# PREA Audit Report

**ADULT PRISONS & JAILS**

**Date of report:** December 8, 2016

<table>
<thead>
<tr>
<th><strong>Auditor Information</strong></th>
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<tbody>
<tr>
<td><strong>Auditor name:</strong> Timothy Pippo</td>
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<tr>
<td><strong>Address:</strong> 3800 Braddock Av NE Buffalo, MN 55313</td>
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<tr>
<td><strong>Email:</strong> <a href="mailto:tim.pippo@co.wright.mn.us">tim.pippo@co.wright.mn.us</a></td>
</tr>
<tr>
<td><strong>Telephone number:</strong> 763-684-2380</td>
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<tr>
<td><strong>Date of facility visit:</strong> 10/25/16 10/26/16</td>
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<table>
<thead>
<tr>
<th><strong>Facility Information</strong></th>
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<tbody>
<tr>
<td><strong>Facility name:</strong> Becker County Jail</td>
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<tr>
<td><strong>Facility physical address:</strong> 925 Lake Avenue  Detroit Lakes, MN  56501</td>
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<tr>
<td><strong>Facility mailing address:</strong> (if different from above) Click here to enter text.</td>
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<td><strong>Facility telephone number:</strong> Click here to enter text.</td>
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<tr>
<td><strong>The facility is:</strong> ☒ County</td>
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<tr>
<td><strong>Military</strong> ☐</td>
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<td><strong>Municipal</strong> ☐</td>
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<td><strong>Private for profit</strong> ☐</td>
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<td><strong>Private not for profit</strong> ☐</td>
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<tr>
<td><strong>Facility type:</strong> ☒ Jail</td>
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**Name of facility’s Chief Executive Officer:** Jon Rastedt

**Number of staff assigned to the facility in the last 12 months:** 29

**Designed facility capacity:** 96

**Current population of facility:** 75

**Facility security levels/inmate custody levels:** Minimum, Medium, Maximum

**Age range of the population:** 18-80

**Name of PREA Compliance Manager:** N/A

**Email address:** Click here to enter text.

<table>
<thead>
<tr>
<th><strong>Agency Information</strong></th>
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<tbody>
<tr>
<td><strong>Name of agency:</strong> Becker County Sheriff’s Office</td>
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<tr>
<td><strong>Governing authority or parent agency:</strong> (if applicable) Becker County Board of Commisioners</td>
</tr>
<tr>
<td><strong>Physical address:</strong> 925 Lake Avenue  Detroit Lakes, MN 56501</td>
</tr>
<tr>
<td><strong>Mailing address:</strong> (if different from above) Click here to enter text.</td>
</tr>
<tr>
<td><strong>Telephone number:</strong> 218-847-2939</td>
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</table>

**Agency Chief Executive Officer**

**Name:** Todd Glander

**Email address:** tdgland@co.becker.mn.us

**Telephone number:** 218-847-2939 #6

**Agency-Wide PREA Coordinator**

**Name:** Vivian Anderson

**Email address:** veander@co.becker.mn.us

**Telephone number:** 218-847-2939 #6
AUDIT FINDINGS

NARRATIVE

Becker County Jail is comprised of two buildings located in the city of Detroit Lakes Minnesota. Becker County is located in Northwest Minnesota, it is a rural community comprised of farmland and numerous lakes. The Jail is a medium sized jail that houses Adult Male and Female local offenders along with Male Work Release Inmates from the Minnesota Department of Corrections. The jail is limited to holding Juvenile offenders for a 24 hour time frame only. The Facility is licensed and inspected by the Minnesota Department of Corrections and abides by Minnesota Rule 2911Governing Adult Detention Facilities. On October 25, 26, 2016 Timothy Pippo a Certified PREA Auditor conducted an audit of the Becker County Jail. On the first day of the audit I was given a complete tour of the facility. I was given access to view camera monitors and to view any and all pertinent records and documents. I was provided with a private area to conduct 11 inmate interviews along with 17 staff interviews. On the second day of the audit I was given a complete tour of the building that houses the Jail’s minimum security inmates that are on some type of release program. I conducted additional staff and inmate interviews on this day also. I conducted 5 subsequent phone interviews after the on-site audit.

Mission Statement:

The mission of the Becker County Jail is to serve and protect ensuring a safe environment to those who live, work and recreate in Becker County by providing for the care, custody and control of inmates remanded to its facilities, and by assisting these inmates in their preparation for the release as civil and productive citizens without regard to religion, color, sex or nationality.

The Becker County Jail is dedicated to serving the citizens of Becker County and its neighboring communities. Our goal is to preserve the basic rights and dignity of those detained here by employing trained professional staff to provide the care, structure and discipline to motivate positive lifestyle changes for detainees, while exceeding all standards set forth by law and maximizing the financial and social benefits to the communities we serve.
DESCRIPTION OF FACILITY CHARACTERISTICS

Becker County Jail houses its Medium/Maximum male and female inmates on the second floor of the Becker County Courthouse building located at 925 Lake Av. This portion of the jail named Max Jail has a maximum capacity of 48 inmates. There were 42 inmates in custody on the day of the audit. The Max Jail is staffed at a minimum of 3 officers but normally runs with 4 or 5 officers and has a supervisor or designated officer in charge on duty at all times. It is a linear design with a master control room that is staffed 24/7 and has video monitors for 31 cameras, 2 program rooms, an outdoor recreation area and a booking area that has 3 holding cells. There are 2 office rooms and a medical room for the nurse to utilize. There is an inmate laundry room and an inmate storage room. The Max Jail has a visitation area and 2 interview rooms also. All of these rooms have large windows to allow for good visibility. The Max Jail has 12 housing units comprised of one 4 bed, five 2bed, three 3 bed, one 5 bed. There are two dormitory type units, one with 10 beds and one with 8 beds. The units all have private shower areas with privacy curtains on the showers. The dormitory units have private bathroom areas. Officers make periodic security checks on all housing units about every 30 minutes. The other building named the Min Security Jail is located at 640 Randolph Road in the city of Detroit Lakes. This is a warehouse type building that has an officer’s station which overlooks 48 bunks in one room and has video monitors for 18 cameras. This building has one large bathroom area that contains 4 private individual showers. There is a locker room, a recreation room, a kitchen area and a room used for nurse visits. The building has a visitation area and a staff office along with a laundry room. This Min Security part of the Becker County Jail is staffed by male officers only. The Min Security Jail houses up to 48 male inmates. There were 33 inmates housed there on the day of the audit. This portion of the jail is normally staffed by one male officer.
SUMMARY OF AUDIT FINDINGS

Click here to enter text.

Number of standards exceeded: 0
Number of standards met: 42
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.

Policy C612.2 covers this standard. The facility has in place a policy and procedures to ensure zero tolerance towards sexual abuse or harassment in the jail. Interviews with the PREA Coordinator, the Jail Administrator and the Sheriff assured this auditor that the designated PREA Coordinator has ample authority and time to implement efforts to adhere to the zero tolerance policy.

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)

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Becker County Jail does not contract with any outside vendors for security services. This standard is not applicable to the facility. However, when they are overcrowded they may house inmates in Crow Wing County Jail. Crow Wing County Jail is in compliance with PREA as indicated by this web-site http://crowwing.us/DocumentCenter/Home/View/11419

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)

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The facility has a detailed staffing plan that is in compliance with Minnesota Rule 2911.0900 and includes post orders for staff. The Jail never varies from the staffing plan, overtime is utilized to ensure staff coverage at all times. The Jail has documented reviews of the staffing plan to ensure compliance with the PREA standards. Policy C204.2 covers this standard. Supervisors make unannounced documented
checks on the Min Security building frequently. Supervisors in the Max Jail work alongside line staff and assist them in doing security rounds, they record these checks on an “Unannounced Round Form” also.

**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)

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The facility may only hold youthful offenders for up to 24 hours. The Jail has a practice of not housing youthful inmates for more than 2-3 hours. Interviews with line staff and supervisors confirmed that juvenile offenders are always separated from adults by sight and sound.

**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)

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Policy C612.2 F pertains to the specifics of this standard. All of the shower areas in both buildings provide for the privacy of the inmate. Interviews with staff members and inmates confirmed that staff of the opposite gender announces their presence when entering the housing units. The facility does not allow cross-gender pat searches or strip searches. Inmates indicated through interviews that they felt safe in the facility and were never in peril of being viewed by staff of the opposite gender inappropriately. Officers indicated through interviews that they would consider a transgender inmate’s own perception of which staff would perform searches on them. The jail utilizes a “strip search form” and a “search preference form” to ensure compliance with policy and procedures.

**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.

Jail Policy C612.2 G adheres to this standard. The Jail has a contract with “Language Line” an interpretive vendor to aid in translation services. Staff members stated that they would use every means possible to communicate with inmates who are disabled or have limited English speaking skills. The facility has a Spanish version of its Inmate PREA Orientation form to use if needed and a Spanish version of the Inmate Handbook.

**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 Jail follows the Becker County Personnel Policy and Jail Policy C612.2 J in regards to background checks on all of its staff. Employees are required to disclose any incidents of sexual abuse or harassment that they have been involved with. Employees sign acknowledgment that they may be disciplined up to termination for incidents of misconduct. Criminal background checks are conducted on all new employees and on existing employees at least every 5 years. Employee evaluations compel the employee to disclose any misconduct as outlined in this standard. An interview with staff member that is involved with hiring decisions confirmed that background checks were completed and that misconduct incidents would be disclosed to other agencies hiring former Becker County employees. Agency Policy C114 disqualifies anyone for hire or promotion in accordance with this standard.

**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.

Policy C612.2 K concerns upgrades to the facility. The facility does not have any recent upgrades. Becker County is planning to build a new Jail Facility in the near future, PREA considerations will be factored into the design of the building.

**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)

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The Jail follows Policy C612.03 to meet the requirements of this standard. The Becker County Sheriff’s Office has 3 well-trained, experienced detectives assigned to do investigations of sexual abuse incidents that occur within the jail. An interview with one of the investigators confirmed that they would ensure complete investigations would completed and forensic examinations would take place at “Essentia St Mary’s Medical Center” Detroit Lakes [http://www.essentialhealth.org/stmarysdetroitlakes/emergency-medicine.aspx](http://www.essentialhealth.org/stmarysdetroitlakes/emergency-medicine.aspx). An interview with a representative from the Emergency Department of this hospital assured that they would provide forensic examination services to victims of sexual assault that occurred in the Becker County Jail and that they have qualified “SANE” staff. The jail would utilize the victim advocate services of “Lakes Crisis and Resource Center” Detroit Lakes [http://lakescrisis.com/programs/advocacy](http://lakescrisis.com/programs/advocacy) to provide services for victims of sexual assaults detained in the jail. An interview with a supervisor from the Crisis Center affirmed that they would provide services for the Becker County Jail. Sheriff’s Office Policy 600 outlines procedures for criminal investigations of sexual assault. These procedures adhere to the specifications of this standard.

**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)

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The Becker County Jail has Policy C612.03 F in place to ensure that criminal investigations would be conducted on any and all allegations or incidents of sexual assault that occurred in the jail. Investigations would be referred to the Becker County Attorney for prosecution [http://www.co.becker.mn.us/dept/attorney/default.aspx](http://www.co.becker.mn.us/dept/attorney/default.aspx). There were no incidents of sexual assault investigated in the jail in this audit period.

**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)

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The facility has trained all employees with a curriculum that pertains to all of the aspects of this standard according to Policy C612.04 A.
Interviews with staff members confirmed that they had received and acknowledged receipt of the training. Employees have been trained on how to detect and respond to sexual assault and sexual harassment allegations and incident and how to report such occurrences. The facility maintains documentation of training.

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)

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The Jail has 25 volunteers that enter the jail for various programs. The volunteers have received the same training as all the staff members. I interviewed 3 volunteers and they all confirmed that they had received and understood the documented training and were aware of how to report incidents or allegations that may be reported to them. The jail does not have any co-educational programs. The Jail uses “A’viands” for food service. “A’viands” has trained all of their employees on zero tolerance toward sexual assault or harassment the kitchen is not within the security portion of the facility, kitchen staff does not have contact with inmates.

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)

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Policy C612.04 B concerns this standard. Inmates are given PREA Orientation Form to read and sign an acknowledgement of understanding at the time of intake. The PREA Zero Tolerance Policy is included in the Inmate Handbook. The facility has posters in the housing units that inform inmates of their rights to be free from sexual abuse or harassment. All of these documents have phone numbers and methods spelled out for inmates to make reports to staff or third parties. Inmates indicated through interviews that they were aware of the facility zero tolerance policy. The facility does follow-up training for the inmates during re-classification at least every 30 days.

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)

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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 3 detectives from the Becker County Sheriff’s Office and the 3 supervisors in the jail that have been assigned Administrative Review responsibilities have received specialized training on investigations in a confinement setting. The detectives have documented receipt of training sponsored by the Minnesota Sheriff’s Association and the administrative review team has documented receipt of training from a National Institute of Corrections on-line training course.

**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)

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The Jail utilizes Becker County Public Health Nurses for medical care for inmates [http://www.co.becker.mn.us/dept/community_health/default.aspx](http://www.co.becker.mn.us/dept/community_health/default.aspx). The nurses that work in the Jail have received training on how to detect and respond to incidents and allegations of sexual abuse and sexual harassment. They received training through the National Institute of Corrections “Learn Center” and from the Minnesota Department of Corrections. Forensic exams would take place at the local hospital.

**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)

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Jail Policy C612.2 H concerns this standard. The facility has a screening tool to aid them in doing a complete assessment of each inmate during the intake process. The jail has specific procedures to follow when using the Inmate Classification Assessment Form. They also use a Re-Classification Assessment Form and a Sexual Violence Reassessment Tool aiding them to reassess vulnerability and aggressive behaviors at least every thirty days that the inmate is in custody. Supervisors approve these assessments and use a tracking log to document completion of the assessments. All officers perform intakes and assessments. Inmates are not disciplined for not answering sensitive questions. The completed assessments are secured in an area that only intake officers and supervisors have access to.

**Standard 115.42 Use of screening information**
The Jail uses the information from the Classification-Assessment tool to determine housing assignments. The facility has outlined the procedures for staff to follow. Interviews with staff members showed that they would consider a transgender inmate’s own views of safety when doing housing assignments. The tool contains language for Mental Health referrals also. All inmates are able to shower privately. There were no inmates meeting the LGBTI definitions during the audit.

**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)

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Policy C612.2 I pertains to this standard. Interviews with staff members revealed that they would only use Protective Custody for as minimal amount of time as necessary. They also indicated that they would provide protective custody inmates with programing opportunities. There were no inmates placed into protective custody for being at a high risk of sexual victimization within the last year.

**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)

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This standard is covered by Policy C612.03 A. The facility provides inmates with numerous methods to report any allegations or incidents of sexual abuse or sexual harassment. Interviews with inmates confirmed that they knew of several ways to report. Postings in the housing units and the Inmate Handbook contain information on how to report. The phone number for the “Lakes Crisis Center” is conspicuously posted and available for inmates to use. Both inmates and staff members stated that they could make reports privately if they needed or
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)

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Becker County Jail has a grievance procedure and policy for inmates to use. The inmate handbook, postings and the policy all inform inmates that grievances concerning sexual abuse or sexual harassment would be treated as an emergency grievance and acted upon immediately.

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 jail has a signed memoranda of understanding with “Lakes Crisis and Resource Center” http://lakescrisis.com/programs/advocacy to provide victim advocacy services for inmates in the Becker County Jail. An interview with a supervisor from the crisis center affirmed that they would provide such confidential services free of charge.

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)

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Policy C612.03 B covers this standard. The Sheriff’s Office has third party reporting phone numbers and resources posted on its web-site [http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA_POLICY.pdf](http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA_POLICY.pdf) Interviews with officers affirmed that they would take and act upon reports from any third party and interviews with inmates affirmed that they knew third party person could make a report for them on their behalf.

**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)

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Becker County Jail staff members follow Policy C612.03 B in regards to reporting duties. Staff are trained on how to accept reports and compelled to notify supervisors and investigators immediately upon receipt of such reports. Minnesota State Laws require mandatory reporting of any incidents involving persons under the age of 18.

**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)

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Interviews with all employees indicated that the safety concerns of a victim or potential victim were of upmost importance and all measures would be taken to protect these victims.

**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)

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corrective actions taken by the facility.

The facility has a standard practice and a procedure to aid officers in notification to another facility of any incidents reported to them that occurred in the other facility. Interviews with supervisory staff ensured that this notification would take place according to the standard.

**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.**

Policy C612.03 B provides a base for staff members to refer to as first responders. The facility has First Responder Sexual Assault Response Checklist, a Supervisor First Response Checklist and all officers have been trained on how to correctly and efficiently respond to a sexual assault incident. Interviews with staff members indicated that they were well aware of their responsibilities to safeguard the victim and preserve criminal evidence.

**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.**

Policy C612.03 B also outlines the coordinated response of all employees from first responders to investigators to medical staff on how to respond to a sexual assault incident or allegation. The facility has a Coordinated Response to a Sexual Assault Incident Form to assist all staff in the correct procedures to follow when reacting to an incident. The form outlines specific duties for all staff involved.

**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.

Supervisory staff members insured that all measures would be taken to protect any and all victims of sexual abuse from the aggressor. Officers in the jail are part of a collective bargaining agreement. The Sheriff assured me that nothing in that agreement would prevent him from removing and disciplining an officer involved in a sexual abuse or harassment incident as per Policy C612.06.

**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.**

Policy C612.03 G along with County Policy cover this standard and prohibit retaliation of staff members towards any person. Interviews with staff members indicated that they would monitor any victim, reporter or witness for retaliation from anyone for the inmate’s entire stay in the facility. The facility will take all measures possible to protect officers and inmates from any type 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.**

Becker County Jail will follow Policy C612.03 G when determining how to protect victims of sexual abuse. Staff interviews show that all measures would be taken to protect any victim and separation of the abuser from the victim was of upmost importance.

**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 3 Becker County Detectives assigned to investigate all sexual abuse incidents or allegations in the County including the Jail have received specialized training and are experienced in criminal investigations. If an investigation were referred to another investigating Law Enforcement Agency because of conflict of interest, the Sheriff’s Office would ensure a quality investigation would occur. Agency Policy 600 and 602 ensure that a victim’s rights are adhered to and that investigations would be referred to the Becker County Attorney for potential prosecution. The facility also uses the US Department of Justice “A National Protocol for Sexual Assault Medical Forensic Examinations” as a reference guide in response to sexual assaults within the facility.

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.

An interview with 1 of the Becker County Detectives confirmed compliance with this standard for evidence in an investigation.

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 Sheriff, the Jail Administrator and the PREA Coordinator all agreed that victims would be kept apprised of any on-going investigation of sexual abuse concerning them. This would include the status of the investigation and if criminal charges have been imposed.

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.

Jail Policy C612.03 H outlines sanctions for staff members up to and including termination for violation of facility, agency or county polices pertaining to sexual abuse or harassment. All employees are required to sign a Code of Conduct Fraternization Form that prohibits them from engaging in sexual contact or harassment or fraternization with inmates and compels them to report any misconduct to supervisors. Minnesota State Statute 609.344 defines sexual contact defined in the standards as criminal. There have been no employees disciplined for sexual abuse or harassment in the facility.

**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.

Volunteers and contractors that have contact with inmates are required to sign acknowledgement of the same Code of Conduct Fraternization Form that officers sign. Interviews with supervisors of the jail indicated that volunteers or contractors would be immediately removed and banned from the jail and that all measures would be taken to investigate and possibly prosecute any offenders. There have been no volunteers or contractors disciplined for misconduct within the facility.

**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.

Inmate Rules of Conduct are posted in the housing units and contained in the Inmate Handbook. These rules define zero tolerance towards sexual abuse or harassment and spell out disciplinary actions that may be taken for violation of these rules of conduct.

**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 assessment tool used be the facility at intake has procedures for the officer to take to refer victims or abusers to medical staff for possible mental health evaluations. An interview with a nurse confirmed that they would provide mental health treatment to the extent of their resources and refer inmate to community resources if necessary.

**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.

Emergency medical attention would be provided to any victim free of charge as confirmed by the facility nurse and the Jail Administrator. Victims in need of emergency care and forensic examinations would be transported immediately to the local hospital.

**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.

Jail Policy C612.03 D ensures ongoing medical and mental health services for victim of sexual abuse. The nurse confirmed the fact that every effort would be taken to provide the services outlined in this standard and that the level of care provided would meet or exceed community standards.

**Standard 115.86 Sexual abuse incident reviews**

☐ Exceeds Standard (substantially exceeds requirement of standard)
The facility follows Policy C612.03 F and has an incident review team. They have developed a Sexual Assault Review form to aid them in complying with this standard. The team has received specialized training for investigations in a confinement setting. Recommendations from the team will be acted upon to enhance the protection of inmates.

**Standard 115.87 Data collection**

☐ 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.

Becker County Jail has a method and practice of collecting incident based data for every allegation or incident of sexual abuse and a policy to back-up this data collection. The facility is prepared to provide this data to the US Department of Justice if requested. The data is classified by definitions outlined in the PREA standards.

**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 Jail follows its policy and criteria set in this standard when creating the facility annual report that contains data from previous years and states the Jail’s commitment to zero tolerance towards sexual abuse and sexual harassment. Current year’s data is posted on the jail web-site http://www.co.becker.mn.us/dept/sheriff/PDFs/PREA_POLICY.pdf

**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.

There is a Policy in place to assure compliance with this standard. The Becker County Jail will abide by Federal and State Laws and MN Rule 2911.2100 in reference to data storage and publication. Supervisors assured that personal identifiers would be redacted in publications.

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.

Timothy Pippo ________________________________ December 8, 2016 ________________
Auditor Signature Date