@yahoo.com			
Telephone number: 847-754-5198			
Date of facility visit: July 29-30, 2015			
Facility Information			
Facility name: Kendall County Jail			
Facility physical address: 1102 Cornell Lane, Yorkville, IL 60560			
Facility mailing address: <i>(if different from above)</i> Click here to enter text			
Facility telephone number: 630-553-7500			
The facility is:	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
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Name of facility's Chief Executive Officer: Sabrina Jennings, Commander			
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Current population of facility: 114			
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Age range of the population: 18 and above			
Name of PREA Compliance Manager: Jeanne Russo		Title: Sergeant	
Email address: jrusso@co.kendall.il.us		Telephone number: 630-553-7500 Ext 1162	
Agency Information			
Name of agency: Kendall County Sheriff's Department			
Governing authority or parent agency: <i>(if applicable)</i> Kendall County Sheriff's Department			
Physical address: 1102 Cornell Lane, Yorkville, IL 60560			
Mailing address: <i>(if different from above)</i>			
Telephone number: 630-553-7500			
Agency Chief Executive Officer			
Name: Dwight Baird		Title: Sheriff	
Email address: dbaird@co.kendall.il.us		Telephone number: 630-553-7500	
Agency-Wide PREA Coordinator			
Name: N/A		Title:	
Email address:		Telephone number:	

AUDIT FINDINGS

ARRATIVE

There were forty one findings of “meets standards”; one finding of “not applicable” and one finding of “exceeds standards”. The finding was “exceeds standards” was related to standard 115.42 The PREA Operational Plan allows each transgender or intersex inmate a review every 30 days to determine if there is a need for continued separation from general population. This review includes the inmates view with respect to his or her own safety. This review exceeds the mandate of a review at least twice a year.

The facility did make adjustments to the PREA related policies and procedures during the last year as internal reviews of practices determined additional revisions were necessary to meet standards. Recommendations for additional modifications were presented to the Kendall County Sheriff’s Department in the Pre-Audit phase. These recommendations were implemented and any change in policy was addressed in roll call training and posttest. There is no corrective action required.

The Kendall County Sheriff’s Department has demonstrated a high commitment to inmate and staff safety.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Kendall County Public Safety Center is located at 1102 Cornell Lane, Yorkville, IL. The facility was opened in 1992. The jail is divided into three areas commonly referred to the East, South and West End. The East End contains four holding cells and two housing areas for temporary holding or special management inmates. One holding area contains 7 cells with a maximum of 10 beds and the other holding area contained 6 cells with a maximum capacity of 9 beds. The East End is staffed with a minimum of one Deputy at all times. The West End contains three dorms and five pods. At the time of the tour, Dorm 1 consisted of 14 beds and held inmate workers; Dorm 2 consisted of 12 beds and housed work release inmates and Dorm 3 consisted of 16 beds and housed alleged sex offenders. Pod A contains 8 cells, 12 beds and held inmates charged with felonies. Pod B contains 8 cells, 12 beds and held inmates charged with misdemeanors. Pod C contained 7 cells, 10 beds and was not occupied. Pod D contained 4 cells, 4 beds and held inmates charged with felonies. Pod E contained 4 cells, 4 beds and held inmates charged with felonies (special management). The West End is staffed with a minimum of one deputy at all times. The South End contains 4 pods and 8 dorms. Pod F contains 8 cells, 12 beds and held females (felonies and misdemeanors). There was a disciplinary segregation pod with 5 cells, 5 beds (one padded cell). TB1 consists on one cell, 1 bed for special management inmates and TB 2 contains 2 cells, 2 beds for special management inmates. Six of the eight dorms contains 10 beds and were designated for inmates charged with felonies and no Dorm contained 8 beds designated to hold inmates charged with felonies. The remaining dorm was located in the medical unit for those inmates with medical holds. The South End is staffed with two Deputies on the day and afternoon shift and one deputy during the evening shift.

The facility holds pre-trial and sentenced males and females. Youthful offenders are only temporarily held until a parent or designated caretaker picks up the inmate or transportation can be arranged to transport the youthful offender to the Kane County Juvenile Detention Center.

The Illinois Department of Corrections has conducted annual inspections. There were no violations of the Illinois County Jail Standards noted in the 2013 and 2014 annual inspections.

SUMMARY OF AUDIT FINDINGS

I/A

Number of standards exceeded: 1

Number of standards met: 41

Number of standards not met: 0

Number of standards not applicable: 1

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

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

The finding of “meets standard” is supported by the following:

General Order 13-02 Staff Association and Conduct with Offenders states the Kendall County Sheriff’s Department is committed to “zero tolerance “related to sexual assault and mistreatment of offenders. General Order 14-01 Prevention and Reporting of inmate sexual misconduct states the Kendall County Sheriff’s Department has zero tolerance for inmate sexual misconduct. General Order 13-02, 14-01, the PREA Operational Plan, Kendall County Policy 606 PREA and Kendall County Policy 607 Sexual Assault Investigations outlines the Kendall County Sheriff’s Department approach to preventing, detecting and responding to sexual abuse and sexual harassment. General Order 13-02, 14-01 and Kendall County Policy 606 includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. Kendall County Policy includes sanctions for those found to have participated in prohibited behaviors (for staff disciplinary action up to and including termination and criminal prosecution and for inmates-disciplinary segregation and criminal prosecution. General Order 13-02, 14-01, the PREA Operational Plan, Kendall County Policy 606 includes descriptions of agency strategies to reduce and prevent sexual abuse and sexual harassment of inmates. Kendall County designates a Sergeant who reports to the Deputy Commander as the PREA Manager to develop, implement and oversee the agency’s PREA policy. It was apparent during interviews with the Deputy Commander and the PREA Manager, the PREA Manager has sufficient time and the authority to develop, implement and oversee PREA. Extensive official correspondence between the Deputy Commander and the PREA Manager indicated the PREA Manager exercises the authority vested in the PREA Manager responsibilities.

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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

The Kendall County Jail does not contract with any other entity for the confinement of inmates. This standard is not applicable to the Kendall County Sheriff’s Department.

Standard 115.13 Supervision and monitoring

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606.3 tasks the PREA Manager with the following responsibilities:

- (a) Developing a written plan to coordinate response among staff first responders, medical and mental health practitioners, investigators and facility management to an incident of sexual abuse (28 CFR 115.11).
- (a) Developing a staffing plan to provide adequate levels of staffing and video monitoring, where applicable, in order to protect detainees from sexual abuse. This includes documenting deviations and the reasons for deviations from the staffing plan, as well as reviewing the staffing plan a minimum of once per year (28 CFR 115.13)
- (c) Ensuring that, when designing, acquiring, expanding or modifying facilities, or when installing or updating a video-monitoring system, electronic surveillance system or other monitoring technology, consideration is given to the office's ability to protect inmates from sexual abuse (28 CFR 115.18).
- (d) Ensuring that any contract for the confinement of Kendall County Sheriff's Office detainees or inmates includes the requirement to adopt and comply with the PREA standards including obtaining incident-based and aggregated data, as required in 28 CFR 115.187 (28 CFR 115.12).

The latest staffing plan was reviewed by this auditor and had been completed on July 23, 2015 by the PREA Manager, Deputy Commander and Commander. The staffing plan included consideration of all of the eleven criteria outlines in the Prison Rape Elimination Act. The facility reported no deviations to the minimum staffing of four staff during the midnight shift and five staff during the day and afternoon shifts. Random shift rosters were reviewed and verified no deviations from the staffing plan. It should be noted the rosters indicated staffing at levels that exceeded the minimum requirements on the day and afternoon shift. The Supervisor reviews the minimum staffing on a shift by shift basis and considers the shift needs in determining sufficient staffing but does not staff under the minimum requirements. The facility required any deviations from the staffing plan to be documented and the facility had documented no deviations from the staffing plan. The current staffing was deemed to be adequate and the county had budgeted adequate resources for the staffing plan. It should be noted that in 2014, a PREA blind spot audit indicated a need for an additional cameras and four additional cameras were added for a total of 120 cameras in the facility. The administration is aware of additional blind spots and inadequate integration with the existing cameras and security systems and is in the process of selecting a vendor to design new security system upgrades. The vendor proposals have been reviewed and narrowed to four vendors. The proposals are expected to be presented to the Kendall County Board in August of 2015 for a final award of the design project. The project includes the security systems of the court house and jail and will include but is not limited to cameras, security access, intercom and paging. A copy of the scope of work was submitted to and reviewed by this auditor by the Deputy Commander. Copies of the 2013 and 2014 Illinois Department of Corrections annual audit were reviewed and there were no findings in regards to compliance with the Illinois Jail Standards.

Standard 115.14 Youthful inmates

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

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

The finding of "meets standards" is supported by the following:

General Order 92-35 Housing Prisoners describes the process for housing individuals under the age of 18. The policy states inmates seventeen years of age or younger may not be housed with inmates eighteen years of age or older and must be housed separately by sight and sound. Every effort must be made not to place youthful inmates in segregation. The policy further states that youthful inmates may only have contact with inmates 18 years or older under direct supervision. Due to recent changes in state legislation, youthful offenders are not housed at the Kendall County Jail. Youthful inmates, by practice may only be held while awaiting transportation by a designated caretaker or transportation to the Kane County Juvenile Detention Center. The youthful offenders are temporarily detained in the visitation area or the library and are always under the direct supervision of a deputy and not allowed any physical contact with inmates 18 years of age or older. An inspection of these areas indicated there were no beds in these two locations. Interviews with Deputies verified youthful offenders are only temporarily detained and not housed at the facility. A letter was also received from the Commander providing a statement that youthful offenders are only temporarily detained and never housed at the detention facility. A review of statistical information for the last year (New World Inmate Management System), indicated 38 inmates were booked into the facility and no youthful offender was placed in a housing unit and none were held more than 12 hours waiting transportation. It should be noted, there were no youthful offenders housed at the jail during the on-site inspection. PREA standard 115.41 does not apply as youthful offenders are not held for durations that would require the opportunity for large muscle exercise or educational services.

Standard 115.15 Limits to cross-gender viewing and searches

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

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

The finding of "meets standards" is supported by the following:

General Order 92-41 Searches states strip searches may only be conducted by correctional officers of the same sex except in exigent circumstances or when performed by medical practitioners. The policy requires all cross gender strip or body cavity searches to be documented via an incident report. Interviews with deputies and medical staff indicated cross gender strip searches and body cavity searches are not conducted by medical or non-medical staff. Medical and non-medical staff stated in the event a body cavity search was necessary, the inmate would be transported the emergency room for the procedure. General Order 92-41 allows for cross gender pat down searches only in the event no female deputy is on duty. The policy states cross gender pat down searches must be conducted in the presence

of another deputy and in full view of video surveillance without any obstructions. Cross gender pat down searches are also documented via incident report. There were 617 documented cross gender pat down searches during the last year and no cross gender strip or body cavity searches. This policy requires any cross gender pat down searches to be conducted in full view of the camera and another deputy must be present. Video footage was reviewed and four of the five videos were in compliance with the agencies policy. In one of the videos, a male deputy searched a female inmate with another deputy and intern present however, the search was not conducted in full view of the camera. Facility administration was advised and procedures designating areas for cross gender searches that are in full view of the cameras were immediately implemented. The PREA operational plan requires staff of the opposite gender to announce their presence when entering a inmate housing area. Inmate interviews did not support compliance with the policy of cross gender announcements. Only two inmates' stated female staff announces their gender prior to entering the pod. It should be noted; all of the inmates who were interviewed indicated the female staff makes an announcement over the intercom prior to entering the pod that the deputy will be entering the pod and giving instructions to sit at a designated area prior to entering the pod. All of the inmates indicated they are aware a female is entering the pod as they hear the female voice prior to entering the pod. Showers are scheduled at designated times and inmates are prohibited from entering a common area absent a shirt and pants. The Deputies are aware of the Kendall County requirement of announcing their gender prior to entering the pod and state compliance with the policy. The PREA Coordinator was present during the tour of the facility and it should be noted the PREA Manager (female) announced her gender upon entering each housing area. Administration was advised of during the debriefing of the potential of clear announcements announcing gender not consistently being implemented. The Commander indicated that Supervisors would be instructed to review the mandate in roll calls and Supervisors would be tasked with ensuring the mandate was implemented per policy. This auditor was provided verification of subsequent roll call training. As all of the inmates stated they were aware of the gender of staff prior to entering the housing unit; the deputies all verbally articulated the requirement and observations during the tour indicated staff did announce their gender and the response from the inmates suggested the practice was not isolated; this auditor finds this standard is met. General Order 92-41 prohibits the physical examination of a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. If the inmate's genital status is unknown, the policy allows for this information to be obtained through conversations with the inmate or by reviewing medical records. All interviews (staff and inmates) indicated staff ask the inmate about their gender status and searches are not conducted to determine the inmate's genital status. The facility PREA training curriculum includes training on cross gender pat down searches and searches of transgender and intersex inmates. The search procedure describes a process that is professional and the least intrusive as possible consistent with security needs. Video footage reviewed indicated the search procedures outlined were followed and could be described as professional and respectful and conducted in the least intrusive manner as possible. Training logs were reviewed and 100% of the Kendall County Deputies assigned to the jail were verified as having received the training by a review of the training sign off sheets with the deputy's initials and date. There were no known transgender or intersex inmates housed at the facility during the audit process.

The physical design of the building allows inmates to shower, perform bodily functions and change clothing without non-medical staff viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. All showers, toilets and changing areas are either behind doors which allow viewing of only the inmate's legs and head or behind walls out of view of the cameras. Inmate's rules prohibit entering the day room area without appropriate clothing at all times.

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

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

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

The finding of "meets standards" is supported by the following:

General Order 14-01 Preventing and Reporting Inmate Sexual Misconduct states an effort will be made to provide professional translation services to assist inmates with limited English proficiency or literacy skills in understanding the PREA policy. This auditor was provided with a signed contract with Language Line Services as documentation of continued inmate access to translation services. Deputy's interviews indicated knowledge of and usage of the language line. The inmate handbook and video are available in Spanish. The inmate

Education program includes a description of the PREA policy in the inmate handbook and inmate education on PREA is also available by a video with closed caption citations. General Order 14-01 also prohibits the use of inmate translators for any PREA investigation/allegation. All of the inmates indicated they had received the PREA Brochure, inmate handbook and viewed the PREA video with closed captions. The inmates further stated all of the materials are available to them on a designated computer located in each housing unit. There are three areas (holding cells and medical) where a mobile computer cart is utilized for inmate access. The facility provided training plans which met PREA standards and also provided documentation of staff's participation in the NIC on line PREA course and a training course provided by the facility. There were no inmates with limited English proficiency during the audit process. The PREA investigator was interviewed and indicated inmates would not and have not been utilized to assist staff investigating allegations of sexual abuse or harassment.

Standard 115.17 Hiring and promotion decisions

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

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

The finding of "meets standards" is supported by the following:

General Order 14-01 Preventing and Reporting of Inmate Sexual Misconduct states the Kendall County Sheriff's Department seeks to hire, promote and retain staff who has not demonstrated abusive behavior or indifference to preventing and responding to sexual misconduct of staff or inmates. The policy further stated the department will not re-employ any staff who has been terminated for engaging in sexual misconduct to the extent provided by law. There are no specific policies that addresses provisions a through c in this standard although the current practice reflects the requirements. The Kendall County Employment Application was reviewed and requires the applicant to address each issue provided in this standard. The Kendall County Service Provider Application and Volunteer Application was reviewed and does not ask the applicant to provide PREA related information required in this standard (a) and (b). It should be noted that prior to the end of the second day of the audit, the facility had revised the Volunteer and Service provider application to include the mandated requirements and submitted a copy of each to this auditor as verification of corrective action. A criminal records check is required for service providers and employment applicants. A review of the last five deputies retained (background checks conducted March through August of 2014 did not have the PREA related questions included in the background check. The PREA coordinator indicated the applicant application was revised in November of 2014 to reflect the PREA requirements. The five applicants did have criminal background checks conducted. It should be noted none of the applicants indicated prior institutional employers. This auditor finds the standard has been met as 1) none of the persons hired or promoted and there have been no contractors hired in the last year that had prior institutional experience and the criminal background checks satisfy the requirement of any related arrests or convictions. The facility has revised the applications to ensure the standard is continually met. The PREA Operational Plan requires criminal background checks at least every five years of current employees and contractors. The Human Services Manager indicated criminal records checks are conducted on an annual basis (CQH on Driver's Licenses). General Order 14-01 requires staff to immediately report any knowledge, suspicion, or information received regarding an incident of inmate sexual misconduct, including knowledge of staff neglect or violation or responsibilities that may have contributed to an incident. Staff and offenders must immediately report any knowledge, suspicion, or information received regarding an incident of inmate sexual misconduct, including knowledge of staff neglect or violation or responsibilities that may have contributed to an incident. The policy further states the failure to report an allegation, or knowingly or willfully submitting, coercing, or threatening another to submit inaccurate, incomplete, or untruthful information, will be treated as a separate offense subject to administrative sanctions. The employment application specifically states the omission of information or making false statements may be considered sufficient cause for rejection of the application or dismissal. Interviews with the PREA Manager and Human Resources Manager indicated that other law enforcement or institutional employers are afforded the

Opportunity to review a former employee's personnel file. A copy of the face to face interview questions for applicants was reviewed and the following question is asked to any employees who have had previous institutional experience: Since you have prior institutional experience have you ever had any allegations of sexual abuse against you or have you ever resigned during a pending investigation of sexual abuse?

Standard 115.18 Upgrades to facilities and technologies

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

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

The finding of "meets standard" is supported by the following:

In 2014, the facility conducted a blind spot audit and determined a need for additional cameras to enhance the ability to monitor and prevent instances of sexual abuse. Four cameras were added and a systems upgrade project is currently in process. The county expects the vendor to be selected during the August County Board Meeting. The design phase of the project includes identification of technology to enhance the ability of the Kendall County Sheriff's Department to protect inmates from sexual assault.

Standard 115.21 Evidence protocol and forensic medical examinations

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

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

The finding of "meets standards" is supported by the following:

The Kendall County Sheriff's Department is responsible for conducting administrative and criminal sexual abuse investigations. Kendall County Policy 604 Sexual Abuse Investigations, the Evidence and Property Policy, Copley Hospital Policy and Procedure, Edward Hospital Sexual Assault Treatment Plan and the PREA Operational Plan were reviewed and describe a uniform evidence protocol. Although the Kendall County Jail does not house youthful offenders, the jail can access developmentally appropriate protocols through the Kendall County Children's Advocacy Center, Kendall County State's Attorney's office and Edward Hospital's Care Center (designated pediatric forensic examinations for a multi-county area.). Kendall County Sheriff's Department does not collect forensic medical evidence or provide sexual assault examinations. In the event a sexual assault occurred, inmates would be transported to Copley Hospital or Edward Hospital.

Copley Hospital policy requires all SANE nurses to utilize the International Association of Forensic Nursing Protocol. Edward Hospital requires all medical services and forensic collection procedures to be in compliance with the Illinois State Police guidelines. Kendall County Policy 606.10 Examination, Testing and Treatment states medical examinations and treatment will be provided without financial costs where evidentiary or medically appropriate. Copley Hospital and Edward Hospital utilize SANE's whenever possible. Kendall County has not had a sexual assault allegation in the last 12 months. An Memorandum of Understanding between the Kendall County Sheriff's Department and Mutual Ground (a rape crisis center) was reviewed and agrees to provide services through the forensic medical exam, investigatory interviews and provide emotional support, crisis intervention, information, counseling and referrals.

Interviews with random staff and an investigator indicated a thorough knowledge of the uniform evidence protocol. The PREA training facilitators guide includes training on evidence collection and all staff has participated in the NIC on line training and facility PREA training.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606 Prison Rape Elimination Act and the PREA Operational Plan requires administrative or criminal investigations for all allegations of sexual abuse and sexual harassment. Kendall County Jail reported nine allegations in the last year, however it is noted Kendall County over-reported allegation as four did not meet the specific requirements related to sexual abuse or harassment (allegations made during search procedures or allegations of an isolated comment). Administrative investigations were conducted on all nine allegations. None of the allegations warranted referrals for criminal prosecution. The Kendall County Sheriff's Department contains a PREA link to a one page document which states sexual contact between inmates or between staff, visitors, volunteers or contractors and inmates is never permitted and is a crime. Reports of such activity will be investigated and anyone found in violation is subject to criminal prosecution. The link clearly states the Kendall County Sheriff's Department enforces the Prison Rape Elimination Act and will prosecute violators. Reports of sexual abuse, harassment or misconduct are referred to the Kendall County PREA Hotline at 630-553-7665.

Standard 115.31 Employee training

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

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

The finding of “meets standards” is supported by the following:

Training records included proof of the NIC PREA Training course completion and verification of attendance of the Kendall County PREA training. All Deputies were verified as having completed both training opportunities. The Kendall County PREA Facilitators Guide was reviewed and included all ten requirements listed in PREA Standard 115.31 (a). Kendall County Sheriff’s Department publishes and distributes a Guide to the Prevention and Reporting of Sexual Misconduct with Offenders to all employees, volunteers and contractors. Kendall County operates one jail that houses females and males; additional training is not required due to gender assignments. All employees are trained to manage the female and male population. Kendall County Policy mandates annual PREA refresher training. All employees are required to sign a statement that they received the agency PREA training and have received a copy of related materials. The NIC on line course provides a post test and the scores are affixed to the training certificate indicating understanding of the training. All of the random and specialized staff, a volunteer and two contractors interviewed indicated knowledge of the ten requirements listed in Standard 115.31. It is recommended Kendall County create a posttest associated with annual refresher training and provide a statement verifying the employee understood the training for the employees signature.

Standard 115.32 Volunteer and contractor training

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

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

The finding of “meets standards” is supported by the following:

A copy of the facilitators guide for volunteers and contractors utilized for the one hour training was reviewed. The training provides information on the volunteer or contractors responsibilities in regards to the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The volunteers sign a statement that they understood the training before they are allowed to provide any services. Volunteer services applications with this statement were reviewed by this auditor.

Standard 115.33 Inmate education

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

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

The finding of “meets standards” is supported by the following:

Ten inmates were interviewed and asked if they received information explaining the agencies zero tolerance policy. All inmates indicated they received a document regarding the policy. In addition, all inmates are required to sign a form during the intake process indicating they

received a PREA Informational Brochure. Ten inmate files were reviewed and all ten files contained forms indicating by signature receipt of the brochure. Within 30 days of intake, inmates are provided with an informational video and given an opportunity to ask questions relative to the video and Kendall County PREA policies and procedures. All of the inmates randomly selected indicated they had seen the video. Documentation is provided in the New World Inmate Information System. Verification of inmate participation was provided from 3/1/2014 through June 26, 2015 via a New World Report. 313 inmates were housed for 30 days or longer and participation in the PREA educational program was verified for all of these inmates. The video provides educational opportunities for those inmates who have limited reading capabilities and sight impairments. Closed captions provide educational opportunities for inmates with hearing impairments. The Department provides interpreters for those inmates with limited English capabilities. There is a Inmate PREA brochure in Spanish, a Spanish inmate educational PREA video and a Spanish Facilitator for inmate educational purposes. The PREA Operational Plan describes all educational formats available to inmates. PREA posters were visible in each housing area during the tour of the facility and the inmate handbook and PREA brochure is located on the computers available to inmates either on the housing unit or available by mobile computer carts. Randomly selected inmates indicated inmates were aware the information is available via computer. The inmate handbook was reviewed and contained all of the relevant information. Kendall County operates only one facility. Agency policy states any inmate transferred from another county or external agency is booked with the same procedures as Kendall County inmates. Six inmates held for other counties were confirmed to have received the inmate brochure and attendance in the video educational program (NEW WORLD verification of program participation).

Standard 115.34 Specialized training: Investigations

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

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

The finding of "meets standards" is supported by the following:

Twelve deputies were verified as completing the on-line National Institute of Corrections Investigating Sexual Abuse in a Confinement Setting on line course via NIC training certificates. The NIC Investigator course includes all of the mandated requirements in this standard. Kendall County Policy 606.6 mandates that only deputies who have completed an approved course in sexual abuse investigations may conduct PREA investigations.

Standard 115.35 Specialized training: Medical and mental health care

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

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

The finding of "meets standards" is supported by the following:

General Order 14-01 requires all staff including medical and mental health contractors to participate in the required course for all employees which meets the requirements for this standard. In addition, the contracted health care agency requires all health care staff to successfully complete the on line Medical Health Care of Sexual Assault Victims in a Confinement Setting course. Test scores are maintained and the employee signs a certificate of understanding. One of the five health care employees training certificates were verified by this auditor. It should be noted facility medical staff do not conduct forensic examinations. Training records for the five employees indicating participation in the facility training for staff who provide direct care to inmates training program were also reviewed and verified. The NIC On line course certificates were also reviewed for the five health care staff. Facility health care policies prohibit forensic examinations by facility medical staff. There have been no reported sexual assault allegations requiring a forensic examination in the last 12 months. Two of the five contractual medical and mental health staff were interviewed and both were aware of the PREA standards and agency's requirements to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and harassment and how and to whom to report allegations or suspicions of sexual abuse or harassment.

Standard 115.41 Screening for risk of victimization and abusiveness

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

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

The finding of "meets standards" is supported by the following:

General Order 92-35 Housing Prisoners requires screening for risk of sexual abuse victimization or sexual abusiveness toward other inmates. The risk instruments were reviewed for ten inmates and the screening was conducted in accordance with policy. The screening is conducted during the booking process and is fully compliant with the 72 hour screening requirement. Reports indicated all 1031 inmates admitted to the facility within the past 12 months (whose length of stay was 72 hours or more) completed the screening process. The risk screening instrument is maintained in the New World Inmate Management System. The risk assessment is an objective screening instrument and contains all of the criteria listed in 115.41(d). The initial screening asks about any charges for a crime against a person (which would include convictions for violent offenses), prior convictions for sex offenses and asks if the inmate has been incarcerated in this or any other state. General Order 92-35 requires the intake deputy to consider prior institutional history when making housing decisions. The PREA Operational Plan requires the facility to reassess the inmate within 30 days of intake for the inmate's risk of victimization or abusiveness based upon any relevant, additional information received by the facility since the intake screening. In the past year, the facility reports that no additional information relative to an inmate's risk of victimization or abusiveness had been obtained which required additional reassessment within 30 days. It was clear from the review of PREA investigations that inmates were reassessed due to incidents that occurred in the facility (both abusiveness and high risk of victimization). General Order 92-35 states inmates may not be disciplined for refusing to answer or for not disclosing complete information to questions relative to this standard. General Order 92-35 also mandates that information obtained during the screening process shall not be exploited to the inmate's detriment by staff. The screening instrument is maintained in the New World Inmate Management System and not accessible to staff. There were no indications of any type of denotations of an inmate's classification that would be accessible to an inmate during the tour of the facility or by interviews with staff. All of the randomly selected staff has conducted risk assessment during the intake process. All of the deputies indicated knowledge of the policy and could site examples when supervisory staff would be notified due to red flags during the risk assessment process. Documentation of reassessment was verified when inmates had made allegations of sexual abuse or harassment at the facility. Documentation of reassessment and housing consideration was verified by reviewing documentation included in the investigation on the inmate making the allegation and the inmate alleged to have committed the sexual abuse or harassment.

Standard 115.42 Use of screening information

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

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

The finding of "exceeding standards" is supported by the following:

General Order 92-35 and the PREA Operational Plan states information from the risk screening will be considered when making housing and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. The PREA Operational Plan states when deciding whether to assign a transgender or intersex inmate to housing or programs, deputies shall consider on a case by case basis whether a placement or program would ensure the inmates health and safety and whether the placement would present management or security problems. Information was obtained through staff interviews verify transgender and intersex inmates have been housed alone due to the inmates request but are not confined to a cell. The housing is not designated as a dedicated placement and transgender and intersex inmates are afforded the opportunity to choose which sex they feel most comfortable in attending programs and church services. A deputy is present during all programs and church services for additional security. Staff indicated there have been no instances in the past several years where an intersex or transgender inmates was housed at the jail for longer than a week. The PREA Operational Plan allows each transgender or intersex inmate a review every 30 days to determine if there is a need for continued separation from general population. This review includes the inmates view with respect to his or her own safety. This review exceeds the mandate of a review at least twice a year. Interviews with the randomly selected deputies (all having risk screening assignments) indicated there is no dedicated housing for lesbian, gay, bisexual, transgender, or intersex inmates. It should be noted the Kendall County Jail does not use an objective classification system. Inmates are not designated with any specific security levels (other than administrative segregation, disciplinary segregation, medical, protective custody, work release, inmate workers, special management, felony or misdemeanor.) The risk assessment is not scored however deputies do consider all of the responses when determining housing and programming decisions.

Standard 115.43 Protective custody

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606 PREA prohibits the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made there is no available alternatives means of separation from likely abusers. There have been no reported instances of involuntary segregated housing for inmates at risk for sexual victimization in the past 12 months for more than an hour although the policy allows for protective custody up to 24 hours while the assessment is completed. Kendall County Policy 606 PREA does require inmates placed in segregated housing to have access to programs,

privileges, and education to the extent possible and requires deputies to document any instance when opportunities have been limited, the duration of the limitation and the reasons for such limitations. The policy requires the Commander to review the need for continued protective custody at 30 day intervals; assignment to involuntary housing only until an alternative means of separation from likely abusers can be arranged which shall not ordinarily exceed 30 day. If an involuntary segregated housing assignment is made the facility commander must document the basis for the facilities concern for the inmate's safety and the reason why no alternative means of separation can be arranged. The policy also affords the inmate a review to determine if there is a continuing need for separation from the general population. Interviews with all agency staff (Agency administrators, command staff, supervisory staff and deputies) indicated inmates who are at risk of sexual victimization are not held in involuntary segregated housing.

Standard 115.51 Inmate reporting

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

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

The finding of "meets standards" is supported by the following:

The Kendall County Sheriff's Department provides multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse and sexual harassment and staff neglect or violation of responsibilities that may have contributed to such incidents. Randomly selected inmates were interviewed and all of the inmates could verbally articulate numerous ways to report allegations mandated in this standard. All of the inmates interviewed were aware of third party reporting opportunities and were aware of anonymous reporting opportunities. All of the inmates knew there were two different numbers to call from the inmate phones (HELP AND CRISIS) however a few did not know one of these numbers was a private entity. The inmates were aware these phone calls were not monitored and were free calls. The policy requires staff to accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports and no later than the end of the shift. All staff that was interviewed indicated reports are made as soon as possible and never less than the end of the shift. A review of completed investigations indicated allegations were accepted from investigation from third parties, the hot line, verbally and in writing by the grievance procedure. Kendall County Policy 606, the PREA Operational Plan, the inmate handbook and the inmate brochure lists verbal reporting to any staff member, in writing anonymously, third party reporting, a confidential hotline and a third party private entity that is not a part of the agency hotline number to report such instances. Kendall County Policy 604 requires the booking officer to inform the inmate, without delay, of the right to have consular officials and Homeland Security notified of the arrest or detention and the right to communicate with them. The deputy shall ensure this notification is acknowledged and documented. The Deputy will then notify the appropriate embassy, consulate and Homeland Security of the persons arrest by faxing the notification form or by phone. Notification shall be documented as well. Kendall County 606 states staff may privately report sexual abuse and sexual harassment to the Commander. All of the randomly selected staff stated they would be comfortable reporting all allegations to a Sergeant however, in the event they did not feel comfortable, they would report allegations through the person next in the chain of command. Kendall County Policy 604 states that inmates detained solely for civil immigration purposes shall be provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security. Only two of the deputies were able to verbally articulate the process of for inmates detained solely for civil immigration purposes. All of the deputies state civil immigration inmates are so rare, they would refer to the agency policies for guidance and would call a supervisor to ensure the requirements were met.

Standard 115.52 Exhaustion of administrative remedies

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

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

The finding of "meets standards" is supported by the following:

General Order 93-14 Inmate Complaints, Concerns and Grievances states inmates do not have to follow the grievance procedure when reporting sexual abuse. There is no time limit imposed; does not require an inmate to utilize the informal resolution process and there is nothing in the policy that restricts the agencies ability to defend against an inmate lawsuit on the found that the applicable statute of limitations has expired. The General Order, the Inmate PREA brochure and the inmate handbook states the inmate who alleges sexual assault does not have to submit the grievance or complaint to a staff member who is the subject of the complaint, and such a grievance will not be referred to a staff member who is the subject of the complaint. General Order 93-14 requires grievances requiring an investigation to be completed within 7 days; however more complex investigations may be expanded to 14 days for completion. All of the nine investigations were reviewed and all were completed within the seven days response mandate. The PREA Operational Plan allows 1) for third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates; 2) If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process; and 3) If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmates decision. It should be noted, two of the completed investigations reviewed were filed by other inmates on behalf of another inmate. The PREA Operational Plan establishes a procedure for emergency grievances alleging an inmate is subject to substantial risk of imminent sexual abuse. The PREA Operational Plan requires the grievance to be immediately forwarded to a level of review at which immediate corrective action may be taken and shall provide an initial response within 48 hours and a final decision within 5 calendar days. The initial response and final response is required to document the determination whether the inmate was in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The PREA policy allows for disciplinary action of an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrated the inmate filed the grievance in bad faith. This auditor noted one inmate was disciplined for making false statements during the investigative process. All of the randomly selected inmates were aware the grievance process was only one way to report sexual abuse and harassment and they could only be disciplined in false reporting (bad faith) and was aware of the emergency grievance process. The Sergeant responsible for due process hearings for inmates indicated there have been no disciplinary actions for inmates reporting sexual abuse or harassment allegations.

Standard 115.53 Inmate access to outside confidential support services

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

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

The finding of “meets standards” is supported by the following:

The Inmate PREA Brochure provides inmates with the phone number for Mutual Ground (victim advocates), the ability to dial CRISIS from an inmate phone to reach the victim advocates and the name and address of the victim advocacy agency. Kendall County Policy 604 directs staff to provide information relative to the appropriate embassy or consular contact numbers during the booking process for persons detained solely for civil immigration purposes. The inmate video and inmate informational brochure advises inmates the victim advocate number is a free call and the call is not recorded. Inmates are provided with phones on each housing unit and inmates are further advised by a recording when dialing the victim advocate number that the call is not being recorded. Inmates are advised the rape crisis center is required to report any allegation of sexual abuse to the Kendall County Sheriff’s Department via the Inmate PREA brochure. The Kendall County Sheriff’s Department has an MOU with Mutual Ground to provide confidential emotional support services related to sexual abuse. A copy of the MOU was provided to and reviewed by this auditor. Randomly selected inmates were reviewed and all were aware that emotional support via counseling would be afforded to them in the event they alleged sexual abuse or sexual harassment. The inmates stated they were aware the CRISIS line was not monitored and counseling would be confidential.

Standard 115.54 Third-party reporting

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

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

The finding of “meets standards” is supported by the following:

The Kendall County Sheriff’s Department has an established method to receive third party reports of sexual abuse and sexual harassment. The phone number is listed on the Department’s website and is available to the public (verified by viewing the website).

Standard 115.61 Staff and agency reporting duties

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

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

The finding of “meets standards” is supported by the following:

General Order 14-01 Prevention and Reporting requires all staff to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment that occurred in the facility; whether or not it is part of the agency; retaliation against inmates or staff who reported such an incident and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. General Order 14-01 mandates staff to maintain confidentiality on information regarding allegations of sexual misconduct. Information may not be released to 1) anyone other than KCSO staff designated to conduct the investigation, disciplinary process and/or

provide advocacy services unless instructed otherwise by the Sheriff or designee; 2) if the release of information is not necessary for the purpose of conducting a thorough and fair investigation, aiding in criminal investigation, protecting any person's physical safety or mental health, if required to do so by law or court order, or as directed by policy 3) Information related to sexual victimization or abuse is strictly limited to medical and mental health practitioners and staff as needed to develop treatment plans and security and management decisions, including housing, bed, work, education and program assignments. Kendall County Policy 606 requires all contractual staff (which includes health practitioners) to report sexual abuse. It is noted the health care staff at the facility does not provide services to sexual assault victims. The Copley Hospital Policy indicates law enforcement must be notified of all sexual assaults. The Copley further outlines the consents necessary to release information including sexual assault kits and the release of information is applicable to HIPPA requirements. The Kendall County Sheriff's Department does not house youth under the age of 18 years of age and the provisions for vulnerable persons under state statute (HB 948) does not apply to sexual abuse in a county detention facility. Kendall County Policy 606 PREA requires all allegations of sexual abuse, sexual harassment including third party and anonymous reports to be referred to and investigated by the Kendall County Sheriff's Department. The contracted health care provider provided an informed consent report that meets the requirements of this standard in the event of an allegation of sexual abuse was reported to medical staff. There have been no reported allegations to medical staff in the past 12 months. All randomly selected staff were aware of the policies relative to this standard with the exception of a potential allegation of sexual abuse by a youthful offender; however all staff indicated all reported sexual abuse would immediately be referred to the supervisor and PREA coordinator. The PREA coordinator was aware of the mandate to report sexual abuse to the Illinois Department of Children and Family Services. The PREA coordinator and command staff all indicated they would also inform juvenile probation of any allegation made by a youthful offender as Probation is the governmental entity that authorizes youth to be detained. It should be noted youthful offenders are only temporarily detained at the facility until transportation can be arranged and are not housed at the facility. Facility policy and interviews verified all allegations of sexual abuse (including third-party and anonymous reports) would be reported to investigators and investigations would be conducted.

Standard 115.62 Agency protection duties

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

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

The finding of "meets standards" is supported by the following:

The PREA Operational Plan requires immediate action to protect the inmate when the agency learns that an inmate is subject to substantial risk of imminent sexual abuse. There have been no reported instances of inmates alleging substantial risk of imminent sexual abuse in the past 12 months. Interviews with randomly selected staff indicated the response to inmates subject to imminent sexual abuse would be to immediately remove the potential aggressor.

Standard 115.63 Reporting to other confinement facilities

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606.4 requires the commander to notify the head of any facility of any reports of sexual abuse while confined at another facility. The reporting is required as soon as possible but no later than 72 hours after receiving the allegation. The policy requires the Commander to document any such reports and notification. There has been no reported allegations of sexual assaults in other facilities within the last 12 months. An interview with the commander verified that any such report would be handled by immediately notifying the identified facility. The PREA Operational Plan requires allegations of sexual assault received from other agencies are investigated in accordance with PREA standards. There have been no reports of sexual assault from other agencies received by the Kendall County Sheriff's Department in the last 12 months.

Standard 115.64 Staff first responder duties

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

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

The finding of "meets standards" is supported by the following:

The PREA Operational Plan and Kendall County Policy 606 serves as the first responder policy for allegations of sexual abuse. The PREA Operational Plan requires the first security staff member to respond to the report to 1) separate the alleged victim and abuser; 2) preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; 3) if the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating and 4) if the abuse occurred within a time frame that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking or eating. The PREA Operational Plan also mandates if the first responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy evidence, and then notify security staff. There have been no reported allegations of sexual assault at the facility within the last year. All randomly selected staff interviewed could verbally articulate the agencies first responder protocols.

Standard 115.65 Coordinated response

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

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

The finding of "meets standards" is supported by the following:

The PREA Operational Plan serves as the plan to coordinate actions taken in response to an incident of sexual abuse, among first responders, medical and mental health practitioners, investigators and facility leadership.

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

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

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

The finding of "meets standards" is supported by the following:

The collective bargaining contract between the Kendall County Sheriff's Department and IFOP (December 1, 2012 through November 30, 2015) was reviewed by this auditor and there is no provision that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. Command staff was interviewed and there is an established practice of removing any staff from working in positions that require contact with inmates during an investigation and through the employee disciplinary process. The process includes no contact posts and administrative leaves (prohibition from entering the facility).

Standard 115.67 Agency protection against retaliation

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

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

The finding of “meets standards” is supported by the following:

Kendall County Policy 606 protects all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff. The agency has designated a Sergeant from the Kendall County Sheriff's Department as the individual responsible with monitoring possible retaliation. Kendall County Policy 606 uses multiple protection measures such as changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Kendall County Policy 606 requires the PREA Manager to monitor and conduct and treatment of inmates or staff who reported the sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff and to act promptly to remedy such retaliation. The policy specifies that the PREA Manager shall monitor any inmate disciplinary records, housing or program changes, or negative performance reviews or reassignments of staff. The Policy allows for an additional 90 days if the initial monitoring indicates a continued need. The Policy requires periodic status checks for inmates. The commander is directed to limit the number of people who have access to the names of the individuals being monitored and directs the commander to take reasonable steps to ensure the Supervisor does not pose a threat of retaliation is not assigned to monitor retaliation. Kendall County Policy 606.5 requires the department to take appropriate measures to protect any other individual who cooperates with an investigation who expresses a fear of retaliation. The policy further relieves the department from the obligation to monitor if the allegation is unfounded. All staff (administrative, command, supervisory staff and deputies) was aware of multiple protection measures. The PREA Manager (designated staff to monitor retaliation) was interviewed and could verbally articulate the response and monitoring requirements of this standard. Memos documenting monitoring activities were reviewed and found to be consistent with the mandates of this standard. There has been no staff or inmates who have indicated fear of retaliation in the last 12 months. Periodic monitoring was conducted in order to detect any fear of retaliation.

Standard 115.68 Post-allegation protective custody

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

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

The finding of “meets standards” is supported by the following:

Kendall County Policy 606.11 prohibits the placement of inmates who allege to have suffered sexual abuse in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers. There have been no instances of inmates placed in involuntary segregated housing due to allegations of alleged sexual abuse in the last 12 months.

Standard 115.71 Criminal and administrative agency investigations

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606.6 and the PREA Operational Plan assigns administrative investigations to trained staff assigned to the jail and assigns criminal investigations to the Kendall County Sheriff's Operations Division and requires administrative and criminal investigations to be conducted promptly, thoroughly and objectively for all allegations, including third-party and anonymous reports. The Kendall County Sheriff's Department has twelve Deputies that have been trained to conduct sexual assault investigations (NIC on line course) and the training was verified through observation of Certificates of Completion from the NIC. The PREA Operational Plan requires investigators to gather and preserve direct and circumstantial evidence, including any available electronic monitoring data, shall interview alleged victims, suspected perpetrators and witnesses and shall review prior complaints and reports of sexual abuses involving the suspected perpetrator. The PREA Operational Plan mandates when the quality of evidence appears to support criminal prosecution, the agency shall conduct interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent prosecution. Administrative investigations 1) shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and 2) shall 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. Kendall County Policy 607 outlines the procedures for criminal investigations. Kendall County Policy 607 prohibits polygraph examinations or other truth telling devices as a condition for proceeding with the investigation. There were no sexual assault criminal investigations conducted in the last 12 months. The PREA Operational Plan and Kendall County Policy 606.6 require all substantiated allegations of conduct that appears to be criminal in nature to be referred to the Kendall County State's Attorney's Office for prosecution. Kendall County Policy 606 requires the Department to retain all written investigations to be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Interviews with investigators indicate an investigation would not terminate as a result of an alleged abuser or victim departure from the control or employment of the facility. Interviews with investigators also indicate the credibility of an alleged victim, suspect, or witness would not be determined by the person's status as an staff person or inmate. There were no criminal investigations of sexual abuse in the last year. All of the investigations conducted in the last year were reviewed, and third party allegations had been investigated. All of the investigations were conducted in a timely manner and were conducted by investigators who had received training in conducting investigations in a confinement setting. There was a PREA response and containment checklist completed for each investigation. There were no investigations within the last year alleging sexual abuse as defined by PREA standards. The administrative investigations were reviewed and it should be noted although there were no substantiated findings of sexual abuse, the investigator did note a staff's actions which may have contributed to the allegation of sexual harassment in one of the investigations. All of the investigations documented a description of the physical and testimonial evidence, facts and findings. The assessment of credibility was not always specifically addressed, however a determination of the credibility could be determined by statements written in the reports regarding the motivation established for the allegation. The investigations met the expectations of the standard however, it is recommended a standardized form for investigations is developed to easily identify components required in this standard.

Standard 115.72 Evidentiary standard for administrative investigations

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606 imposes a standard of preponderance of the evidence in determining whether allegations of sexual abuse or

sexual harassment are substantiated. The interview with an investigator and review of the administrative investigations indicated a preponderance of the evidence was used in determining the finding however it is recommended each investigative report use address the preponderance of the evidence is a statement in the conclusion section.

Standard 115.73 Reporting to inmates

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606 requires inmate notification of the findings (founded, substantiated, unsubstantiated or unfounded) of an investigation of sexual abuse. The two sexual abuse investigations conducted by Kendall County were reviewed and there was documentation of the PREA Manager's verbal notification as to the outcome of the investigation. Kendall County Policy 606 requires the Commander or designee to inform an inmate who has alleged sexual abuse from a staff member (unless the allegation is unfounded) when 1) the staff member is no longer posted within the inmates housing unit; 2) the staff member is no longer employed at the facility; 3) the agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility and 4) the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. There have been no substantiated complaints of sexual abuse within the facility within the past 12 months. Kendall Policy 606 also requires the Commander or designee to notify inmates when an allegation that the inmate has been sexually assaulted by another inmate when 1) the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility and 2) the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. There has been incidents within the last 12 months that required inmate reporting for an allegation of sexual abuse by a staff member of another inmate and documentation of reporting the findings to inmates was verified by memos from the employee who reported the finding to the inmate including the date and time of the notification. Kendall County Policy 606 requires all such notifications or attempted notifications to be documented.

Standard 115.76 Disciplinary sanctions for staff

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

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

The finding of “meets standards” is supported by the following:

Kendall County Policy 606.7.1 states staff is subject to disciplinary sanctions up to and including termination for violating the agency sexual abuse or sexual harassment policies. The policy further states termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse. And the disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member’s disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. Kendall County Policy 606 further states all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, shall be reported to law enforcement agencies, unless the actively was clearly not criminal, and to any relevant licensing bodies. There have been no terminations or resignations due to sexual abuse or allegations that occurred in the last 12 months. It is noted there was one resignation due to criminal prosecution of an incident that occurred in the previous year that was investigated by an external agency and referred for prosecution.

Standard 115.77 Corrective action for contractors and volunteers

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

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

The finding of “meets standards” is supported by the following:

Kendall County Policy 606.81 requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies unless the activity was clearly not criminal and to relevant licensing bodies. Kendall County Policy 606.81 states that any contractor or volunteer who engages in sexual abuse with inmates shall immediately be prohibited from any contact with inmates. An interview with the Commander verified the facility would take appropriate remedial measures and considers whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. There have been no reported allegations of sexual abuse or sexual harassment by a volunteer or contractor within the last 12 months.

Standard 115.78 Disciplinary sanctions for inmates

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

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

The finding of “meets standards” is supported by the following:

Kendall County Policy 606.8 states that inmates may be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate on inmate sexual abuse or following a criminal finding of guilt for inmate on inmate sexual abuse. There have been no reported administrative or criminal findings that an inmate has engaged in inmate on inmate contact within the last 12 months. The Commander indicated that sanctions for inmates would be commensurate with the nature and circumstances of the abuse committed, the inmates, disciplinary history and the sanctions imposed for comparable offense by other inmates with similar histories and the disciplinary process shall consider whether an inmate’s mental disabilities contributed to his or her behavior when determining what type of sanction, if any, should be imposed. There were no reported administrative findings that an inmate engaged in inmate on inmate sexual abuse or a criminal finding of guilt for inmate on inmate sexual abuse in the last 12 months. Kendall County Sheriff’s Department does not offer therapy, counseling, or other interventions to address and correct underlying reasons or motivations for abuse. Kendall County does not have a policy relative to discipline of an inmate involved in sexual assault on an inmate with or without consent of the inmate. Interviews with the PREA coordinator and Commander indicated there have been no reported instances of substantiated allegations of sexual abuse between an inmate and staff and due to the criminal nature of such conduct by staff, an inmate would not receive disciplinary sanctions in the event the staff member consented to such contact. Kendall County Policy 606 prohibits disciplinary action for a report of sexual abuse unless the allegation was determined to be reported in bad faith. The inmate handbook prohibits all sexual activity between inmates and lists deviate sexual assault, or engaging in sexual acts as major rule violations.

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

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

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

The finding of “meets standards” is supported by the following:

The PREA Operational plan requires a staff person to ensure that the inmate is offered a follow-up meeting with a medical or mental health provider within 14 days of intake screening in the event an inmate reports prior sexual victimization. The deputies are required to notify the supervisor on duty and the PREA Manager if any of three specified questions received a positive response during the risk screening. It is then the requirement of the PREA Manager to ensure the onsite mental health provider or an offsite mental health provider is provided a follow-up meeting within 14 days of intake. The PREA operational plan states any information related to sexual victimization or abusiveness in an institutional setting is limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security and management decisions, including housing, bed, work, education and program assignments or otherwise required by Federal, State and local law. The contracted health care provider policy has an information disclosure form (Form CT113UN0000ACCEN051014) which states: except for patients under the age of 18, medical and mental health practitioners must obtain informed consent from patient before reporting information about prior sexual victimization of the patients that did not occur in an institutional setting. The form states if consent is given, the information may be used by correctional authorities to make decisions about security and management issues, including housing, bed, work, education and program assignments. It should be noted there have been no reported inmates who have disclosed sexual victimization during the screening process in the past 12 months. Deputies were given a post test in regards to the screening process indicating understanding of the requirement.

Standard 115.82 Access to emergency medical and mental health services

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

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

The finding of "meets standards" is supported by the following:

The contracted health care agency Policy B-05 Response to Sexual Abuse states the policy is intended to ensure that the medical and psychological trauma of sexual abuse is minimized as much as possible by prompt and appropriate health intervention. Prompt and appropriate health intervention will take place in the event of a sexual abuse.

The Kendall County Policy 606.10 requires first responders to separate the parties, request medical assistance as appropriate, If no health care or mental health professionals are on duty when a report of recent abuse is made, staff responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate health care and mental health practitioners. The contracted health care agency will conduct a preliminary evaluation and treatment of any visible injuries, without disturbing evidence and afford as much privacy as possible. Victims of sexual abuse will be referred to a local emergency room for treatment or gathering of forensic evidence. After emergency treatment is provided, health care staff will notify mental health. In the event mental health is not on site will make a phone referral and the psychiatrist may be contacted for consultation is required. The health care staff (if mental health is not present) or mental health will assess need for immediate crisis intervention. The contracted health care agency, Copley Hospital and Edward Hospital policies all offer information and timely access to emergency contraception and sexually transmitted infections prophylaxis, as appropriate. Kendall County Policy 606.10 states treatment services shall be 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. Kendall County Policy 606.10 also states victims shall be offered information about, and given access to, emergency contraception and sexually transmitted infections prophylaxis and follow-up for sexually transmitted diseases in a timely manner. Kendall County Policy 606.10 and the PREA Operational Plan states treatment services shall be 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.

Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and abusers

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

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

The finding of "meets standards" is supported by the following:

The PREA Operational Plan states the agency shall:

1. Offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiary or medically appropriate.
2. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment
3. The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.
4. The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody.

Kendall County Policy 606.10 states inmate victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results, such victims shall receive comprehensive information about and access to, all lawful pregnancy-related medical services in a timely manner and provisions shall be made for testing the victim for sexually transmitted diseases. Kendall County Policy 606.10 also states treatment services shall be 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.

The above policies and protocols are consistent with the community level of care. There have been no reported sexual abuse victims in the last year.

Standard 115.86 Sexual abuse incident reviews

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606.12 requires an incident review to be conducted at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. The review shall occur within 30 days of the conclusion of the investigation.

The review team shall include upper-level management officials and seek input from line supervisors, investigators and qualified health care and or mental health professionals, as appropriate:

- (a) Consider whether the investigation indicates a need to change policy or practice in order to better prevent, detect or respond to sexual abuse.
- (b) Consider whether the incident or allegation was motivated by race, ethnicity, gender identity or lesbian, gay, bisexual, transgender or intersex identification status or perceived status, by gang affiliation, or was motivated or otherwise caused by other group dynamics at the facility.
- (c) Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers may enable abuse.
- (d) Assess the adequacy of staffing levels in the area during different shifts.
- (e) Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff.
- (f) Prepare a written report of the team's findings, including, but not limited to, determinations made pursuant to paragraphs (a)-(e) of this section, and any recommendations for improvement. The report should be submitted to the Corrections Commander and the PREA Manager.

The Corrections Commander or the authorized designee shall implement the recommendations for improvement or document the reasons for not doing so.

It should be noted there have been no unsubstantiated or founded sexual abuse investigations in the last year.

Standard 115.87 Data collection

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

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

The finding of "meets standards" is supported by the following:

Kendall County uses the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. In addition, a review of the seven investigations was conducted and conclusions were made regarding the inmate's awareness of PREA, the adequacy of camera coverage and supervision for each allegation, a review of the response to the allegations and the adequacy of staff training. The last review was conducted on July 23, 2015.

Standard 115.88 Data review for corrective action

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606 requires the Sheriff's Department to conduct an annual review of collected and aggregated incident-based sexual abuse data. The purpose of the review is to assess and improve the effectiveness of sexual abuse prevention, detection and response policies, practices and training by: 1) identifying problem areas, 2) identifying corrective actions taken, 3) recommending corrective actions, 4) comparing current annual data and corrective actions with those from prior years and 5) assessing the offices progress in addressing sexual abuse. The reports shall be approved by the Corrections Commander and made available through the office website. Material may be redacted from the reports when publication would present a clear and specific threat to the safety. However, the nature of the redacted material shall be indicated. All aggregated sexual abuse data from Kendall County Sheriff's Department shall be made available to the public at least annually through the office website.

Standard 115.89 Data storage, publication, and destruction

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

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

The finding of "meets standards" is supported by the following:

Kendall County Policy 606.14 requires all case records and reports associated with a claim of sexual abuse and sexual harassment, including incident reports, investigative reports, offender information, case disposition, medical and counseling evaluation findings and recommendation for post-release treatment or counseling, shall be retained in accordance with confidentiality laws. The Kendall County Sheriff's Department operates one facility. Kendall County Policy 606.14 requires all written reports from administrative and criminal investigations pursuant to PREA for as long as the alleged abuser is held or employed by the Agency, plus five years and all other data pursuant to 115.87 to be securely maintained for at least 10 years after the date of initial collection, unless federal, state or local law requires otherwise.

AUDITOR CERTIFICATION

I certify that:

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

Brenda Luelch

8-17-15

Auditor Signature

Date