

2021 ANNUAL PREA REPORT

An Internal Analysis of CY-2021

Sexual Abuse and Sexual

Harassment Data



Illinois Dept. of Corrections

Rob Jeffreys, Director

Illinois Department of Corrections 2021 Annual PREA Report

The Prison Rape Elimination Act (PREA) was passed in 2003 with unanimous support from both parties in Congress and signed into law by President George W. Bush in 2003. The purpose of the Act was to “provide for the analysis of the incidence and effects of prison rape in Federal, State, and local institutions and to provide information, resources, recommendations and funding to protect individuals from prison rape”.

The Department maintains a strict “**Zero Tolerance**” policy towards all forms of sexual abuse and sexual harassment; and provides guidelines for the prevention, detection, response, investigation, and tracking of all allegations. All allegations of sexual abuse and sexual harassment are taken seriously, investigated, and when applicable, referred for prosecution. While incarcerated within the Illinois Department of Corrections, the safety of the individuals in our custody is a primary concern; and that safety includes the right to be free from sexual abuse, harassment and retaliation.

This Annual PREA Report is prepared and published in accordance with PREA Standard §115.88.

This report, and previous Annual PREA Reports, may be found on the Illinois Department of Corrections’ webpage: <https://www2.illinois.gov/idoc/programs/Pages/PrisonRapeEliminationActof2003.aspx>

ACCOMPLISHMENTS

The Department remains diligent to ensure the sexual safety of all individuals under the care and control of the Illinois Department of Corrections. Employee training, specifically in the area of prevention, detection, and response of sexual abuse and sexual harassment, has been a primary focus. In addition to training new security and non-security staff, Staff Development & Training continues to provide an in-depth comprehensive training module on the Department’s Sexual Abuse and Harassment Prevention and Intervention Program.

The module is available to all staff; however, the training is a prerequisite for any staff appointed as a facility PREA Compliance Manager or facility backup PREA Compliance Manager, as well as any staff member who may act as a Duty Administrative Officer for the facility. With the addition of Staff Development Specialists (SDS) being assigned at each correctional facility, the Department is now able offer the comprehensive training regionally at multiple locations around the State to increase staff’s access to the training regardless of geographic location. The training was offered 31 times across the state in 2021 and provided an opportunity for over 150 staff to receive the in-depth training.

All security staff who attend the 8-week Training Academy also receive specialized training specific to supervising incarcerated women. The Gender-Responsive and Trauma-Informed training educates staff of the unique needs of incarcerated women, including how past victimization in the community and in a corrections environment influences current behavior; effective strategies for communicating with women in custody; as well as how to appropriately respond to potential victims of sexual assault and sexual harassment.

Security staff assigned to the Women’s Division are also provided *CR/2 – Creating Regulation and Resilience* training. CR/2 is a communication model that provides corrections professionals with the skills they need to communicate with individuals in custody more effectively, de-escalate problem situations and create safer and more productive facilities. CR/2 empowers staff with the knowledge and skills they need to implement effective responses, thus increasing staff satisfaction and retention.

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The Department strives to ensure an objective and impartial investigation is conducted to ensure the integrity of every sexual abuse or sexual harassment investigation. Completing PREA investigations timely has been a perpetual concern. To eliminate the backlog of pending investigations and increase the speed at which future investigations can be concluded, the Department conducted training for an additional 62 internal affairs and intel staff in September 2021. The 40-hour *Institutional Investigator* training covers topics such as, but not limited to, techniques for interviewing sexual abuse victims, proper use of *Miranda* and *Garrity* warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecutorial referral.

The Department continues to encourage staff to participate in the National Institute of Corrections' (NIC) PREA Online Learning curriculum which provides targeted PREA training specific to the employee's position (e.g. Investigations, Healthcare, Mental Health, Facility PREA Compliance Manager, etc.). The training is offered at no cost and provides a great supplement to the multitude of PREA training opportunities offered by the Department.

The Department contracted with a vendor to create training curricula regarding transgender and non-binary individuals in correctional settings. The training, titled *Transgender and Non-Binary Individuals in Correctional Settings – A Guide to Rehabilitation, Safety Management and Care*, highlights the differences between Sex, Gender and Sexual Orientation, as well as the unique needs of the transgender incarcerated population. Participation in the training is mandatory for all Department employees.

Utilizing an IDOC-initiated request for technical assistance from the National PREA Resource Center, the Department partnered with The Moss Group (TMG), a correctional consulting firm based out of Washington, DC. Utilizing a Bureau of Justice Assistance (BJA) grant, TMG assisted the Department in improving the accuracy of reporting of sexual abuse and sexual harassment allegations in accordance with PREA. Through collaboration with agency and facility leadership, current processes were examined, and recommendations and guidance were provided to increase data accuracy and reduce the need for investigations of allegations which do not meet the PREA definitions of sexual abuse and sexual harassment (§115.6). A concise, narrated PowerPoint training and accompanying handout was created and has been distributed statewide to the Department's Shift Supervisors, upper and mid-level facility leadership, and staff directly involved in the PREA response protocol. This training will be discussed in greater detail later in this report since it has had significant impact on reporting data and allegation trends.

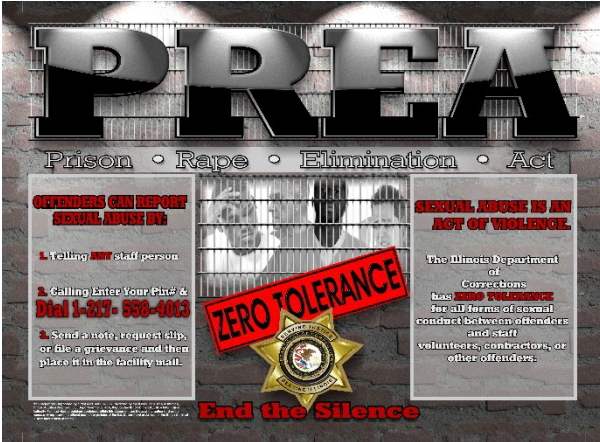
Through a partnership with the Illinois Coalition Against Sexual Assault (ICASA), the Department and ICASA were able to collaborate to create a template for a memorandum of understanding (MOU) to ensure the men and women in our custody have timely access to confidential support services and victim advocacy offered by local rape crisis centers in the community. With the tremendous help and guidance from ICASA, the Department has now entered into 29 exclusive MOUs between local crisis centers and our facilities.

In addition to staff training, the Department continues to place substantial emphasis on education of individuals in custody. Ensuring all individuals in custody know how to report an allegation of abuse, and knowing those reports may be made confidentially and without fear of retaliation, is paramount. All are provided with information regarding the Department's Zero Tolerance policy at intake. PREA information is provided to each throughout their incarceration through staff and peer PREA educators, placement of over 2,500 bilingual permanent signs, information offered on the facility's dedicated TV channel, the

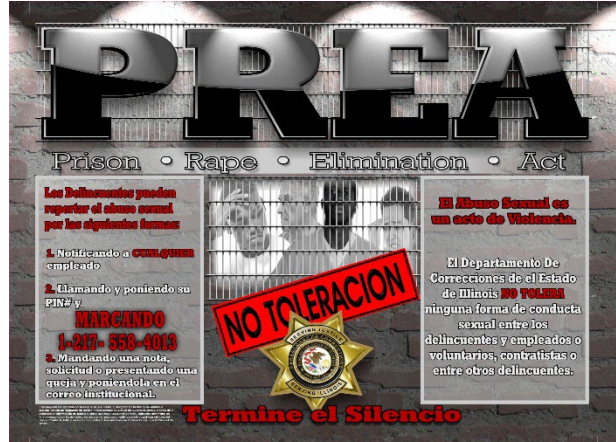
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facility's Handbook for Individuals in Custody, printed brochures, and even more creative ways like painted murals throughout some facilities.

PREA Signs Designed & Manufactured by Illinois Correctional Industries (ICI)



PREA Informational Sign (English)



PREA Informational Sign (Spanish)

PREA Mural at Sheridan Correctional Center



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The Department partners and continues to keep an open line of communication with the John Howard Association which is an independent monitor of correctional facilities and advocate for individuals in custody. Through a Memorandum of Understanding (MOU), the Illinois Department of Corrections and the John Howard Association continues to ensure individuals in custody have a mechanism to report allegations of sexual abuse or sexual harassment directly to a confidential third-party completely independent of the Illinois Department of Corrections.

Facility PREA Audits

During calendar year 2021, the Department concluded the second year of the third 3-year audit cycle of facility PREA audits, and began the third year of the cycle in accordance with PREA Standard §115.401. The Department, utilizing an independent outside contractor certified by the US Department of Justice, completed seven facility audits of correctional centers, as well as two Adult Transition Centers (community correctional centers).

The following facilities were audited during calendar year 2021:

- Hill Correctional Center
 - Jacksonville Correctional Center
 - Taylorville Correctional Center
 - Crossroads Adult Transition Center
 - North Lawndale Adult Transition Center
 - Pontiac Correctional Center*
 - Lawrence Correctional Center
 - Lincoln Correctional Center
 - Logan Correctional Center*
- * Denotes Corrective Action required by the PREA Auditor

The final reports from each completed PREA audit are published on the Department's website at <https://www2.illinois.gov/idoc/programs/Pages/PREAAuditReports.aspx>

Facility-specific Corrective Action Taken for Calendar Year 2021:

Pontiac Correctional Center

§115.33 – a review of individual in custody intake records revealed staff are not consistently having the individuals sign off on the orientation review. To show compliance with the Standard, the facility immediately implemented policy to ensure individuals are acknowledging their participation in facility orientation by signing the *Orientation Receipt*, DOC 0291, which is then maintained in the individual's master file.

§115.41 – a review of intake screenings and assessments found that, while the facility had a process in place to conduct the screenings, critical information for the assessments was found to be absent or the files were determined to be inaccurate. The facility immediately provided targeted training to staff responsible for completing the *Screening for Potential Sexual Victimization or Sexual Abuse*, DOC 0494, to ensure adequate file reviews are conducted and any information which bears an individual's risk for sexual victimization or abusiveness is considered.

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§115.81 – a review found inconsistent documentation for follow-up with mental health after reporting prior victimization or perpetration of sexual abuse during risk screening. The Department had already determined a deficiency in documentation and had already implemented a change in the risk assessment form (DOC 0494) to appropriately document the offering of a follow-up mental health contact. Additionally, targeted training was provided for staff responsible for conducting the assessment.

§115.82 – a review found no documented information regarding follow up with medical aside from the date listed on the PREA Checklist and PREA After-Action Checklist. The facility immediately instituted a corrective action which required healthcare staff to receive targeted training, to include a “Read & Sign”, requiring contact with the healthcare unit as a result of a PREA allegation to be appropriately documented in the medical file.

Logan Correctional Center

§115.13 – a review found facility administration was not approving deviations from the facility’s staffing plan using the Daily Roster Review. The Assistant Warden had not yet received the Department’s Roster Management Training, but was provided the training so reviews and approvals of deviations from the staffing plan may now be appropriately documented.

§115.18 – during the facility tour, the Auditor determined the facility needed to alleviate a blind spot in the lawn maintenance area. The facility’s maintenance staff constructed walls and a door around a toilet/sink in the area to allow for privacy and installed video monitoring equipment to monitor the room. Additionally, based on recommendations from the auditor, additional cameras will be deployed throughout the facility as part of the Department’s camera plan.

§115.31 – a review found that three staff had not received the most recent PREA training. The staff were immediately enrolled in the Department’s PREA refresher training.

§115.33 – a review found that those individuals in custody who were admitted prior to the PREA Standards taking effect, did not have initial PREA training adequately documented. Additionally, the current PREA education was found to not meet the requirements of the Standard. The facility immediately created a plan to systematically reeducate all individuals in custody using approved educational methods, provide the training in formats in which all individuals can understand, and appropriately document the education provided for each individual.

§115.35 – a review found that not all medical and mental health staff had specialized PREA training appropriately documented in their training files. The facility immediately implemented a process to ensure all medical and mental health received the specialized training and appropriately documented the training in their training files.

§115.41 – a review found that some 30-day follow up PREA risk assessments were not completed timely. The facility immediately implemented procedures to ensure all risk assessments are completed within timeframes mandated by the Standard.

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§115.67 – a review found individuals reporting allegations of sexual abuse or sexual harassment were not immediately monitored for retaliation. The facility implemented a process to ensure individuals reporting allegations are monitored for retaliation promptly.

§115.81 – a review found inconsistent documentation for follow-up with mental health after reporting prior victimization or perpetration of sexual abuse during risk screening. The Department had already determined a deficiency in documentation and had already implemented a change in the risk assessment form (DOC 0494) to appropriately document the offering of a follow-up mental health contact. Additionally, targeted training was provided for staff responsible for conducting the assessment.

§115.86 – a review found inconsistencies with sexual abuse incident reviews. All members of the Incident Review Team were provided with documented training on the requirements of the Standard regarding proper and timely completion of the reviews.

PREA ALLEGATION STATISTICS & TRENDS

DEFINITIONS:

Substantiated allegation (Sub): an allegation that was investigated and determined to have occurred.

Unsubstantiated allegation (Uns): an allegation that was investigated and the investigation produced insufficient evidence to make a final determination as to whether or not the event occurred.

Unfounded allegation (Unf): an allegation that was investigated and determined not to have occurred.

Ongoing Investigation (Ong): an investigation into an allegation that was initiated but has not yet concluded.

STATISTICAL DATA

The following tables (Tables 1-A through 4-A) were developed from data provided by each facility, based on the number of allegations, type of allegation, and outcome of the investigation; and aggregated to provide Department-wide totals. The total number of PREA allegations by year and type is shown in Chart 1-A.

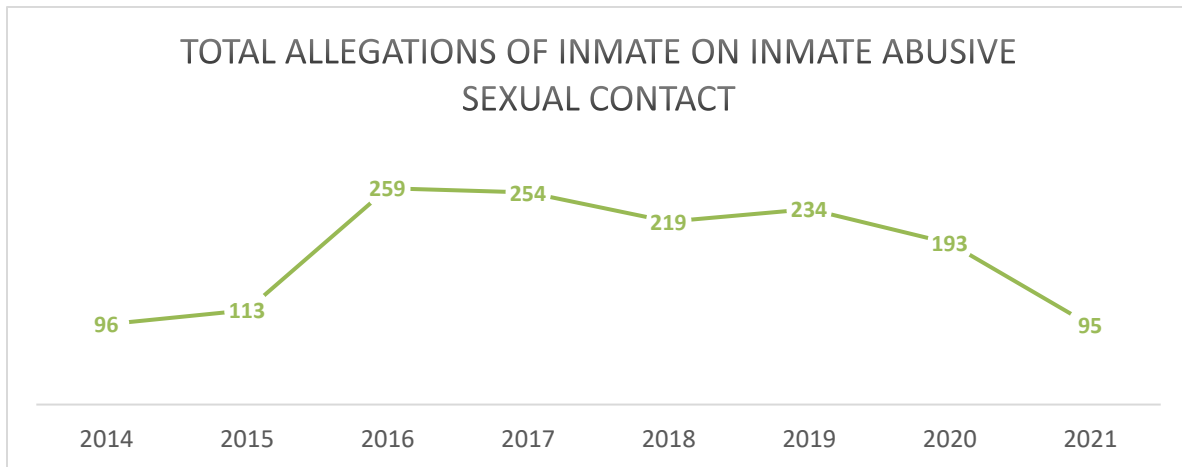
* Data for abusive sexual contact and harassment in 2015 was combined. Consequently, only the total number of cases is reported for 2015.

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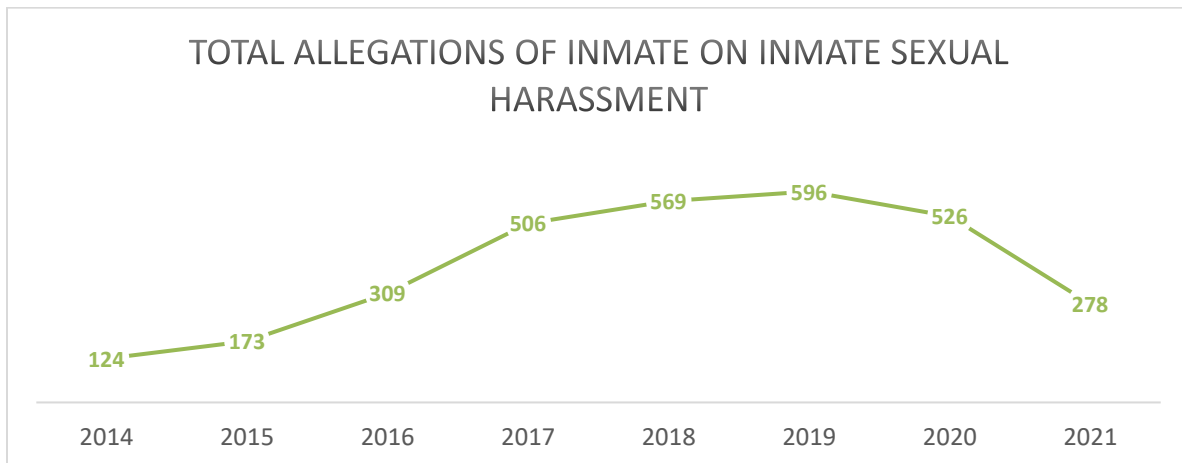
Inmate on Inmate Abusive Sexual Contact (TABLE 1-A)

	2014	2015	2016	2017	2018	2019	2020	2021
Substantiated	4	*	21	21	14	13	3	7
Unsubstantiated	56	*	158	165	163	164	153	68
Unfounded	29	*	75	57	22	43	25	6
Ongoing Investigation	7	*	5	11	20	14	12	14
TOTAL	96	113	259	254	219	234	193	95



Inmate on Inmate Sexual Harassment (TABLE 2-A)

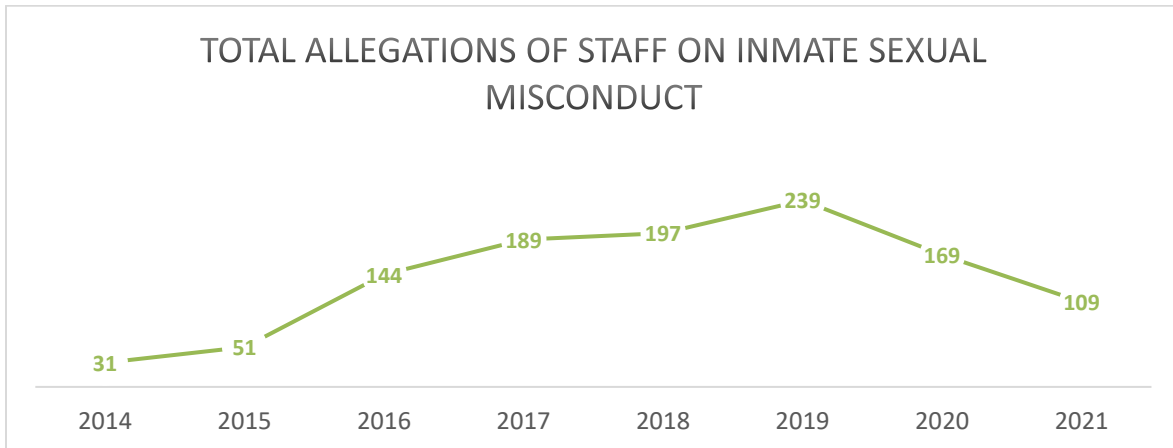
	2014	2015	2016	2017	2018	2019	2020	2021
Substantiated	6	*	35	50	75	57	28	16
Unsubstantiated	86	*	191	352	410	471	426	183
Unfounded	32	*	81	89	70	57	56	23
Ongoing Investigation	0	*	2	15	14	11	16	56
TOTAL	124	173	309	506	569	596	526	278



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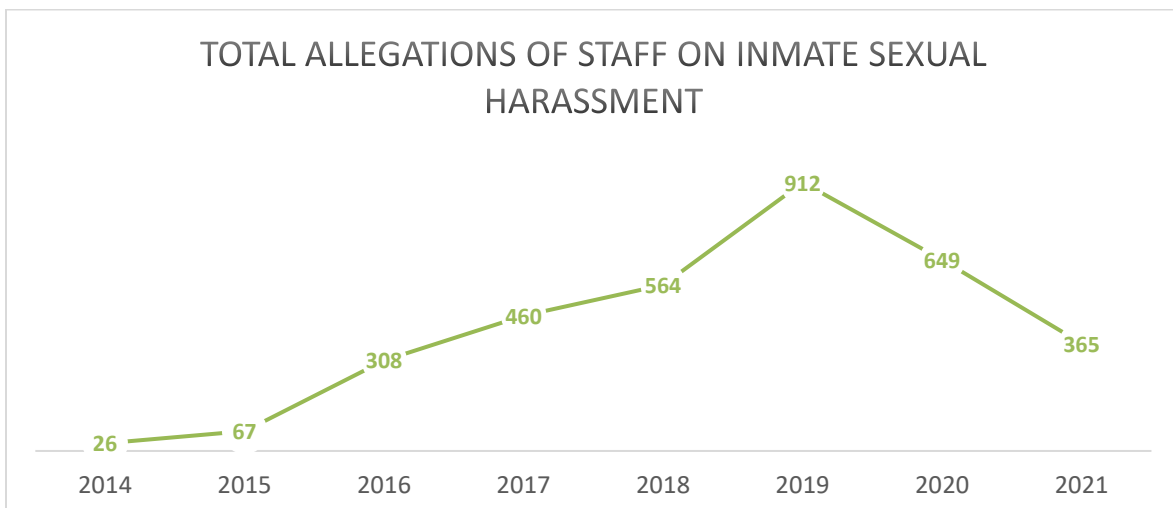
Staff on Inmate Sexual Misconduct (TABLE 3-A)

	2014	2015	2016	2017	2018	2019	2020	2021
Substantiated	5	*	3	0	2	1	1	0
Unsubstantiated	19	*	91	134	138	183	116	59
Unfounded	7	*	38	40	27	37	37	23
Ongoing Investigation	0	*	12	15	30	18	15	27
TOTAL	31	51	144	189	197	239	169	109



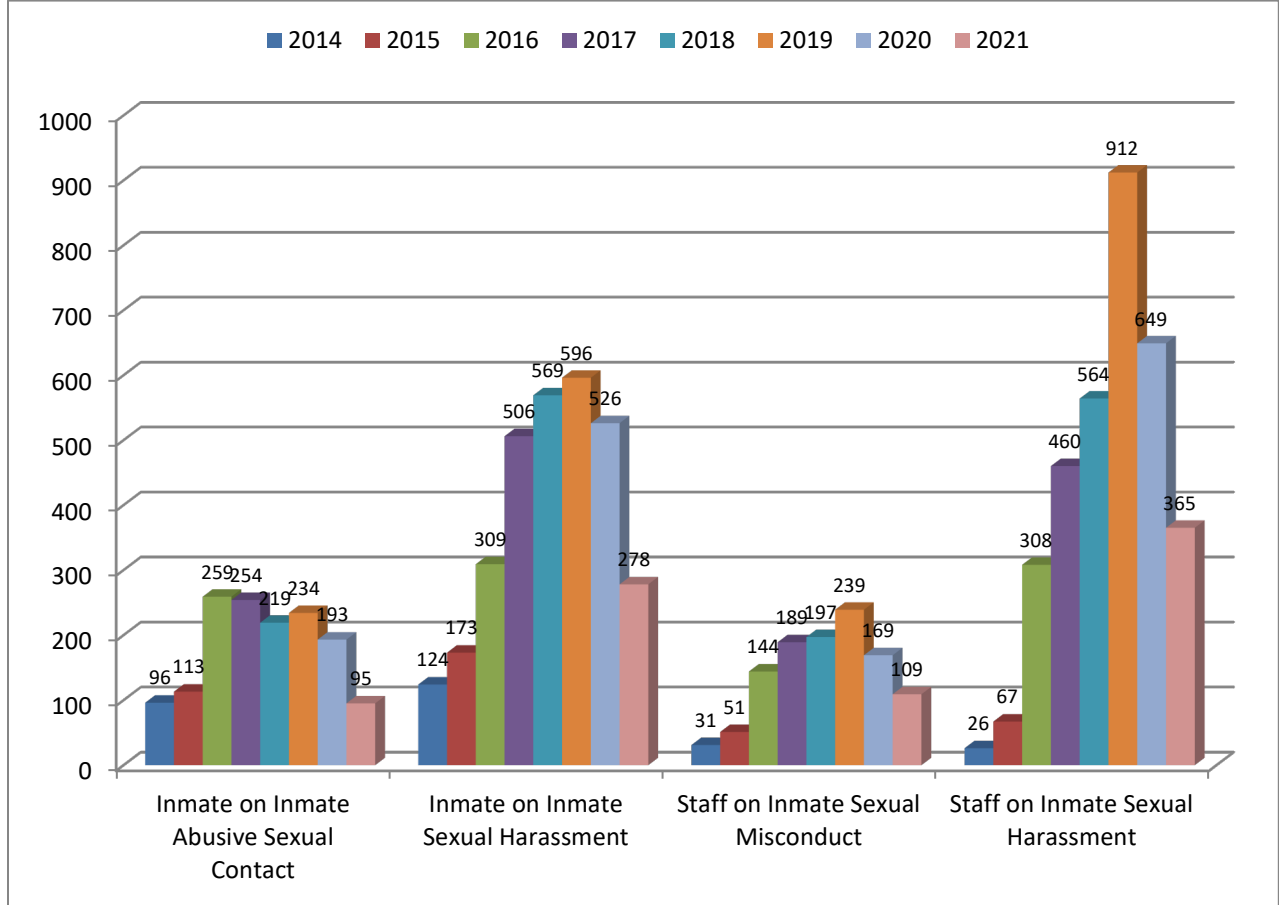
Staff on Inmate Sexual Harassment (TABLE 4-A)

	2014	2015	2016	2017	2018	2019	2020	2021
Substantiated	3	*	8	5	5	1	12	1
Unsubstantiated	21	*	180	350	447	692	497	263
Unfounded	2	*	92	67	64	86	42	21
Ongoing Investigation	0	*	28	38	48	133	98	80
TOTAL	26	67	308	460	564	912	649	365



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Total Number of all PREA Allegations by Year and Type (Chart 1-A)



Comparing the total number of allegations from 2014 to 2021, a dramatic stairstep increase in allegations early in the reporting period (2014 – 2017) is clearly shown. The increase is likely the result of the large-scale comprehensive training and emphasis placed on staff to take every allegation seriously and ensure all allegations are reported and investigated. Also, the increase is likely a byproduct of the cultural shift which occurred in facilities across the county where PREA was incorporated into incarcerated life because of the saturation of PREA-related education-initiatives targeting individuals in custody.

As mentioned above, the Department partnered with The Moss Group utilizing an IDOC-initiated request for technical assistance from the National PREA Resource Center, to provide very focused training for staff regarding properly identifying allegations of sexual abuse and sexual harassment. A review of the Department’s allegations found many of the allegations which resulted in the PREA protocol being initiated did not meet the definition of sexual abuse or sexual harassment; and were therefore inaccurately identified and erroneously reported as PREA allegations.

Mislabeling or misidentifying allegations as “PREA” which do not meet the definitions of sexual abuse or sexual harassment has significant consequences. The inaccurate reporting skews data reported nationally to clearinghouses such as the Bureau of Justice Statistics which compiles the Survey of Sexual Victimization (SSV); but more importantly, encourages a culture of not reporting true victimization for fear of the allegation not being taken seriously. Accurately classifying what allegations warrant the PREA

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protocol response ensures allegations of sexual abuse and sexual harassment are responded to promptly and ensures thorough and comprehensive investigations are completed timely.

The “*Is it PREA?*” training module was launched Departmentwide in January 2021. Through awareness and staff training and development, the Department has shown a steep decline in the number of allegations since only those reports which meet the definitions of sexual abuse or sexual harassment are being identified as PREA allegations. Those allegations previously misidentified as PREA (staff conduct, insolence, etc.) may now be appropriately investigated and responded to in a timely manner without sacrificing the resources by utilizing the PREA protocol response.

The following tables were developed from data provided by each individual facility and represent cases that were alleged to have occurred during calendar year 2021. Table 1-B represents statistical data regarding allegations made involving inmate on inmate sexual abuse and harassment. Table 2-B represents data regarding allegations made involving staff on inmate sexual misconduct and harassment.

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2021 Inmate on Inmate Abuse & Harassment by Facility (TABLE 1-B)

Facility	Abusive Sexual Contact					Sexual Harassment					Facility Total
	Sub	Uns	Unf	Ong	TOT	Sub	Uns	Unf	Ong	TOT	
Big Muddy River	0	2	0	0	2	0	5	2	0	7	9
Centralia	0	5	0	0	5	1	9	0	0	10	15
Danville	0	2	0	0	2	0	5	0	0	5	7
Decatur	0	0	0	0	0	0	4	0	0	4	4
Dixon	1	14	1	1	17	2	22	0	1	25	42
East Moline	0	3	0	1	4	1	2	0	0	3	7
Elgin Treatment Ctr.	0	2	0	0	2	0	0	0	0	0	2
Graham	0	1	0	0	1	1	2	0	0	3	4
Hill	0	7	1	0	8	1	10	1	2	14	22
Illinois River	1	3	0	0	4	1	3	0	1	5	9
Jacksonville	0	0	1	0	1	0	3	0	0	3	4
Joliet Treatment Ctr.	0	0	0	0	0	0	11	0	0	11	11
Kewanee	0	1	0	0	1	0	0	0	0	0	1
Lawrence	0	2	0	0	2	1	4	0	0	5	7
Lincoln	0	0	0	0	0	1	0	0	0	1	1
Logan	0	1	1	4	6	0	4	12	12	28	34
Menard	0	9	0	1	10	0	10	1	0	11	21
Pinckneyville	0	1	0	0	1	0	2	0	0	2	3
Pontiac	0	3	0	1	4	0	33	1	10	44	48
Robinson	2	1	0	0	3	0	1	1	0	2	5
Shawnee	0	1	1	0	2	1	0	1	0	2	4
Sheridan	0	1	0	0	1	1	1	0	0	2	3
Southwestern Illinois	0	0	0	0	0	0	0	0	0	0	0
Stateville	0	2	0	0	2	0	10	1	3	14	16
Stateville NRC	0	2	1	4	7	0	26	1	26	53	60
Taylorville	3	1	0	0	4	1	8	2	0	11	15
Vandalia	0	1	0	0	1	4	6	0	0	10	11
Vienna	0	0	0	0	0	0	1	0	0	1	1
Western Illinois	0	3	0	2	5	0	1	0	1	2	7
Crossroads ATC	0	0	0	0	0	0	0	0	0	0	0
Fox Valley ATC	0	0	0	0	0	0	0	0	0	0	0
North Lawndale ATC	0	0	0	0	0	0	0	0	0	0	0
Peoria ATC	0	0	0	0	0	0	0	0	0	0	0
TOTAL	7	68	6	14	95	16	183	23	56	278	373

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2021 Staff on Inmate Sexual Misconduct & Harassment by Facility (TABLE 2-B)

Facility	Sexual Misconduct					Sexual Harassment					Facility Total
	Sub	Uns	Unf	Ong	TOT	Sub	Uns	Unf	Ong	TOT	
Big Muddy River	0	0	0	2	2	0	4	1	0	5	7
Centralia	0	2	0	0	2	0	4	0	0	4	6
Danville	0	1	0	0	1	0	10	0	0	10	11
Decatur	0	1	1	2	4	0	1	0	0	1	5
Dixon	0	17	1	0	18	0	33	1	0	34	52
East Moline	0	4	0	0	4	0	1	0	0	1	5
Elgin Treatment Ctr.	0	0	0	6	6	0	0	0	0	0	6
Graham	0	0	0	0	0	0	1	0	0	1	1
Hill	0	3	0	0	3	0	16	4	0	20	23
Illinois River	0	1	0	0	1	0	5	0	3	8	9
Jacksonville	0	0	1	0	1	0	1	0	0	1	2
Joliet Treatment Ctr.	0	1	0	1	2	0	23	7	4	34	36
Kewanee	0	0	0	0	0	0	0	0	0	0	0
Lawrence	0	2	2	0	4	0	12	1	0	13	17
Lincoln	0	1	0	0	1	0	0	0	0	0	1
Logan	0	4	4	0	8	0	4	3	2	9	17
Menard	0	5	0	0	5	0	10	0	1	11	16
Pinckneyville	0	1	0	0	1	0	4	0	0	4	5
Pontiac	0	7	0	7	14	0	99	0	44	143	157
Robinson	0	1	0	0	1	0	0	0	0	0	1
Shawnee	0	0	0	0	0	0	2	1	0	3	3
Sheridan	0	2	0	0	2	0	1	0	0	1	3
Southwestern Illinois	0	0	0	0	0	0	0	0	0	0	0
Stateville	0	0	12	5	17	0	8	0	5	13	30
Stateville NRC	0	4	0	3	7	0	10	0	16	26	33
Taylorville	0	0	0	0	0	1	3	0	0	4	4
Vandalia	0	0	0	1	1	0	4	1	0	5	6
Vienna	0	0	2	0	2	0	1	1	0	2	4
Western Illinois	0	2	0	0	2	0	6	0	5	11	13
Crossroads ATC	0	0	0	0	0	0	0	0	0	0	0
Fox Valley ATC	0	0	0	0	0	0	0	0	0	0	0
North Lawndale ATC	0	0	0	0	0	0	0	1	0	1	1
Peoria ATC	0	0	0	0	0	0	0	0	0	0	0
TOTAL	0	59	23	27	109	1	263	21	80	365	474

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A review of the data of the individual facilities provides some specific conclusions based on the uniqueness of the population housed at the facility. Facilities housing higher security individuals: Pontiac (Maximum security), Dixon (Multi-level), Logan (Multi-level), Joliet Treatment Center (Multi-level) and Stateville (Maximum security and Reception & Classification) represent the highest number of allegations. In fact, these five facilities make up over 56% of the total allegations against other individuals in custody and almost 62% of the total allegations against staff for the Department. These types of facilities often house a population with unique management needs, and in some cases, these individuals attempt to manipulate the PREA reporting process.

Facilities demonstrating the fewest number of allegations, for all types of allegations, are typically lower security classification facilities or adult transition centers (work release). Facilities with targeted mental health populations (Joliet Treatment Center, Elgin Treatment Center [now consolidated into Joliet Inpatient Treatment Center], Pontiac, and Dixon) represent a significant number of total PREA allegations. Taking into account the small populations examined, these facilities, based on per capita calculations, account for a significant portion of the Department's total PREA allegations.

A review of specific cases demonstrates that a very small population of individuals in custody account for a substantial number of total allegations. For example, five (5) individuals at Pontiac represented over 23% of the facility's total sexual harassment allegations and accounted for over 9% of the total allegations for the entire Department. While individuals in custody abusing the PREA process through repeated unfounded reports made in "*bad faith*" may be culpable, the Department recognizes that certain individuals may be targeted for abuse; and therefore, the Department investigates all allegations regardless of the individual's record or previous history of reporting allegations.

The number of ongoing investigations continues to raise concern. While the number of ongoing investigations is higher than desired, the number of outstanding investigations is trending downward due to the addition of additional staff who have received the specialized training to perform investigations of sexual abuse and sexual harassment. The Department continues to require quarterly reporting to ensure an accurate account of all investigations is maintained. As the data presents, some facilities have significantly higher numbers of allegations to investigate, therefore potentially creating a backlog of cases to conclude. Allegations against staff often require the facility to refer the case to external investigators which characteristically increases the time to conclude a case. Emphasis will continue to be placed on ensuring allegations are promptly and thoroughly investigated to ensure cases are concluded timely, but without sacrificing the integrity of the investigation.

CONCLUSION

During calendar year 2022, the Department will continue its compliance with PREA. Beginning in the Fall of 2022, utilizing independent contracted PREA auditors certified by the Department of Justice, the Department will be auditing eleven facilities to begin the first year of the fourth 3-year audit cycle. The audits provide an independent evaluation of the policies and procedures that the Department has implemented and provides for an opportunity to identify areas for further improvement at the individual facilities, as well as on a Department-wide scale.

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The Department will continue to make upgrades to the technology it utilizes in our correctional facilities to deter and investigate sexual abuse. This will be done through our IDOC State-wide Security Camera contract; and utilizing PREA grant funding, when available. Staffing plans will also be consistently reviewed to ensure the most efficient allocation of staff to reduce the likelihood or opportunity for sexual abuse to be committed in our facilities.

Additionally, training and policy will continue to be reviewed and updated as necessary to provide the most up to date knowledge and best practices to the employees of the Illinois Department of Corrections. Annual training will continue to be provided to all employees, volunteers and contractors who have contact with individuals in custody to ensure staff is prepared to respond to an allegation of sexual abuse as well as preventing incidents of sexual abuse. The Department will also continue to explore all avenues of external resources and technical assistance provided by and in consultation with the Department of Justice's National PREA Resource Center and PREA Management Office.

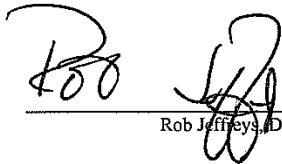
The Illinois Department of Corrections will continue to take all allegations of sexual abuse and harassment seriously throughout our agency. Our Department's commitment to maintaining a "**Zero Tolerance**" approach to sexual abuse and sexual harassment will continue to be demonstrated through our full compliance of the Prison Rape Elimination Act.

Prepared by:



Ryan Nottingham, Agency PREA Coordinator

APPROVED:



Rob Jeffrey, Director