

PREA AUDIT REPORT Interim Final
ADULT PRISONS & JAILS

Date of report: 3/26/17

Auditor Information			
Auditor name: Cynthia Malm			
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Email: cmalm@idahosherriffs.org			
Telephone number: 208-346-1065			
Date of facility visit: September 19 – 21, 2016			
Facility Information			
Facility name: Dale G. Haile Detention Center			
Facility physical address: 219 N. 12 th Avenue, Caldwell, Idaho 83605			
Facility mailing address: <i>(if different from above)</i> 1115 Albany Street, Caldwell, Idaho 83605			
Facility telephone number: 208-454-7540			
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: Capt. Daren Ward			
Number of staff assigned to the facility in the last 12 months: 143			
Designed facility capacity: 437			
Current population of facility: 374			
Facility security levels/inmate custody levels: Min/Med/Max/ High Medium			
Age range of the population: 18-76			
Name of PREA Compliance Manager: Erick Cobiskey		Title: Corporal	
Email address: ecobiskey@canyonco.org		Telephone number: 208-941-6537	
Agency Information			
Name of agency: Canyon County Sheriff's Office			
Governing authority or parent agency: <i>(if applicable)</i> Canyon County			
Physical address: 219 N. 12 th Avenue, Caldwell, Idaho 83605			
Mailing address: <i>(if different from above)</i> 1115 Albany Street, Caldwell, Idaho 83605			
Telephone number: 208-454-7540			
Agency Chief Executive Officer			
Name: Kieran Donahue		Title: Sheriff	
Email address: sheriffsoffice@canyonco.org		Telephone number: 208-454-7510	
Agency-Wide PREA Coordinator			
Name: Andrew Kiehl		Title: Lieutenant	
Email address: akiehl@canyonco.org		Telephone number: 208-454-4849	

AUDIT FINDINGS

NARRATIVE

The Prison Rape Elimination Act (IPREA) on-site audit of the Canyon County Jail in Caldwell, Idaho was conducted on September 19 - 21, 2016 by Cynthia Malm from Pocatello, Idaho, a U.S. Department of Justice Certified PREA auditor for adult facilities. Pre-audit preparation included a thorough review of all documentation and materials submitted by the facility on a flash drive along with the data included in the completed IPREA Pre-Audit Questionnaire. The auditor reviewed documentation that included agency policies and procedures, detention policies and procedures, forms, education materials, training curriculum, organizational charts, mission statements, posters, inmate handbooks, flyers, website information, and other IPREA related materials that were provided to demonstrate compliance with the IPREA standards. This review prompted a series of questions that were noted on the auditor's compliance tool and the auditor posed the questions to Lt. Andrew Kiehl, IPREA Coordinator and Cpl. Erick Cobiskey, IPREA Compliance Manager at the on-site audit.

An entrance meeting was held with Capt. Daren Ward, Jail Administrator, Lt. Eric Miller, Lt. Andrew Kiehl, IPREA Coordinator and Cpl. Erick Cobiskey, IPREA Compliance Manager at 8:30 a.m. on September 19. Lt. Kiehl and Cpl. Cobiskey provided the auditor a list of all of the staff of the facility and their schedules, including specialized staff, and a list of all of the inmates in the facility and where they were housed. The auditor explained the process of the audit and answered any questions the agency had about the audit process.

During the three days of the on-site audit, the auditor was provided a private room in the facility from which to work and conduct confidential interviews of staff. The auditor was also provided a private interview room, within the security perimeter of the jail, to conduct confidential interviews with inmates. Formal personal interviews were conducted with facility staff, inmates, and contract employees. The auditor interviewed a total of eighteen inmates who were randomly selected from each of the sixteen housing units in the jail. There were no youthful, transgender, intersex, or non-English speaking inmates incarcerated in the facility to interview. There was one inmate in segregated housing who had been a victim of sexual abuse, one inmate who reported a sexual abuse, and one inmate who had disclosed sexual victimization during the risk screening for the auditor to review. There was also one disabled inmate for the auditor to interview. Inmates were interviewed using the recommended DOJ protocols that question their knowledge of a variety of IPREA protections, generally and specifically, their knowledge of reporting mechanisms available to inmates to report abuse or harassment. All of the inmates interviewed acknowledged that they had received audio training on IPREA at booking explaining their right to be free from sexual abuse and sexual harassment, their right to be free from retaliation for reporting a sexual abuse or sexual harassment, and how to report a sexual abuse or sexual harassment. All inmates received an inmate handbook and flyer that contained information on how to report a sexual assault or sexual harassment and a paper with common questions and answers about IPREA. The inmates all stated that they are played an audio recording twice a day and they are required to sit and listen to it.

The auditor interviewed twelve staff members representing two shifts (1st shift 6:00 a.m. to 6:00 p.m. and 2nd shift 6:00 p.m. to 6:00 a.m.). The auditor also interviewed nine specialty staff, including shift sergeants, classification, Human Resources, medical and mental health, contract staff, investigative staff, intake and screening staff, first responders, and staff who supervise inmates in segregated housing. Also interviewed were Marv Dashiell, Chief Deputy, Capt. Daren Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, and Cpl. Erick Cobiskey, IPREA Compliance Manager. Staff were interviewed using the DOJ protocols that question their IPREA training and overall knowledge of the agency's zero tolerance policy, reporting mechanisms available to inmates and staff, the response protocols when an inmate alleges sexual abuse or sexual harassment, and first responder duties. There are no SAFE or SANE employees at the facility as they are made available at the West Valley Medical Center or St. Lukes Medical Center in Caldwell, Idaho. All staff were very knowledgeable about IPREA and their responsibilities in preventing, detecting, and reporting sexual abuse and sexual harassment. All confirmed that they have extensive yearly training on those responsibilities. The auditor reviewed random staff training records, rosters for attendance at IPREA training and the curriculum taught at the training to determine compliance with training mandates. The auditor also reviewed background check procedures for hiring and the list of detention staff who have had background checks a minimum of every five years after hire. Case files for six inmates in the facility were reviewed in the file room to evaluate screening and intake procedures, inmate education, and inmate signatures of acknowledgement. Classification records of inmate education, risk assessments, and housing decisions were also reviewed.

Following the entrance meeting, the auditor toured the facility from 9:00 - 12:00 a.m. and was escorted by Cpl Erick Cobiskey, IPREA Compliance Manager and Capt. Daren Ward, Jail Administrator. During the tour, the auditor reviewed the booking process, observed the facility configuration, camera and mirror placement throughout the facility, blind spots, staff placement for supervision of inmates, toilet and shower areas, notices posted throughout the building and documentation to assist in determining compliance with the standards. The auditor noted that some shower areas allow inmates to shower separately and others have more than one shower. Shower stalls have either shower curtains or partial privacy partitions, or both for privacy that cover the lower body. Pod 4 is supervised by male only staff because there is a view of the toilets and showers from the officer's station. The auditor received a letter from one of the male inmates prior to the audit that expressed a concern in Pod 5 and Pod G. The letter stated that the cameras point directly into the shower areas to view inmates in full nudity and expressed that it was a privacy concern and there is cross gender supervision in the pods. The inmate had been released by the start of the on-site audit but the auditor observed Pod 5 and Pod G to ascertain if there was a problem. The cameras in Pod G are pointing toward the showers but there are high barriers that cover the lower portion of the body from the chest on down. When inmates walked back into the shower area, the lower body could not be seen. The auditor then reviewed the camera views in Control and verified that there is no view of the lower part of the body on camera. In Pod 5 a camera does face into the bathroom but the camera view is not

monitored by anyone. It is only a tool that is used to review camera footage if an assault or problem happens in the shower. The auditor reviewed the other camera views in Control and verified that toilets and showers were not monitored by the cameras in any of the pods. Notices of the IPREA audit were posted throughout the facility in the dayrooms. During the tour, the auditor was given privacy to talk informally to staff and inmates in the booking room, housing units, program areas, and work areas. The auditor interviewed several staff members working their posts to ask questions about their positions, procedures in their areas, and how their areas contributed to protection from sexual abuse and sexual harassment.

Cpl. Cobiskey explained that the agency has upgraded thirty one cameras from December 17, 2015 to August 5, 2016 to high definition for better surveillance, safety and security.

After the facility tour, the auditor reviewed questions noted on the auditor's compliance tool with Cpl. Cobiskey and reviewed additional documentation to verify compliance with the standards.

At the conclusion of the on-site visit, an exit meeting was held between the auditor, Capt. Ward, Lt. Miller and Cpl Cobiskey to discuss the audit findings and possible corrective actions that could be taken by the facility to achieve compliance with the standards that were not met.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Canyon County Sheriff's Office operates the Dale G. Haile Detention Center which is an indirect supervision detention facility with a rated capacity of 281 inmates in the main facility, 34 in the jail annex, 40 in the Work Center, and 122 in Pod 5. Total capacity of all the areas is 477. Six housing units are single cell indirect supervision housing units and nine housing units are indirect supervision dormitory style housing units. The count on the day of the audit was 396. Female inmates are housed in four of the indirect supervision housing units with one of these units being single cell disciplinary with one cell holding two bunks, administrative segregation, and maximum security classifications. Special Management inmates and medical watch inmates, both male and female are housed in the booking area which is indirect supervision. Cells in the booking area have either single bunks in them or double bunks. The booking area is equipped with a bench area for new arrivals, television, close supervision shower areas, a kiosk, telephones and electronic tablets.

Male inmates are housed in eleven of the indirect supervision housing units.

Classification levels are as follows:

Pod 1: (Male)

Unit A (Maximum), Unit B (Medium), Unit C (Medium), Unit D (Disciplinary)

Pod 2: (Male)

Unit E (Pre-trial unclassified), Unit F (Medium), Unit G (Minimum)

Pod 3: (Female)

Unit H (Minimum/Medium), Unit J (Disciplinary, Administrative Segregation, Maximum), Unit K (Minimum Inmate Worker), Unit L (Minimum/Medium)

Pod 4: (Male)

Unit M (Protective Custody), Unit N (Work Release)

Pod 5: (Male)

Minimum

Annex 3: (Male)

(Minimum Inmate Worker)

Annex 2: (Either Male or Female)

Disciplinary, Administrative Segregation, Minimum/Medium

Booking: (Either Male or Female)

Special Management

The Dale G. Haile Detention Center consists of two buildings and one tent structure. Two of the buildings (Annex and Detention Center) are connected and combined at 219 North 12th Avenue, Caldwell, Idaho; and one tent structure at 1214 Chicago Street, Caldwell, Idaho. The two buildings and tent structure all have the same administration and detention staff. The two buildings house both male and female inmates and the tent structure houses only male inmates.

New arrests are brought into the Detention Center via a secure sally port. The arrestee is pat searched in a small intake area and then brought into the booking area for processing.

Just outside the Booking Room to the north east is the Central Control Room which is the primary communication center in the facility. There is a vestibule that runs parallel to the Center Control Room that leads to the main jail lobby. On the north east corner of Booking is the Medical Office, Infirmary, and Medical Exam Room. To the west of Booking is the Kitchen area and Officer Dining Room. The laundry area is the first floor of the Annex.

Pod 5, which is located at 1214 Chicago Street, Caldwell, Idaho is an indirect supervision housing unit which houses 122 inmates of minimum custody levels. This housing unit is a dormitory style living area equipped with a day room, double bunks, howers, television, telephones, electronic tablets, and kiosks.

Pod 4, which is north east to the Kitchen area is an indirect supervision housing unit which houses 35 inmates in the protected custody unit (Unit M), and 40 inmates in the work release unit (Unit N). Both of these housing units are dormitory style living areas. Each housing unit is equipped with a day room, double bunks, showers, television, telephones, electronic tablets, and kiosks.

On the second floor of the main building, accessed by a stairwell and elevator from the Booking area, is Pod 1, Pod 2, Pod 3, and the main

access hallway to the Annex.

Pod 1, which is directly above the Kitchen area is an indirect supervision housing unit which houses 12 inmates in Maximum security (Unit A), 22 inmates in Medium security (Unit B), 22 inmates in Medium security (Unit C), and 10 inmates in Disciplinary (Unit D). This unit is managed by 2 deputies who can see into the housing units from the deputy station. Each unit is single cell, with the exception of 2 cells in Unit A which are double bunks, 2 cells in Unit B which are double bunks, 2 cells in Unit C which are double bunks. Each housing unit is equipped with a dayroom area, showers, telephone, kiosks, and television.

Directly above the Booking area is Pod 2, which is an indirect supervision housing unit, which houses 16 inmates awaiting pre-trial (Unit E), 36 inmates in Medium security (Unit F), and 66 inmates in Minimum security (Unit G). This unit is managed by 2 deputies who can see into the housing units from the deputy station. Each unit is a dormitory style living unit with double bunks. Each housing unit is equipped with a dayroom area, showers, telephone, kiosks, electronic tablets, and televisions.

Directly above the Administrative Offices is Pod 3, which is an indirect supervision housing unit, which houses 15 inmates in Minimum/Medium security (Unit H), 5 inmates in Administrative Segregation/Disciplinary/Maximum security, 16 inmates in Minimum inmate worker security (Unit K), and 26 inmates in Minimum/Medium security (Unit L). This unit is managed by one deputy who can see into the housing units from the deputy station. Unit H, is dormitory style on the upper tier with double bunks and single opened cells on the lower tier. Unit J, is a single cell unit with cell 1 being a double bunk cell. Unit K, is a dormitory style living unit with double bunks and is equipped with a microwave. Unit L, is a dormitory style living unit with double bunks. Each unit is equipped with showers, a television, electronic tablets, a kiosk, and telephones.

The Annex, which is accessed through the hallway attached by doors 20 and 21 next to Pod 3, is an indirect supervision housing unit, which houses 20 inmates in Minimum inmate worker security. This unit is managed by one deputy who cannot see directly into the housing unit from the deputy station, but is in close proximity to hearing distance. Each cell is equipped with double bunks and a table. This unit has showers inside the cells. The hallway is equipped with telephones. The day room area is equipped with a telephone, a kiosk, electronic tablets, a television, and a microwave.

Directly below Annex 3 is Annex 2, which is currently not open and has the potential of housing 14 inmates. Currently there is no deputy assigned to Annex 2.

The building is monitored and operated by a Central Control Room that employs screen monitoring of cameras throughout the facility, fire alarm and water suppression system monitoring, and intercoms throughout the facility as well as the call box for new arrivals. All cameras are strategically placed and monitor all entrances into the building and the recreation areas. Internal cameras monitor the main hallways, internal entrances, kitchen, laundry area, Pod 4 Unit M and Unit N, the Annex areas, and other areas within the secure perimeter. The Central Control Room is equipped with a door control screen to monitor and control movement throughout the facility. The Control Room is staffed at all times by one staff member and is the main contact for all safety, fire, and emergency contacts. There is a small control area within each direct/indirect supervision housing unit consisting of screen monitoring of strategically placed cameras, an intercom system, and a PA system. The smaller control areas operate doors and intercoms to the individual cells or housing units within their individual areas. Jail Administrative Offices are outside the secure perimeter of the jail in the Sheriff's Offices. However, there is a double sally port access door immediately by the offices to allow for fast response to the jail. The Jail Administrator, two Lieutenants, Classification, the Mail Room, the Administrative Technician Supervisor, Compliance and Training, Sild, Alternative Sentencing, and Courts and Transports occupy these offices.

SUMMARY OF AUDIT FINDINGS

During the past twelve months, the Dale G. Haile Detention Center reported there were thirty six allegations of IPREA complaints received:

- (1) Three reports of possible staff-on-inmate sexual harassment were referred for administrative investigation and were unsubstantiated;
- (2) Nine reports of possible inmate-on-inmate sexual harassment were referred for administrative investigation and were unfounded;
- (3) Two reports of possible inmate-on-inmate abuse were referred for criminal investigation and were substantiated;
- (4) Ten reports of possible inmate-on-inmate abuse were referred for administrative investigation and were substantiated;
- (5) Two reports of possible inmate-on-inmate sexual harassment were referred for administrative investigation and were unsubstantiated;
- (6) Ten reports of possible inmate-on-inmate sexual harassment were referred for administrative investigation and were unfounded.

All administrative investigations are done within the jail by Lt. Kiehl and detention sergeants . Most criminal reports involving inmate-on-inmate sexual abuse are referred to the Canyon County Detective Division for further investigation. Criminal investigations that allegedly involve staff-on-inmate are referred to the Prosecuting Attorney's Investigators or to an outside law enforcement agency.

Interviews with inmates reflected that they received training on IPREA during booking and were given a Prisoner Information Sheet that contained information on the inmate's right to be free from sexual abuse and sexual harassment and how to report a sexual assault or sexual harassment. All stated that information is posted on the wall of the housing unit, in the handbook, and on the phones. All stated that an audio tape is played over the intercom twice a day in the housing units and the inmates must sit and listen to the tape. All knew they could access a hotline number on the phone. Most of the inmates were able to explain to the auditor all the ways to report a sexual abuse or sexual harassment, including some outside sources. They were also aware that they could report verbally, in writing, anonymously, and through a third party.

All facility staff interviewed indicated they had received detailed IPREA training and could articulate the meaning of the agency's zero tolerance policy and what they were doing to achieve it. Staff was knowledgeable about their roles and responsibilities in the prevention, reporting, and response to sexual abuse and sexual harassment. Staff were able to explain the variety of reporting mechanisms for inmates and staff to use to report sexual abuse and sexual harassment. Staff were also aware of their responsibilities as a first responder to any IPREA incident and explained that they have a detailed checklist to follow to keep them on track during and after an incident.

In summary, after reviewing all pertinent information and after conducting inmate and staff interviews, the auditor found that the IPREA Coordinator, IPREA Compliance Manager and agency leadership have clearly made IPREA compliance a high priority and have devoted a significant amount of time and resources over the last few years to policy development, training of staff, and education of inmates on all aspects of IPREA. When confronted with the areas that do not meet standards, the IPREA Coordinator, IPREA Compliance Manager and agency leadership began working immediately to implement any corrective action plans that were agreed upon between the agency and the auditor. These immediate actions reinforced the agency's commitment to ensuring the safety of inmates and staff in the Dale G. Hail Detention Center

OVERALL COMPLIANCE AS REFLECTED IN INTERIM COMPLIANCE REPORT:

Number of standards exceeded: 7

Number of standards met: 32

Number of standards not met: 0

Number of standards not applicable: 2

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 Dale G. Haile Detention Center has implemented a zero tolerance policy as detailed in the IPREA SOP. The policy contains necessary definitions and descriptions of the agency strategies and responses to sexual abuse and harassment. This policy forms the foundation for the program's training efforts with inmates, staff, volunteers, contractors, and others. All interviews reflected that staff and inmates are aware of this zero tolerance policy. However, the policy does not comprehensively outline the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

The policy does not detail what sanctions are imposed for those found to have participated in prohibited behaviors of both sexual abuse and sexual harassment of inmates. Therefore, the facility does not meet this part of the standard

115.11(b) The facility has designated an upper-level, agency-wide IPREA Coordinator, Lt. Andrew Kiehl, to oversee policy and procedure development and operations in reference to sexual abuse and sexual harassment. The IPREA Coordinator reports directly to the Security Services Captain Daren Ward, who, in turn, reports directly to the Canyon County Chief Deputy, Marv Dashiell. Lt. Kiehl indicated that he has sufficient time and authority to develop, implement, and oversee the agency's efforts toward IPREA compliance and Chief Deputy Dashiell confirmed that Capt. Ward and Lt. Kiehl have full support of the Sheriff's Office in all of their efforts to bring the Detention Center into compliance with the IPREA standards.

115.11(c) The Canyon County Sheriff's Office operates only one facility but has assigned an IPREA Compliance Manager, Cpl. Erick Cobiskey, to the facility to assist the IPREA Coordinator in IPREA related duties. The IPREA Compliance Manager reports directly to the IPREA Coordinator and indicated that he has sufficient time and authority to develop, implement, and oversee the agency's efforts toward IPREA compliance.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center PREA Policy #1, #2, and #3
Dale G. Haile Detention Center's Organizational Chart
Interview with Capt. Daren Ward, Jail Administrator
Interview with Chief Deputy Marv Dashiell
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl Erick Cobiskey

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center policy should be revised to include a comprehensive outline of the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment.
2. The Dale G. Haile Detention Center policy should be revised to include a list of the sanctions that can be imposed for those employed in the facility who are found to have participated in prohibited behaviors of sexual abuse and sexual harassment.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to include a comprehensive outline of the agency's approach to preventing, detecting, and responding to all forms of sexual abuse and sexual harassment.
2. The IPREA policy has been revised and includes a list of the sanctions that can be imposed for those employed in the facility who are found to have participated in prohibited behaviors of sexual abuse and sexual harassment.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, PREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard.

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.

115.12(a-b) The Dale G. Haile Detention Center does not contract with external facilities to house or confine any of its inmates and there haven't been any contracts of this type during the twelve months prior to the IPREA audit. This part of the standard is, therefore, not applicable to the Dale G. Haile Detention Center..

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Erick Cobiskey, IPREA Compliance Manager

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.

115.12(c) The Dale G. Haile Detention Center ensures that the facility develops, documents, and makes its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The average number of inmates incarcerated in the Dale G. Haile Detention Center during the twelve months prior to the audit was 812 and the staffing plan was predicated on 812 inmates. The staffing plan requires a minimum of fourteen detention staff on each shift which includes supervisory staff. In calculating adequate staffing levels and determining the need for video monitoring, the facility takes into consideration the eleven mandatory elements and considerations required by this PREA Standard:

- (1) Generally accepted detention and correctional practices;
- (2) Any judicial findings of inadequacy;
- (3) Any findings of inadequacy from Federal investigative agencies;
- (4) Any findings of inadequacy from internal or external oversight bodies;
- (5) All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated);
- (6) The composition of the inmate population;
- (7) The number and placement of supervisory staff;
- (8) Institution programs occurring on a particular shift;
- (9) Any applicable State or local laws, regulations, or standards;
- (10) The prevalence of substantiated and unsubstantiated incidents of sexual abuse; and
- (11) Any other relevant factors.

An interview with Capt. Daren Ward confirmed there were no deviations from the staffing plan over the 12 months prior to the audit and the facility has in place procedures to ensure all positions are covered with overtime personnel, when possible, to avoid deviations from the staffing plan. Capt. Ward stated that Sheriff Kieran Donahue has mandated that the facility cannot fall below the minimum staffing even if they have to call in patrol officers to cover shifts.

115.12(d) The staffing plan is reviewed once a year by detention administration in consultation with the IPREA Coordinator and the IPREA Compliance Manager to determine if it is still adequate to meet the needs of the Dale G. Haile Detention Center and protect inmates from sexual abuse. The staffing plan also considers any improvements needed to monitoring technology. Lt. Andrew Kiehl reported that the facility has upgraded the cameras to high definition over the last twelve months to make the view clearer and more defined in an effort to increase safety. The current staffing plan of the Dale G. Haile Detention Center requires a total of seventy eight staff members which the Canyon County Sheriff's Office has provided to the facility.

115.12(e) The Dale G. Haile Detention Center has detailed in the IPREA Policy the practice of having intermediate-level or higher level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment. A review of the documentation of unannounced supervisor rounds confirmed that the rounds are done randomly on all shifts. This was also verified through informal interviews with staff at their posts during the audit tour and through formal interviews with random staff and supervisors. Interviews also confirmed that the rounds are unannounced and staff are prohibited from alerting other staff that the rounds are taking place.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center PREA Policy, #5 and #6
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Idaho Jail Standards
Dale G. Haile Detention Center Jail Staffing Plan Form
Camera placement list
Documentation evidencing the conduct of unannounced supervisor rounds on every shift
Informal interviews with staff during the audit tour
Formal interviews with random staff and intermediate or higher level staff
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Dale G. Haile Detention Center population report for 2015 and 2016

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.

115.14(a) The Dale G. Haile Detention Center has detailed in PREA Policy #7 how a youthful inmate would be housed in the facility. Youthful inmates are housed in the Dale G. Haile Detention Center. The Dale G. Haile Detention Center has the policies in place for the rare occasion that they may be required to house a youthful inmate. If a youthful inmate is placed in the Dale G. Haile Detention Center, the Center will not place the inmate in a housing unit in which the youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters.

115.14(b) Referring to the PREA Policy #17, the Dale G. Haile Detention Center will either maintain sight and sound separation between youthful inmates and adult inmates in areas outside of housing units or will provide direct supervision when youthful inmates and adult inmates have sight, sound, or physical contact.

115.14(c) The Dale G. Haile Detention Center reports that it will make its best efforts to avoid placing a youthful inmate in segregation to comply with this standard. Absent exigent circumstances, the facility does not deny youthful inmates daily large-muscle exercise or any legally required special education services while in the facility. The policy states that youthful inmates are given access to other programs and work opportunities to the extent possible. There was no documentation to review as the Dale G. Haile Detention Center has not housed any youthful inmates in the 12 months prior to the audit.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center, PREA Policy #7
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Interviews with random staff
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Dale G. Haile Detention Center Population Report for 2015 and 2016

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.

115.15(a) The Dale G. Haile Detention Center's IPREA Policy #8 details that cross gender strip searches are prohibited unless an emergency exists. Only medical practitioners can perform intrusive or invasive body cavity searches under all circumstances. There were no cross gender strip searches done in the 12 months prior to the audit for the auditor to review.

115.15(b) The Dale G. Haile Detention Center's IPREA Policy #8 states that cross gender pat down searches are prohibited except in emergency situations. The facility reports that, during the last twelve months, no cross gender pat down searches have been conducted by male staff. Interviews with female inmates confirmed that female deputies conduct all pat down searches of female inmates and the facility does not restrict female inmate's programming or other out-of-cell activities when a female deputy is not available to conduct a pat down

search.

Even though interviews with female inmates confirmed that the facility does not restrict female inmate's programming or other out-of-cell activities when a female deputy is not available to conduct a pat down search, this part of the standard is not in the policy.

115.15(c) The Dale G. Haile Detention Center requires that all cross gender strip searches of male and female inmates and all cross gender pat down searches female inmates must be documented.

115.15(d) The Dale G. Haile Detention Center ensures that inmates are able to shower, perform bodily functions, and change clothing with privacy. Policy and practice do not require announcement when staff of the opposite gender enter the housing unit and the shower/toilet areas. Instead, there is a single announcement at the beginning of each shift that there will be both females and males entering the housing unit throughout the shift. Interviews with inmates and staff confirm this is policy and actual practice of the policy on a consistent basis. Therefore, the auditor finds that the facility does not meet this part of the standard.

The policy does not list what exigent circumstances would be required for staff of the opposite gender to deviate from this policy.

115.15(e) The Dale G. Haile Detention Center policy and practice prohibits searching or physically examining a transgender or intersex inmate for the sole purpose of determining the inmate's genital status. Interviews with staff confirmed they knew the policy and no searches of this type have been done.

115.15(f) The Dale G. Haile Detention Center has provided training to 100% of the staff regarding how to conduct cross gender pat down searches and searches of transgender and intersex inmates in a professional manner. The facility provided a copy of the detailed power point presentation that is provided to all staff.

There were no transgender or intersex inmates in the facility at the time of the audit.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center PREA Policy, #8
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey
Interviews with random inmates and staff
IPREA training curriculum
Search Procedures training curriculum
Training rosters of staff

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to the PREA Policy that the facility does not restrict female inmate's access to programs or other out-of-cell activities when a female deputy is not available to conduct searches.
2. The Dale G. Haile Detention Center should add to the PREA Policy that documentation should include the exigent circumstances that required the cross gender strip search of male or female inmates or cross gender pat down searches of female inmates.
3. The Dale G. Haile Detention Center should add to the PREA Policy what exigent circumstances would require deviation from the policy of staff viewing cross gender inmates showering, performing bodily functions, or changing clothes.
4. The Dale G. Haile Detention Center should add to the PREA Policy that a cross gender announcement will be made each time a staff member enters the housing unit of the opposite gender of the staff member.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to include the requirement that the facility does not restrict female inmate's access to

- programs or other out-of-cell activities when a female deputy is not available to conduct searches.
2. The IPREA policy has been revised to require documentation includes the exigent circumstances that required the cross gender strip search of male or female inmates or cross gender pat down searches of female inmates.
 3. The IPREA policy has been revised to include what exigent circumstances would require deviation from the policy of staff viewing inmates of the opposite gender showering, performing bodily functions, or changing clothes.
 4. The IPREA policy has been revised to require staff make a cross gender announcement whenever the gender of the deputy entering a housing unit changes from the staff member assigned to the unit. Staff are assigned to one area during their shift so the gender will only change for breaks or assistance.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

Interviews with random staff confirmed they are making announcements when entering a housing unit of inmates opposite their gender.

The auditor observed random staff making cross gender announcements throughout the facility.

The Dale G. Haile Detention Center is now fully compliant with this standard

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.

115.16(a) The Dale G. Haile Detention Center’s IPREA Policy #9 and Canyon County Sheriff’s Office Policy 368 ensures that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The steps include, when necessary to ensure effective communication with inmates who are deaf or hard of hearing, giving them the information to read and, if they can’t read, providing access to interpreters from the court who can interpret effectively, accurately, and impartially. TTY machines are also available to the deaf for communication and the auditor reviewed the policies and procedures explaining the use of the machines. At the time of the audit, the auditor was able to interview an inmate who was deaf. The auditor tested the facility’s method for communicating with the inmate by writing questions on paper to the inmate and the inmate was able to answer comprehensively by writing an answer back. A staff member will read the information on reporting and responding to sexual abuse or sexual harassment to inmates who have low vision or are blind. The Dale G. Haile Detention Center will locate someone who can effectively communicate with inmates with psychiatric, intellectual or speech disabilities either from the agency itself or a Mental Health practitioner. All staff receive yearly training on IPREA compliant practices for inmates with disabilities and inmates with limited English proficiency. The auditor finds that the Dale G. Haile Detention Center exceeds this part of the standard because of the availability of many resources to provide equal opportunity for inmates with disabilities to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

The Dale G. Haile Detention Center has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment. Flyers explaining the inmate’s right to be free from sexual abuse and sexual harassment are available in a Spanish version. Posters are hung on the wall of the housing unit that explain how to report a sexual abuse or sexual harassment. Inmate Orientation Handbooks are available in Spanish editions. An audio recording in Spanish explaining IPREA is used for inmate education. The agency also has an agreement with a Language Line that provides immediate translation services via the telephone. All detention staff have access to the Language Line when needed. Deputies also can use internet resources for interpretation. Also, several of the deputies of the Canyon County Sheriff’s Office and Detention Division speak fluent Spanish and are able to interpret for the Detention Center, when needed. There were no limited English proficient inmates in the facility at the time of the audit. The auditor finds that the Dale G. Haile Detention Center exceeds this part of the

standard because of the availability of many resources to communicate and provide equal opportunity for inmates who are limited English Proficient to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

115.16(b) The Dale G. Haile Detention Center's IPREA Policy prohibits the facility from using inmate interpreters, readers, or other inmate assistants except in limited circumstances where safety could be compromised waiting for other assistance. The Detention Center reports that there have been no instances in the past 12 months where inmate interpreters have been used. Interviews with random staff confirmed that inmate interpreters are not used unless there are exigent circumstances and no one could remember a time that inmate interpreters were used.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center IPREA Policy, #9
- Canyon County Sheriff's Office Policy 370.8 detailing staff training in communicating with inmates who are limited English proficient
- Canyon County Sheriff's Office Policy 370.15 detailing use of TTY machines
- Canyon County Sheriff's Office Policy 368 detailing services for people who are limited English proficient
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- Interview with Lt. Andrew Kiehl, IPREA Coordinator
- Interview with Cpl Erick Cobiskey, IPREA Compliance Manager
- Interviews with random facility staff
- Samples of IPREA posters, orientation handbook and flyer translated into Spanish
- Court list of interpretator for disabilities and languages
- Written instructions detailing for staff how to access and use the Language Line
- Yearly IPREA training curriculum for staff

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.

115.17(a) The Dale G. Haile Detention Center's IPREA Policy, #10 prohibits the hiring, promotion or retention of any employee who may have contact with inmates and will not enlist the services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997; has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described in this standard. The background investigation also includes a criminal backgrounds check of all applicants for employment or contracting services. In addition to policy, detention deputies are required to be state certified within one year of hire and the Idaho P.O.S.T. Academy requires a thorough background check on any detention employee who will be attending the P.O.S.T Academy.

115.17(b) The Canyon County Sheriff's Office considers any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.

115.17(c) In addition to conducting criminal background checks prior to hiring an applicant, the Canyon County Sheriff's Office contacts all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegations of sexual abuse. In the past 12 months, 27 people have been hired who have contact with inmates and all of them have had extensive background and criminal history checks completed prior to their hiring.

115.17(d) The Dale G. Haile Detention Center's full IPREA Policy requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates. In the past twelve months, the Canyon County Sheriff's Office has conducted criminal background record checks on 2 contract employees (100%) who have been hired and have contact with inmates.

115.17(e) The Dale G. Haile Detention Center's full IPREA Policy and documentation provided at the audit confirmed that the Detention Center is completing a criminal background records check on all current employees and contractors at least every five years.

115.17(f) The Dale G. Haile Detention Center asks all applicants during the initial interview for hire about any prior sexual misconduct of the type specified in 115.17(a) of this section. The Jail imposes upon employees a continuing affirmative duty to disclose any such misconduct. At the yearly IPREA training, staff are required to fill out the Employee PREA Questionnaire which asks questions of the employee related to any sexual misconduct they may have been involved in since the last IPREA training.

115.17(g) The Dale G. Haile Detention Center reports that material omissions regarding such misconduct or provision of materially false information shall be grounds for termination. However, this is in practice and is not included in policy. Therefore, the auditor finds that the Detention Center does not meet this part of the standard.

115.17(h) The Canyon County Sheriff's Office provides information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The Canyon County Sheriff's Office does require that the requesting agency provide a signed release of information from the applicant before giving the agency the requested information. However, this is in practice only and is not outlined in policy. Therefore, the auditor finds that the facility does not meet this part of the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center's IPREA Policy, #10
Canyon County Sheriff's Office Policies 3.03.01, 3.06, 1000.3
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Idaho P.O.S.T. IDAPA Rules
Idaho Jail Standards
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to its IPREA Policy that material omissions regarding such misconduct as listed in 115.17(a) shall be grounds for termination.
2. The Dale G. Haile Detention Center should add to its policy that the Canyon County Sheriff's Office will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to require that material omissions regarding such misconduct as listed in 115.17(a) shall be grounds for termination.
2. The IPREA policy has been revised to require the Canyon County Sheriff's Office provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom which employee has applied to work.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant 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.

115.18(a) The Canyon County Sheriff’s Office and Dale G. Haile Detention Center haven’t had any acquisitions of new facilities or substantial expansions or modifications of the current Detention Center since August 20, 2015.

115.18(b) The Dale G. Haile Detention Center has both internal and external video camera monitoring. Cameras are positioned on all external entrances and exits from the building. Cameras internally are located in hallways, dayrooms, support services areas, and internal entrances into the building. Cameras are not placed in the sleeping areas and the shower or toilet areas. No new cameras have been added during the audit cycle. However, the agency has upgraded 31 cameras throughout the building from December 17, 2015 to May 5, 2016 to high definition for better surveillance and security.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Dale G. Haile Detention Center’s list of camera placement throughout the facility
Interview with Capt. Daren Ward, Jail Administrator
Interview with Canyon County Chief Deputy, Marv Dashiell
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.21(a - b) The Canyon County Sheriff’s Office and Dale G. Haile Detention Center follow the Lexipol uniform evidence collection protocol that contains details for obtaining and securing physical evidence for administrative and criminal investigations of sexual abuse. This protocol is used by the Canyon County Detective Division when conducting criminal investigations inside and outside the facility. The protocol is developmentally appropriate for youth but youthful inmates are rarely held in the facility. West Valley Medical Center or St. Lukes Medical Center in Caldwell, Idaho is used for obtaining forensic evidence from sexual assault victims and follows an appropriate protocol.

115.21(c) Dale G. Haile Detention Center IPREA Policy, #21 states that all victims of sexual abuse are offered access to forensic medical examinations where evidentiary or medically appropriate and the assault happened within the past 72 hours. Cpl. Cobiskey explained that these exams will normally be done at West Valley Medical Center or St. Lukes Hospital in Caldwell, Idaho. There is no financial cost to the victim. When possible, examinations are performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs a forensic medical examination. Attempts to get a SAFE or SANE are documented. This information is based on the policy as there were no forensic medical examinations performed during the last twelve months.

115.21(d) The Canyon County Sheriff's Office is a member of a SART team comprised of the Sheriff's Office, Nampa Police Dept., Caldwell Police Dept., Canyon County Prosecutor, Nampa Family Justice Center, Saint Alphonsus Medical Center in Nampa, Idaho, Saint Luke's Medical Center in Nampa, Idaho, West Valley Medical Center in Caldwell, Idaho and Advocates Against Family Violence for which an agreement between all of the agencies has been signed to provide sexual assault protection and services for victims. Forensic exams are offered to the inmate free of charge

There is also an agency employee, Aleshea Boals who is a Victim Witness Coordinator. The Dale G. Haile Detention Center provided the auditor with a list of her training and qualifications and both were extensive.

115.21(e) The Dale G. Haile Detention Center IPREA Policy, #21 ensures that a victim's advocate, upon request from the inmate, accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals as warranted. There have been no forensic medical examinations done during the last twelve months and a victim's advocate has not been requested or used by inmates.

115.21(f) Lt. Andrew Kiehl and detention sergeants in the Dale G. Haile Detention Center conduct administrative investigations into allegations of sexual abuse and sexual harassment. If the administrative investigation appears to involve criminal elements, Capt. Daren Ward, the Jail Administrator will forward it to Sheriff Kieran Donahue, or designee, who will decide if it will be referred to the Canyon County Detective Division for a criminal investigation or to the Prosecuting Attorney's Investigator. All investigations that allegedly involve staff are referred outside the agency, by Sheriff Kieran Donahue, to the Prosecuting Attorney's Investigators or other local law enforcement agency. All Canyon County Detectives who are involved in the investigations have had the specialized training for investigators in a confinement setting and all have had training on sexual assault investigations. All IPREA complaints are investigated for possible criminal activity and the Canyon County Sheriff's Office maintains a close working relationship with the County Prosecutor.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center's IPREA Policy, #21
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl Erick Cobiskey
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Interview with Chief Deputy Marv Dashiell
Interview with Canyon County Sheriff's Office criminal investigator
Operational Agreement, Canyon County Sexual Assault Response Team (SART)
Lexipol Uniform Evidence Collection Protocol
Training certificates for all IPREA investigators within the agency

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.

115.22(a) Lt. Andrew Kiehl in the Dale G. Haile Detention Center conducts administrative investigations inside the Detention Center or assigns a detention sergeant to conduct administrative investigations. If the administrative investigation appears to involve criminal elements, the administrative investigator will notify administration who will refer the investigation to the Canyon County Sheriff, or designee. Sheriff Donahue will decide whether to assign it to a Canyon County Detective or refer it to an outside agency. All investigations that allegedly involve staff are referred outside the agency to either the Canyon County Prosecuting Attorney's Investigators or a local law enforcement agency. All Canyon County detectives involved in the investigations have had the specialized training for investigators in a confinement setting and all detectives have had training on sexual assault investigations. All IPREA complaints are investigated for possible criminal activity and the Canyon County Sheriff's Office maintains a close working relationship with the County Prosecutor. Documentation showed that two allegations of criminal inmate-on inmate were investigated and both were substantiated. Twelve staff related sexual harassment allegations were administrative investigations and three were unsubstantiated and nine were unfounded. Ten allegations of inmate-on-inmate abuse were administrative investigations and were substantiated. Twelve allegations of inmate-on-inmate sexual harassment were administrative investigations and two were unsubstantiated and ten were unfounded. Policy states that all allegations of sexual abuse and sexual harassment will be sent to the investigators but does not say that all will be completed. Therefore, the auditor finds the Dale G. Haile Detention Center does not meet this part of the standard.

115.22(b) The Dale G. Haile Detention Center does not have a written policy that ensures allegations of sexual abuse and sexual harassment are referred for an investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. The policy also doesn't state that the agency head or management level designee reviews and approves all decisions not to refer an allegation for criminal prosecution. The practice is explained on the Canyon County Sheriff's website but not in actual policy. Therefore, the auditor finds that this does not meet the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy, #20
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Canyon County Sheriff's Website: canyonco.org
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Interview with Chief Deputy Marv Dashiell
Interview with Canyon County Sheriff criminal investigator
PREA Investigator training certificates for Canyon County Investigators
Documentation of sexual abuse and sexual harassment allegations and subsequent investigations

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to its policy that all allegations of sexual abuse and sexual harassment will be completed.
2. The Dale G. Haile Detention Center should add to its policy that the facility ensures allegations of sexual abuse and sexual harassment are referred for an investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.
3. The Dale G. Haile Detention Center should add to its policy that the agency head or management level designee reviews and approves all decisions not to refer an allegation for criminal prosecution.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to require that all allegations of sexual abuse and sexual harassment will be completed.
2. The IPREA policy has been revised and requires that the facility ensures allegations of sexual abuse and sexual harassment are referred for an investigation to an agency with the legal authority to conduct criminal investigations unless the allegation does not involve potentially criminal behavior.
3. The IPREA policy has been revised to require the agency administration review and approve all decisions not to refer an allegation

for criminal prosecution.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard

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.

115.31(a and b) The Dale G. Haile Detention Center IPREA Policy, #13 requires that employees receive one hour of IPREA training every year that goes over all of the IPREA requirements. Documentation provided included a lesson plan on power point with each of the ten topics that was very comprehensive and covered all of the topics. Also included were other lesson plans done yearly on different IPREA subjects. Interviews with random staff revealed that the staff have extensive training on IPREA and are very knowledgeable on the topics. The auditor finds the Dale G. Haile Detention Center exceeds the standard as the full IPREA training is given yearly along with other IPREA trainings throughout the year.

115.31(c) The training is tailored to the gender of the inmates at the Dale G. Haile Detention Center which houses both female and male inmates. There is only one facility so all employees are trained to work with both genders and there are no reassignments to care for one gender or the other.

115.31(d) IPREA refresher training that reviews all of the requirements of IPREA is provided to employees every year instead of every other year and included is refresher training on policy and procedure. When policy changes all deputies in the Detention Center are notified by email at the time of the change, training on the change is done in team briefings, and deputies are given flyers to explain the change. Because the facility provides full and ongoing IPREA training yearly instead of every other year, the auditor finds that the facility exceeds this part of the standard.

115.31(e) Documentation confirmed through employee signatures that 100% have received this yearly training and that the employees understand the training they received. Interviews of random staff also reflected that all have extensive yearly training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy, #13
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
IPREA Training Curriculum
Staff rosters and description of training received
Staff signatures of receiving the training
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Interviews with random staff

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.

115.32(a) The Dale G. Haile Detention Center IPREA Policy, #14 requires all volunteers and contractors who may have contact with inmates be trained on IPREA requirements. The training curriculum includes a very comprehensive power point presentation that covers all the required topics and their responsibilities under the IPREA requirements. One hundred and thirty eight volunteers and individual contractors who have contact with inmates have been trained in IPREA requirements during the last twelve months. This totals 100 % that have been trained.

115.32(b) The training curriculum was very detailed and showed that contractors and volunteers have extensive training on the zero tolerance policy, duty to report, warning signs, proper communication with all inmates, first responder duties, and several other aspects of the prevention, detection, and response policies and procedures. All volunteers and contractors receive the comprehensive training regardless of the level of services or contact with inmates. All volunteers and contractors receive the same training as regular detention deputies so the auditor finds that the Dale G. Haile Detention Center exceeds this standard.

115.32(c) All volunteers and contractors are required to sign a roster at the training stating that they have received the training and understand it. The facility maintains that documentation and the auditor was able to review it.

There were no volunteers on site at the time of the audit. One food service contractor was interviewed and compliance was found with this standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center IPREA Policy #14
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- IPREA Training curriculum and materials for volunteer and contractors
- IPREA Training curriculum for detention staff
- IPREA class rosters and signatures for volunteers and contractors
- Interview with Lt. Andrew Kiehl, IPREA Coordinator
- Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
- Interview with food services contractor

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.

115.33(a - c) The Dale G. Haile Detention Center reports that 6783 inmates have been admitted in the past twelve months to the facility and all have been provided with comprehensive information during booking and an audio is played over the intercom at each headcount every day. All inmates in the Dale G. Haile Detention Center receive IPREA orientation materials at intake. The inmate is given an inmate orientation handbook, a pamphlet with frequently asked questions and answers about IPREA, and signs an acknowledgement form (Prisoner Information Sheet) that provides information about IPREA and how to report an incident of sexual abuse and sexual harassment. Inmates are also given a comprehensive video within 30 days of booking that explains IPREA. A log is kept of all IPREA training and which inmates participated in the training.

115.22(d - e) The Dale G. Haile Detention Center ensures that key information is continuously available to inmates through posters, flyers, and inmate handbooks. IPREA posters are displayed in the dayrooms with the abuse hotline number by the phones and a list of ways to report. IPREA flyers and an orientation handbook are printed in English and Spanish and given to each inmate. The facility provides translation services for all IPREA educational materials for inmates with disabilities and limited English proficient. Large print editions of the handbook will also be made available for inmates who are blind or visually impaired, if needed.

Interviews with random inmates revealed that the inmates are retaining the information they are provided through the audio, video, handbook, posters and flyers. All of the interviews with inmates confirmed that they received training on IPREA at booking by the booking deputy and received a PREA pamphlet and inmate handbook that contained information on how to report a sexual assault or sexual harassment. All stated that information is posted on the wall of the housing unit, and is in the inmate handbook. All said the information is given to them daily over the intercom. All knew they could access a hotline number on the phone and some were aware that advocates were available. The majority of the inmates knew they could contact people on the outside to report a sexual abuse or sexual harassment and that reports can be done verbally, in writing, anonymously and by third party.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center's IPREA Policy, #12
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
IPREA Inmate Information Sheet Acknowledgement Form and random signatures
Inmate Orientation Handbook
IPREA pamphlets
IPREA Flyer of Frequently Asked Questions and Answers
IPREA Posters displayed in dayrooms
Interview with Cpl Erick Cobiskey, IPREA Compliance Manager
Interviews with random inmates and facility intake staff
Audio Tape played every day at headcount
IPREA Video Transcript

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.

115.34(a) The Dale G. Haile Detention Center requires that all of its employees who investigate sexual abuse and sexual harassment allegations in the facility receive the specialized training for conducting such investigations in confinement settings. The investigators are required to take the online PREA Investigators course, "Investigating Sexual Abuse in a Confinement Setting" available through the PREA Resource Center and the National Institute of Corrections or the classroom course when it is available.

Eleven criminal investigators and twenty one detention administrative investigators have taken this course. The practice is in place to require all investigators to take the specialized training. However, there is nothing in policy that requires it. Therefore, the auditor finds that the facility does not meet this part of the standard.

115.34(b) Specialized training includes 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 prosecution referral. Detectives from the Canyon County Sheriff's Detective Division have also had additional training in sexual abuse investigations for their job requirements and are very familiar with the proper use of Miranda and Garrity warning as they use them frequently in their job duties.

The practice is in place that requires the above training but there is nothing in policy. Therefore, the auditor finds that the facility does not meet this part of the standard.

115.34(c) The auditor reviewed the eleven Certificates of Completion for the criminal investigators in the Canyon County Detective Division and the twenty one Certificates of Completion and roster of detention administrative investigators who took the investigator's specialized training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Objectives for the online course, "Investigating Sexual Abuse in a Confinement Setting"
Training documentation for investigators completing the specialized training
Interviews with facility criminal and administrative investigators
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to its policies that all criminal and administrative investigators of sexual abuse allegations shall receive the specialized training for conducting such investigations in a confinement setting.
2. The Dale G. Haile Detention Center should add to its policies that specialized training includes 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 prosecution referral.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to require all criminal and administrative investigators of sexual abuse allegations receive the specialized training for conducting such investigations in a confinement setting.
2. The IPREA policy has been revised to require specialized training includes 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 prosecution referral.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard.

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.

115.35(a) The Dale G. Haile Detention Center employs medical personnel to provide on-site medical care at the facility. Nurses are on duty sixteen to seventeen hours a day, seven days a week. Interviews with contract medical staff and the mental health practitioner confirmed that they are provided in-depth training on their responsibilities under IPREA, through the Detention Center IPREA training and online training of “Medical Health Care for Sexual Assault Victims in a Confinement Setting” through the PREA Resource Center. Specialized training includes the four elements required by this IPREA standard:

1. How to detect and assess signs of sexual abuse and sexual harassment;
2. How to preserve physical evidence of sexual abuse;
3. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and
4. How and to whom to report allegations or suspicions of sexual abuse or sexual harassment.

The number of medical and mental health practitioners who work regularly at the facility and have had the training is twelve.

115.35(b) Medical personnel of the Dale G. Haile Detention Center do not conduct forensic exams at the Detention Center. Victims of sexual abuse are transported to either West Valley Medical Center or Saint Lukes Medical Center in Caldwell, Idaho for the exam, when medically appropriate.

115.35(c - d) The agency maintains documentation that all medical and mental health practitioners who work at the facility have received specialized training provided by the facility and listed in (a) of this standard. Medical and mental health care practitioners also receive the training mandated for other employees of the facility. The auditor reviewed the training curriculum and the documentation that medical personnel received the training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy, #15
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Medical Personnel and Mental Health Practitioner
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Training curriculum for IPREA
Training certificates and rosters for specialized medical training

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.

115.41(a - b) The Dale G. Haile Detention Center IPREA Policy, #11 requires that all inmates will be assessed during their intake screening for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates. During the audit tour, an intake deputy explained that the assessment is normally done at booking but will wait if the inmate is severely intoxicated or uncooperative. But, under no circumstances, would it go over 72 hours to complete the risk assessment. The Dale G. Haile Detention Center reported that 100% of inmates who have entered the facility within the past twelve months with a length of stay over 72 hours were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

115.41(c - d) The risk assessments are completed on an objective screening instrument and classification assessment form that covers all ten topical areas of information as detailed in this standard. The auditor reviewed eight random files of inmates and verified that the screening instrument is being used.

115.41(e) The screening instrument also considers prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse as known to the agency.

115.41(g) If the risk screening indicates that an inmate has experienced prior sexual victimizations, whether it occurred in an institutional setting or in the community, staff will ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of intake. The Dale G. Haile Detention Center IPREA Policy, #11 also requires that each inmate’s risk level be reassessed within 30 days of the arrival of the inmate to the Detention Center. Therefore, the auditor finds the Dale G. Haile Detention Center exceeds the standard since the standard states reassessment will be done when warranted upon receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness.

115.41(h) The policy prohibits the Dale G. Haile Detention Center from disciplining inmates for refusing to answer any questions referring to sexual abuse or for not disclosing any information on the screening questions listed in this standard. Because of this policy, the auditor finds that the Dale G. Haile Detention Center exceeds this part of the standard.

115.41(i) The Dale G. Haile Detention Center has controls on dissemination of information on the risk screening form by restricting access to the information by medical and classification personnel only. Any other person who needs to access the information must go through the medical department or administration for authorization.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center IPREA Policy #11
- Dale G. Haile Detention Center Classification Policy 309
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- Risk and Initial Assessment Questionnaire
- Objective Risk Screening Instrument
- Interview with Intake staff
- Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
- Random Inmate Files
- Logs of 30 day reassessments
- Sample of medical secondary materials

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.

115.42(a) The Dale G. Haile Detention Center requires that all information gathered during the intake and assessment process be used to ensure appropriate classification and placement of inmates into housing, work programs, and regular programs as well as any necessary security or protective precautions required to ensure the inmate’s safety.

115.42(b) Classification Officers conduct all of the assessments and reassessments of inmates in the facility to make individualized determinations of how to ensure the safety of each inmate.

115.42(c) The Dale G. Haile Detention Center’s IPREA Policy #11 and Classification Policy 3.09 requires that Classification Officers carefully consider, on a case-by-case basis, whether placement of a transgender or intersex inmate in a particular housing and bed assignment will ensure the inmate’s health and safety and whether or not that placement would present management or security issues.

115.42(d) Classification Policy 3.09 requires that a reassessment of placement and program assignments will be completed on all transgender and intersex inmates at least twice each year to review any threats of safety experienced by the inmate.

115.42(e) Transgender and intersex inmates are asked about their own view in respect to their safety while incarcerated in the facility and those considerations are given serious consideration when making housing, bed, and programming assignments.

115.42(f) Classification Policy 3.09 states that transgender and intersex inmates will be allowed to shower separately from other inmates.

115.42(g) The Dale G. Haile Detention Center Classification Policy 3.09 prohibits placing lesbian, gay, bisexual, transgender or intersex inmates in a particular housing or bed assignment or other assignment based solely on such identifier or status unless the placement is ordered by a consent decree, legal settlement, or legal judgment of which the intent is the protection of inmates. The Dale G. Haile Detention Center is under no such legal restriction.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center IPREA Policy #11
- Dale G. Haile Detention Center Classification Policy 3.09
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- Risk and Initial Assessment Questionnaire
- Objective Screening Instrument
- Example of housing assignment from risk assessment
- Interviews with random staff
- Interview with Capt. Daren Ward, Jail Administrator
- Interview with Lt. Andrew Kiehl, IPREA Coordinator
- Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.43(a and d) The Dale G. Haile Detention Center's Classification Policy 3.09 states that inmates who are at risk or danger from other inmates and need protection may be housed in a holding cell. The practice is that the Detention Center will house inmates in the holding cell for protection only after all other available means of housing have been exhausted and the determination has been made there are no available alternative means of separation from likely abusers which follows the standard. However, since the policy does not match the practice or the standard, the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

115.43(b) There is no policy in place that requires any inmates placed in involuntary segregated housing have access to programs, privileges, education and work opportunities to the extent possible. And, none of the policies state that if opportunities are restricted, staff will document which opportunities have been limited, the duration of the limitation, and the reasons for the limitations. The Detention Center reports that, while this is not in policy, it is in practice. However, the auditor finds that the facility does not meet this part of the standard since it is not in policy.

115.43(c) Dale G. Haile Detention Center's Classification Policy 3.09 states if no alternative housing can be found immediately, the inmate may normally be held in involuntary segregated housing for no more than 30 days.

115.43(d) The Dale G. Haile Detention Center's Classification Policy 3.09 states that involuntary restricted housing of an inmate will be documented and will detail staff's basic concern for the inmate's safety, the reason why no alternative means of separation can be achieved, and the reason why the 30 days may need to be extended, if it does.

115.43(e) If an involuntary segregated housing assignment is made, a status review of the inmate by the Classification Officer will be completed every 30 days to determine if there is a continuing need to separate the inmate from the general population. All 30 day status reviews are documented.

At the time of the audit, there were no inmates assigned to involuntary segregated housing to separate them from likely abusers.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center Classification Policy 3.09
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Objective Risk Assessment Instrument
Reassessment Form
Sample of housing assignments for high risk inmates
Idaho Jail Standards
Interviews with random staff and inmates
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should amend the Classification Policy 3.09 to remove the policy that inmates who are at risk or danger from other inmates and need protection may be housed in a holding cell. Instead the policy should reflect the practice in that the Detention Center will house inmates in the holding cell for protection only after all other available means of housing have been exhausted and the determination has been made there are no available alternative means of separation from likely abusers which follows the standard.
2. The Dale G. Haile Detention Center should add policy that requires any inmates placed in involuntary segregated housing have access to programs, privileges, education and work opportunities to the extent possible. And, the policy should state that if opportunities are restricted, staff will document which opportunities have been limited, the duration of the limitation, and the reasons for the limitations.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been amended to remove the policy that inmates who are at risk or danger from other inmates and need protection may be housed in a holding cell. Instead the policy reflects the practice that the Detention Center will house inmates in

the holding cell for protection only after all other available means of housing have been exhausted and the determination has been made there are no available alternative means of separation from likely abusers which follows the standard.

2. The IPREA policy has been revised to require any inmates placed in involuntary segregated housing have access to programs, privileges, education and work opportunities to the extent possible. The policy states that if opportunities are restricted, staff will document which opportunities have been limited, the duration of the limitation, and the reasons for the limitations.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard

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.

115.51(a) The Dale G. Haile Detention Center's IPREA Policy #17 and #18 clearly outlines multiple ways to privately report a sexual assault, sexual harassment, or retaliation from other inmates or staff for reporting sexual abuse or sexual harassment, and any staff neglect that may have contributed to sexual abuse or sexual harassment. Three ways to report within the facility are explained to the inmates and there are three ways to report a sexual abuse or sexual harassment outside the agency. The reporting methods within the facility include verbally telling a staff member, submitting a medical request form, or submitting an Inmate Communication Form (used as a grievance). The information is in the inmate handbook, is in the orientation handbook given at intake, is on the Prisoner Information Sheet they receive at intake, and is written on posters in the dayroom of their housing unit.

115.51(b) The Dale G. Haile Detention Center has provided two methods for inmates to report outside the facility. Inmates can report on a hotline on the inmate phones that goes to the phone company who contacts the agency when they get a report. The facility also notifies inmates they can contact a family member, friend, attorney or anyone else outside the agency that they feel comfortable calling. Inmates are rarely detained solely on civil immigration holds, but the agency has in policy that these inmates are provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Inmates have access to phones in their dayrooms and policy allows for free phone calls to contact the reporting hotline.

115.51(c) The Dale G. Haile Detention Center's IPREA Policy #17 and #18 requires all staff to accept reports made verbally, in writing, anonymously, and from third parties. All allegations are documented promptly upon receipt and reported to a supervisor.

115.51(d) Staff at the Dale G. Haile Detention Center can privately report sexual abuse and sexual harassment to a supervisor, the IPREA Coordinator, Jail Administration, Chief Deputy, or Sheriff. All random staff interviewed said they could report to anyone in the chain of command up to and including the sheriff.

Interviews with staff and inmates clearly demonstrate they are very knowledgeable about IPREA and the variety of methods to report sexual abuse and sexual harassment.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policies, #17 and #18
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Prisoner Information Sheet and random signatures

Inmate Orientation Handbook
Inmate Handbook
Inmate Communication Form
Medical Request Form
IPREA flyers
IPREA Posters displayed in dayrooms
Interview with Chief Deputy Marv Dashiell
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager
Interviews with random inmates, random staff, and facility intake staff who provide IPREA information to inmates

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.

115.52(a) The Dale G. Haile Detention Center's IPREA Policy #17 and Detention SOP 5.07 allow inmates the option of filing a grievance for sexual abuse and outlines the procedures that will be used to respond to those grievances.

115.52(b and c) The facility policies allow an inmate to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. The policy further states that the inmate may submit the grievance without submitting it to a staff member who is the subject of the complaint and the grievance is not referred to a staff member who is the subject of the complaint.

115.52(d) The Dale G. Haile Detention Center's IPREA Policy #17 and Detention SOP 5.07 require that the facility issues a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90 day time period will not include time consumed by inmates in preparing any administrative appeal. The agency may claim an extension of time to respond, of up to 70 days, if the normal time period for response is sufficient to make an appropriate decision and will notify the inmate in writing of the extension and the date the decision will be made. The Dale G. Haile Detention Center reports that during the past 12 months there were no grievances filed by inmates that alleged sexual abuse so the auditor did not have any documentation to review.

115.52(e) Detention SOP 5.07 ensures that third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates shall be permitted to assist an inmate in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests of allegations of sexual abuse on behalf of the inmate if the inmate agrees. If the inmate declines to have the request processed on his or her behalf, such notification will be documented. The Dale G. Haile Detention Center reports that there were no grievances alleging sexual abuse filed by inmates in the last 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline. Therefore, the auditor did not have any documentation to review.

115.52(f) The Dale G. Haile Detention Center's Detention SOP 5.07 requires that after receiving an emergency grievance alleging the inmate is subject to a substantial risk of imminent sexual abuse, the agency shall immediately forward the grievance to a level of review at which immediate corrective action may be taken. An initial response within 48 hours will be provided to the inmate and a final agency decision will be provided to the inmate within 5 calendar days. The initial response and the final agency decision documents the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance. The Dale G. Haile Detention Center report that there were no grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months so the auditor had no documentation to review.

115.52(g) Detention SOP 5.07 states that the facility may discipline an inmate for filing a grievance alleging sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith. There have been no grievances filed in the past 12 months alleging sexual abuse.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policies, #17 and Detention SOP 5.07
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.53(a and c) The Canyon County Sheriff’s Office is a member of a SART team comprised of the Sheriff’s Office, Nampa Police Dept., Caldwell Police Dept., Canyon County Prosecutor, Nampa Family Justice Center, Saint Alphonsus Medical Center in Nampa, Idaho, Saint Luke’s Medical Center in Nampa, Idaho, West Valley Medical Center in Caldwell, Idaho and Advocates Against Family Violence for which an agreement between all of the agencies has been signed to provide sexual assault protection and services for victims.

There is also an agency employee, Aleshea Boals who is a Victim Witness Coordinator and is sometimes provided to the inmates as an advocate. The Dale G. Haile Detention Center provided the auditor with a list of her training and qualifications and both were extensive.

There are outside confidential support services in place but interviews with random inmates revealed that the majority of them did not know these services exist, did not know how to contact them, and did not know if calls were free and unmonitored. The Dale G. Haile Detention Center gave the auditor a list of service providers that are in the community and stated that the facility will provide the contact information for these services upon request of the inmate from the Medical Department. The Detention Center provided a letter to the auditor that was written from Aleshea Boals to an inmate who was the victim of a sexual assault investigation in the Detention Center stating that she had been assigned to the inmate’s case and gave the inmate her contact information if the inmate wanted to contact her. However, the auditor could not find contact information for Advocates Against Family Violence or for Aleshea Boals that is given to the inmates to report sexual abuse in the facility. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

115.53(b) Detention Policy does not state that prior to giving inmates access to outside support services the agency explains to the inmate the extent that the communication will be monitored. The policy also doesn’t require the facility to explain to the inmate that information may be relayed from the victim advocate in order to initiate and conduct an investigation into the sexual abuse allegation in accordance with mandatory reporting laws. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this standard.

There have been no forensic medical examinations done during the past twelve months and a victim’s advocate has not been requested or used by inmates so there was no documentation for the auditor to review.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
MOU between SART Team Members
Prisoner Information Sheet
PREA Resource Form
Interviews with random inmates
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center policy should be amended to require staff to explain the availability of victim's advocates and how to access their services when needed.
2. The Dale G. Haile Detention Center should post the contact information of the advocacy services in the housing units, and the information should include that the calls are free and whether the calls will be monitored.
3. The Dale G. Haile Detention Center should add to its policy that prior to giving inmates access to outside support services for counseling or advocacy services, the agency explains to the inmate the extent that the communication will be monitored.
4. The Dale G. Haile Detention Center should add to its policy that it requires prior to giving inmates access to outside support services for counseling or advocacy services, the agency explains to the inmate the extent that the communication will be monitored

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been amended to require staff to explain the availability of victim's advocates and how to access their services when needed.
2. The Dale G. Haile Detention Center has made information about the advocacy services available to the inmates, upon request, through the Medical Office. Inmates are notified of this in their inmate handbook.
3. The IPREA policy has been revised to require that prior to giving inmates access to outside support services for counseling or advocacy services, the agency explains to the inmate the extent that the communication will be monitored.
4. The IPREA policy has been revised to require prior to giving inmates access to outside support services for counseling or advocacy services, the agency explains to the inmate the extent that the communication will be monitored.

The auditor interviewed seven random inmates about their knowledge of advocates being available and whether calls to the advocates are free and unmonitored. The majority of the inmates were aware that advocates are available through the Medical Office and the calls are free and unmonitored.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard.

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.

115.54(a) The Dale G. Haile Detention Center allows third parties to report a sexual abuse or sexual harassment incident on behalf of an inmate. The agency provides information on its website, canyonco.org on how to report a sexual abuse or sexual harassment of an inmate. The site provides a phone number and an email-reporting form to report sexual abuse and sexual harassment of the inmate.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire completed by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Canyon County Sheriff's Website: [canyonco.org/Elected Officials/Sheriff/Detention-Center/Compliance -with-Prison-Rape-Elimination-Act.aspx](http://canyonco.org/ElectedOfficials/Sheriff/Detention-Center/Compliance-with-Prison-Rape-Elimination-Act.aspx)
PREA Reporting Form

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.

115.61(a) The Dale G. Haile Detention Center IPREA Policy #18 requires staff to immediately report any suspected or alleged sexual abuse, sexual harassment, retaliation or neglect that occurred in a facility whether or not it is part of the agency. Interviews with random staff confirmed that this information is taught to staff in the yearly IPREA training.

115.61(b) IPREA Policy #16 and Detention SOP 513 prohibits staff from revealing any information related to a sexual abuse or sexual harassment report to anyone other than designated supervisors or officials and, to the extent necessary, to make treatment, investigation, and other security and management decisions. Interviews with random staff confirmed that this information is included in the yearly IPREA training.

115.61(c) IPREA Policy #16 and interviews with Medical and Mental Health practitioners within the facility confirmed they are required to report sexual abuse that is disclosed to them by inmates and, at the initiation of services, must inform the inmate of their duty to report the incident and the limitations of confidentiality. Interviews with medical and mental health practitioners revealed they knew the practice and also received the information in their IPREA training.

115.61(d) Canyon County Sheriff's Office Policy 326.5 requires that if the alleged victim is under the age of 18, the allegation of sexual abuse is reported to the Idaho Department of Health and Social Services. If the alleged victim is a "vulnerable adult", the report will be made to Idaho Adult Protection Services. Interviews with random staff confirmed the majority of the staff were aware of this reporting requirement through their yearly IPREA training.

115.61(e) The Dale G. Haile Detention IPREA Policy #16 states that all reports of allegations of sexual abuse and sexual harassment, including third-party and anonymous reports are referred to the facility's designated investigators. An interview with Capt. Daren Ward confirmed that this is also in practice. Most investigations begin as administrative unless they have obvious criminal elements. Administrative investigations are done by Lt. Andrew Kiehl or other assigned detention staff and, if the investigation uncovers criminal elements, detention administration will confer with Sheriff Kieran Donahue as to who the criminal investigation will be referred to.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #16
Canyon County Sheriff's Office Policy 326.5
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
IPREA training curriculum
Interviews with random staff, medical practitioners, and mental health practitioners
Interview with Capt. Daren Ward, Jail Administrator

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.

115.62(a) The Dale G. Haile Detention Center reports that there have been no situations in the past twelve months where the facility determined an inmate was subject to a substantial risk of imminent sexual abuse. Inmates at substantial risk of imminent sexual abuse are either immediately removed from the housing unit and reassigned to other appropriate housing that ensures the inmate’s safety or the perpetrator is immediately reassigned to another housing unit, depending on the circumstances of the situation.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #18
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interviews with random staff
Interview with Chief Deputy Marv Dashiell
Interview with Capt. Daren Ward, Jail Administrator

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.

115.63(a) The Dale G. Haile Detention Center IPREA Policy #18 requires administration to report any sexual abuse allegation received regarding an inmate abused at another facility to the administration where the sexual abuse is alleged to have occurred.

115.63(b) Cpl. Erick Cobiskey confirmed that notification is made within 72 hours of the report of the sexual abuse.

115.63(c) The notification from the Dale G. Haile Detention Center to the other agency is documented.

115.53(d) Upon receiving notification from an outside facility that an inmate was sexually abused while in the custody of the Dale G. Haile Detention Center, the allegation is referred immediately to the Canyon County Detective Division or and outside law enforcement agency, depending on the nature of the allegation.

The Dale G. Haile Detention Center reported there have been no reports of this type during the past twelve months.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center PREA Policy #18
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Chief Deputy Marv Dashiell
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.64(a) The Dale G. Haile Detention Center IPREA Policy #18 and Detention SOP 5.13 outlines in policy and a first responder checklist, the responsibilities of all staff members receiving an allegation of sexual abuse. The checklist and policy details in depth the following guidelines for the first responder:

- (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 period 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 auditor was also given a checklist of the supervisor’s responsibilities when an allegation of sexual abuse is made. The checklist defines sexual harassment, sexual abuse, and voyeurism by staff and lists steps to take for sexual abuse allegations. The Dale G. Haile Detention Center reported that in the past twelve months, there were 36 allegations that an inmate was sexually abused or sexually harassed while in the facility. At the time of the audit there was one victim who reported sexual abuse available in the facility for interview by the auditor.

115.64(b) The Dale G. Haile Detention Center requires that when the first staff responder is not a security staff member, he or she shall request that the alleged victim not take any actions that could destroy physical evidence and then notify security staff immediately. There were no incidents in which a non-security staff member was the first responder in the last 12 months.

Interviews with random staff and supervisors confirmed that staff are very knowledgeable in their duties as a first responder to a sexual abuse or sexual harassment incident, are familiar with the First Responder Checklist and the Supervisor’s Checklist, and have received the training in their yearly IPREA training.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #18 and Detention SOP 5.13
First Responder Checklist
Supervisor Checklist

Interviews with random staff
Interviews with medical and mental health practitioners
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.65(a) The Dale G. Haile Detention Center has created the Canyon County Detention Sexual Assault Coordinated Response Manual that coordinates the actions of first responders, medical and mental health practitioners, investigators, and facility leadership.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Response checklists of First Responders and Shift Supervisors
Interviews with investigators and random staff
Interview with Capt. Daren Ward, Jail Administrator

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 Canyon County Sheriff’s Office and Dale G. Haile Detention Center do not have any collective bargaining agreements in place and have not had any at any time. Canyon County Sheriff’s Office is non-union and, therefore, has no union collective bargaining agreements. Therefore, the auditor determined that this standard is not applicable to the Canyon County Sheriff’s Office and Dale G. Haile Detention Center.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Chief Deputy Marv Dashiell

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.

115.67(a and d) The Dale G. Haile Detention Center IPREA Policy #24 prohibits retaliation against inmates or staff members who report sexual abuse or sexual harassment and requires monitoring of the inmate or staff member for retaliation. The agency reported that the IPREA Coordinator will assign a staff member to monitor retaliation, when necessary. The Dale G. Haile Detention Center reported that there have been no incidents of retaliation against an inmate or a staff member for reporting a sexual abuse or sexual harassment in the last 12 months. An interview with the IPREA Compliance Manager reflected that the monitoring occurs when there is reason to believe that an inmate or staff member is actually being retaliated against or believes retaliation is imminent.

115.67(b) The Dale G. Haile Detention Center IPREA Policy #24 requires the facility to protect 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. Such protections shall be afforded via housing changes to separate victims from abusers, removal of alleged staff members from contact with victims, and emotional support services for inmates or staff members who fear retaliation.

115.67(c) The IPREA Policy also requires that, following a report of sexual abuse, the agency shall act promptly to remedy any allegation of retaliation against any inmate or staff member who reports sexual abuse or sexual harassment.

115.67(d) Policy also requires the facility to take proper measures to protect any other individual who has cooperated with an investigation and expresses a fear of retaliation. During the past twelve months, there have been no incidents where a person has expressed fear of retaliation and needed monitoring.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #24
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Chief Deputy Marv Dashiell
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.68(a) The Dale G. Haile Detention Center Revised Classification Policy 3.09 prohibits staff from placing inmates who allege to have suffered sexual abuse in involuntary segregated housing unless the determination has been made that this housing assignment best protects the safety of the inmate. Cpl. Erick Cobiskey confirmed that when inmates are placed in involuntary segregation in order to separate the victim from the abuser, the placement is only for the time needed to finish the investigation and find alternative housing. Interviews with random staff and inmates revealed no incidents of involuntary segregated housing being used for this purpose. There were no inmates housed in involuntary housing for alleging sexual abuse for the auditor to interview and the Dale G. Haile Detention Center reports that no inmates who alleged to have suffered sexual abuse were held in involuntary restrictive housing in the past 12 months.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center Classification Policy 3.09
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interviews with random staff
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator

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.

115.71(a) The Dale G. Haile Detention Center IPREA Policy #18 - #20 and Canyon County Sheriff's Office Policy 600 require that investigators initiate an investigation immediately upon receiving an allegation of sexual abuse or sexual harassment. Administrative investigations are done by Lt. Andrew Kiehl or detention sergeants, criminal by the Canyon County Detention Division, and when staff are allegedly involved, the case is turned over to an outside law enforcement agency or the Prosecuting Attorney's investigators. This is done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports

115.71(b) There are eleven Canyon County criminal investigators and twenty one detention administrative investigators assigned to investigate sexual abuse and sexual harassment in the Dale G. Haile Detention Center. A review of training certificates and a training roster confirm that all thirty two investigators have had the specialized training for investigators. This training was either the PREA Resource Center classroom training or the NIC online training. This training included 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 referral to the prosecutor for criminal charges. In addition, all criminal allegations are investigated by detectives who have had extensive training on sexual abuse investigations and use Miranda and Garrity warnings frequently in their regular jobs.

115.71(c) Interviews with criminal investigators confirmed that upon initiation of an investigation into a sexual abuse allegation, the investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data, interview alleged victims, suspected perpetrators, and witnesses, and review prior complaints and reports of sexual abuse involving the suspected perpetrator.

115.71(d) Unless the allegation is an immediately recognizable criminal investigation, investigations will be initiated as an administrative investigation. All administrative investigations are done by Lt. Andrew Kiehl or Canyon County Jail sergeants. If there is any indication that the investigation appears to support criminal prosecution, Detention Administration will notify Sheriff Kieran Donahue who will assign PREA Audit Report

the investigation to the Canyon County Detective Division or an outside law enforcement agency. The Canyon County Detectives and outside law enforcement investigators are aware of when compelled interviews are an obstacle to prosecution as they use them frequently in their regular job duties.

115.71(e) The Dale G. Haile Detention Center IPREA Policy 19 requires that the credibility of the alleged victim will be assessed on a case-by-case basis and shall not be determined by the person's status as an inmate. Interviews with investigators stated that credibility is based on evidence, interviews, and the crime scene. Inmates who allege sexual abuse are not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation.

115.71(f) IPREA Policy #20 requires that a thorough report be written at the conclusion of an administrative investigation that includes a description of what evidence was collected or reviewed, the reasons behind any credibility assessments, and any facts and findings the investigator discovered in the investigation. Investigators will also consider whether staff actions or failures to act contributed to the incident of abuse.

115.71(g and h) The Dale G. Haile Detention Center IPREA Policy #20 and interviews with criminal investigators confirm that comprehensive reports are written at the conclusion of criminal investigations and the reports fully describe any physical, testimonial, and documentary evidence gathered, considered, or relied on. When it is practical, copies of documentary evidence are attached to the report. Substantiated criminal investigations are referred for prosecution, when warranted. During the past twelve months, there have been two substantiated criminal abuse investigations in the facility.

115.71(i) The Dale G. Haile Detention Center IPREA Policy #19 requires all written reports referenced in 115.71(f and g) are retained for as long as the alleged abuser is incarcerated or employed by the agency, plus seven years. The standard calls for five years so the auditor finds that the Dale G. Haile Detention Center exceeds this part of the standard.

115.71(j) IPREA Policy #19 states that if an alleged abuser or victim leaves the facility or the employ of the agency, the investigation will continue and will not be terminated until it is officially closed with a determination.

115.71(l) When an outside agency is assigned to an investigation, the Canyon County Sheriff's Office and Dale G. Haile Detention Center will cooperate fully with the investigators and will stay informed as to the progress of the investigation. Interviews with Canyon County investigators explained that there is a very good working relationship between local law enforcement agencies.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #18 - #20
Canyon County Sheriff's Office Policy 600
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Objectives for the online course, "Investigating Sexual Abuse in a Confinement Setting"
Training documentation for investigators completing the specialized training
Interview with Canyon County criminal investigator
Interview with Capt. Daren Ward, Jail Administrator
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.72(a) The Dale G. Haile Detention Center IPREA Policy #20 requires the Canyon County Sheriff's Office to impose no standard higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment in administrative investigations are substantiated. Interviews with investigators confirmed that this is the standard of determination of substantiation.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #20
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interviews with investigative staff
Interview with Lt. Andrew Kiehl, IPREA Coordinator

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.

115.73(a) The Dale G. Haile Detention Center IPREA Policy #22 requires upon completion of any administrative or criminal investigation of sexual abuse or sexual harassment in the facility, the facility will inform the inmate as to whether the allegation was determined to be substantiated, unsubstantiated, or unfounded.

115.73(b) When an outside law enforcement agency is brought in for an investigation, the inmate will be notified of the outcome when it is known. There have been no investigations of alleged inmate sexual abuse in the facility by outside investigators during the twelve months prior to the audit.

115.73(c) The Dale G. Haile Detention IPREA Policy #22 states that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

1. The staff member is no longer posted within the inmate's 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;
4. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

The Dale G. Haile Detention Center reports that there hasn't been a substantiated or unsubstantiated complaint of sexual abuse committed by a staff member against an inmate in the facility in the past 12 months.

This part of the IPREA Policy requires the four notifications listed above which reflects the higher PREA standard so the auditor finds that the Dale G. Haile Detention Center exceeds this part of the standard.

115.73(d) The Dale G. Haile Detention Center IPREA Policy #22 requires that all notifications to inmates described under this standard are documented.

115.73(e) The Dale G. Haile Detention Center's obligation to report under this standard terminates if the inmate is released from the facility before the investigation has been completed.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #22
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl Erick Cobiskey
Documentation of an inmate notification of investigation results
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Kobiskey, IPREA Compliance Manager

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.

115.76(a - d) The Dale G. Haile Detention Center policies do not require any staff member found in violation of the agency sexual abuse or sexual harassment policies is subject to progressive discipline which includes sanctions up to and including termination. The policies do not state that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate. The policies also do not require 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. And, the policies do not require 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 are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this standard.

All of the above are in practice within the Detention Center but are not included in policy.

The Dale G. Haile Detention Center reports that in the past twelve months, there has been no staff member from the facility that has been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies. Additionally, there has been no staff member in the past twelve months that has been disciplined for violations of the agency sexual abuse or sexual harassment policies. There has been no staff member that has been reported to law enforcement, Idaho P.O.S.T., or any other licensing boards for violating agency policies.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to its policies to require any staff member found in violation of the agency sexual abuse or sexual harassment policies be subject to progressive discipline which includes sanctions up to and including termination.
2. The Dale G. Haile Detention Center should add to its policies that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate.
3. The Dale G. Haile Detention Center should add to its policies the requirement that 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.

4. The Dale G. Haile Detention Center should add to its policies the requirement that 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 are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to require any staff member found in violation of the agency sexual abuse or sexual harassment policies be subject to progressive discipline which includes sanctions up to and including termination.
2. The IPREA policy has been revised to require that termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse of an inmate.
3. The IPREA policy has been revised to require that 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.
4. The IPREA policy has been revised to require that 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 are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard.

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.

115.77(a) The Dale G. Haile Detention Center prohibits contractors and volunteers who have engaged in sexual abuse from having contact with inmates. Violations are reported to any relevant licensing boards and if the abuse was criminal, the Canyon County Sheriff's Office will seek prosecution.

115.77(b) In any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the agency will take appropriate remedial measures and will consider whether the volunteer or contractor will be retained, dismissed or prohibited from contact with inmates.

The Dale G. Haile Detention Center reported that there were no contractors or volunteers who were alleged to have violated the agency's sexual abuse or sexual harassment policies during the past twelve months.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

PREA Audit Report

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.

115.78(a) The Dale G. Haile Detention Center has in place a comprehensive progressive inmate disciplinary process for rule and law violations by inmates. However, the policy does not specify that inmates shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse. Therefore the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

115.78(b) The Dale G. Haile Detention Center policies do not require sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

115.78(c) Policy does not require that the disciplinary process considers whether an inmate’s mental disabilities or mental illness contributed to the behavior when determining what type of sanctions, if any, should be imposed. Therefore the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

115.78(d) The facility does not provide therapy, counseling, or other interventions for inmate abusers.

115.78(e) The Dale G. Haile Detention Center policies do not state that it disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Therefore, the auditor finds that the Detention Center does not meet this part of the standard. The Dale G. Haile Detention Center reports that there were no instances of this type of sexual abuse during the past twelve months.

115.78(f) Policies do not state that inmates of the Dale G. Haile Detention Center will not be disciplined for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith. Therefore, the auditor finds that the Detention Center does not meet this part of the standard.

115.79(f) Agency policy prohibits all sexual activity between inmates but doesn’t include that it does not deem such activity sexual abuse unless it is determined that the activity was coerced. Therefore, the auditor finds that the Dale G. Haile Detention Center does not meet this part of the standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center Inmate Disciplinary Policy 1.09
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- Inmate Handbook
- Interview with Capt. Daren Ward, Jail Administrator
- Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

CORRECTIVE ACTION REQUIRED:

1. The Dale G. Haile Detention Center should add to its policies that inmates shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
2. The Dale G. Haile Detention Center should add to its policies that it requires sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.
3. The Dale G. Haile Detention Center should add to its policies that it requires that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the behavior when determining what type of sanctions, if any, should be imposed.
4. The Dale G. Haile Detention Center should add to its policies that it disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
5. The Dale G. Haile Detention Center should add to its policies that inmates will not be disciplined for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith.
6. The Dale G. Haile Detention Center should add to its policies that it does not deem consensual sexual activity between inmates sexual abuse unless it is determined that the activity was coerced.

VERIFICATION OF CORRECTIVE ACTION SINCE THE AUDIT:

The auditor returned to the Dale G. Haile Detention Center on March 22, 2017 and was provided supplemental documentation to evidence and demonstrate corrective actions taken by the Dale G. Haile Detention Center regarding this standard. The auditor was given a copy of the revised policies and procedures regarding the IPREA standards.

1. The IPREA policy has been revised to require that inmates shall be subject to disciplinary actions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse.
2. The IPREA policy has been revised to require sanctions of inmates shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.
3. The IPREA policy has been revised to require that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to the behavior when determining what type of sanctions, if any, should be imposed.
4. The IPREA policy has been revised to require that it disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact.
5. The IPREA policy has been revised to require that inmates will not be disciplined for filing a false report of sexual abuse when the inmate believed the incident actually happened and filed the report in good faith.
6. The IPREA policy has been revised to require that it does not deem consensual sexual activity between inmates sexual abuse unless it is determined that the activity was coerced. .

Interviews with Capt. Darin Ward, Jail Administrator, Lt. Andrew Kiehl, IPREA Coordinator, Lt. Eric Miller, and Cpl. .Erick Cobiskey, IPREA Compliance Manager confirmed that the policy has been provided to all detention employees and they have been required to read the revised policies.

The Dale G. Haile Detention Center is now fully compliant with this standard

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.

115.81(a and c) When an inmate discloses sexual abuse either at an institutional facility or in a community setting, the Dale G. Haile Detention Center IPREA Policy #11 requires the staff to report this to the Medical Provider to ensure a follow-up meeting is done within 14 days with a medical practitioner and a mental health practitioner. If the inmate refuses to discuss the matter, the inmate signs a Medical Refusal Form. The auditor interviewed an inmate who had been the victim of a sexual assault in the community prior to arrest and the inmate verified that follow-up counseling was done the day after booking by a medical provider and mental health practitioner in the facility. The Dale G. Haile Detention Center reports that in the past 12 months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

115.81(d) Information related to sexual victimization that occurred in an institutional setting is not strictly limited to medical and mental health practitioners. After booking, the information shared with classification is strictly limited to informing security and management decisions, including treatment plans, housing, work, bed, education, and program assignments. After the risk assessment is done, the only people who have access to the information is medical and classification employees.

115.81(e) Interviews with Medical and Mental Health practitioners verified that informed consent disclosures, when needed, are provided by on-site by medical providers. A copy of the informed consent form was given to the auditor to review.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #11
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Intake Risk Assessment Form
Example of Medical evaluations and Secondary Documentation
Canyon County Detention Center Pamphlet on Procedure in Event of Sexual Assault
PREA Statistics
PREA Consent Form
Medical Refusal Form
Interviews with Sergeants
Interviews with Intake Staff
Interviews with Medical and Mental Health practitioners
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.82(a) Interviews with Medical and Mental Health practitioners confirmed that inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The Dale G. Haile Detention Center reported there were no inmate victims of sexual abuse in the last twelve months who needed emergency care so the auditor had no medical records to review.

115.82(b) If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse, the First Responder will take preliminary steps to protect the inmate and will immediately notify the appropriate medical and mental health practitioners. When necessary, all victims are transported to West Valley Medical Center or Saint Lukes Medical Center in Caldwell, Idaho where SAFE or SANE exams are conducted. Inmates are offered a victim's advocate to accompany them through the exam and subsequent investigation.

115.82(c) Interviews with Medical practitioners confirmed that inmate victims of sexual abuse are offered information about, and timely access to, emergency contraception and sexually transmitted infections prophylaxis, when appropriate. The Dale G. Haile Detention Center reported there haven't been any instances during the past twelve months where inmates have needed this information or care.

15.82(d) In all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center Policy 21
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Agreement among SART Team Agencies
Interviews with Medical and Mental Health practitioners
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.83(a - c) The Dale G. Haile Detention Center requires health evaluations and, as appropriate, treatment to all inmates who have been sexually abused in any correctional institution. Interviews with Medical and Mental Health practitioners confirmed that the care is consistent with the community level of care and they will offer referrals to the inmate for continuing care, when necessary, when the inmate leaves the facility.

115.83(d - f) Interviews with Medical Practitioners confirmed that female inmate victims of sexual abuse are offered pregnancy tests and information about timely access to all lawful pregnancy related medical services. The interviews also confirmed that inmates who have been sexually abused are offered tests for sexually transmitted infections, as medically appropriate. Medical practitioners will provide ongoing treatment to inmates, when needed.

115.83(g) The Dale G. Haile Detention Center IPREA Policy #21 requires that in all circumstances of sexual abuse within the facility, treatment and advocates are provided to the victim inmate free of charge

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #21
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interviews with Medical and Mental Health practitioners
Interview with Capt. Daren Ward, Jail Administrator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.86(a) The Dale G. Haile Detention Center IPREA Policy #25 requires that a review team will review each incident of sexual abuse or sexual harassment that was investigated in the facility, unless the incident is unfounded.

115.86(b - c) The review occurs within 30 days of the incident and recommended improvements are implemented when made. The Dale G. Haile Detention Center reports that there were 12 incident reviews that had been done at the time of the audit. The review team includes upper-level administrators with input from line supervisors, investigators, and medical and mental health practitioners.

115.86(d) The Dale G. Haile Detention Center provided the auditor with several meeting minutes from the incident reviews to look at. The form that the incident review team uses is a very complete form and includes all of the elements required in this part of the standard.

115.86(e) Recommended improvements by the incident review team are documented and if the recommended improvements are not made, the team will document the reasons why.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

- Dale G. Haile Detention Center IPREA Policy #25
- Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
- Sexual abuse incident review form
- Interviews with investigative staff
- Interview with Lt. Andrew Kiehl, IPREA Coordinator
- Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

115.87(a) The Dale G. Haile Detention Center IPREA Policy #28 requires that the agency collect accurate, uniform data for every allegation of sexual abuse at the facility and use a standardized instrument and set of definitions. The data collected includes the data necessary to answer all of the questions from the most recent version of the Survey of Sexual Violence. The Dale G. Haile Detention Center provided the auditor with the standardized instrument that has been completed for the years 2013, 2014, 2015 and for 2016 for the data to date.

115.87(b) Policy directs the facility to aggregate the data annually and prepare a report.

115.87(d-e) The Dale G. Haile Detention Center policy and practice requires the collection of the data in accordance with this standard. The facility has not yet created its first annual report. However, when the report is written for 2016 the policy states that it will be put on the website or made public by other means. The auditor finds that the Dale G. Haile Detention Center exceeds this standard as policy speaks to the higher PREA standard.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #28
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Excel Data Collection Sheet
Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

This standard has been deleted for IPREA

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.

115.89(a - b) Dale G. Haile Detention Center IPREA Policy #28 requires that data collected according to this standard is securely retained and will maintain sexual abuse data for at least 10 years after the date of the initial collection.

POLICY, MATERIALS, INTERVIEWS AND OTHER EVIDENCE REVIEWED:

Dale G. Haile Detention Center IPREA Policy #28
Completed Pre-Audit Questionnaire submitted by Lt. Andrew Kiehl and Cpl. Erick Cobiskey
Interview with Chief Deputy Marv Dashiell
Interviews with Capt. Daren Ward, Jail Administrator

Interview with Lt. Andrew Kiehl, IPREA Coordinator
Interview with Cpl. Erick Cobiskey, IPREA Compliance Manager

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.

Cynthia Malm_____

3/26/17_____

Auditor Signature

Date