

# PREA Agency Audit Report: Final

**Name of Agency:** Arkansas Department of Corrections

**Facility Type:** Prison / Jail

**Date Interim Report Submitted:** 10/01/2025

**Date Final Report Submitted:** 04/13/2026

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
<b>Auditor Full Name as Signed:</b> DeShane Reed	<b>Date of Signature:</b> 04/13/2026

AUDITOR INFORMATION	
<b>Auditor name:</b>	Reed, DeShane
<b>Email:</b>	dreed@drbconsultinggroup.com
<b>Start Date of On-Site Audit:</b>	
<b>End Date of On-Site Audit:</b>	

AGENCY INFORMATION	
<b>Name of agency:</b>	Arkansas Department of Corrections
<b>Governing authority or parent agency (if applicable):</b>	
<b>Physical Address:</b>	1302 Pike Avenue, Suite C, North Little Rock, Arkansas - 72114
<b>Mailing Address:</b>	
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**Agency Chief Executive Officer Information:**

<b>Name:</b>	Lindsay Wallace
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**Agency-Wide PREA Coordinator Information**

<b>Name:</b>	Haley Reeves	<b>Email Address:</b>	Haley.Reeves@doc.arkansas.gov
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**Agency AUDIT FINDINGS****Summary of Audit Findings**

The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.

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

**Number of standards exceeded:**

0

**Number of standards met:**

10

**Number of standards not met:**

0

<b>Standards</b>	
<b>Auditor Overall Determination Definitions</b>	
<ul style="list-style-type: none"> <li>• Exceeds Standard (Substantially exceeds requirement of standard)</li> <li>• Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)</li> <li>• Does Not Meet Standard (requires corrective actions)</li> </ul>	
<b>Auditor Discussion Instructions</b>	
<p>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.</p>	

<b>115.11</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	<p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.11. Arkansas Department of Corrections submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.11. It states, <i>“As the executive head of the Arkansas Department of Corrections (DOC), it is the responsibility of the Secretary of Corrections (Secretary) to administer the various rules, orders, or directives issued by the DOC. The purpose of this directive is to ensure that the DOC remains in compliance with the Prison Rape Elimination Act (PREA). The DOC has a “zero-tolerance” approach toward all forms of sexual abuse and sexual harassment. This directive also sets forth the DOC’s zero-tolerance approach to preventing, detecting, and responding to such conduct. The DOC will initially respond to all reports of sexualized behavior or abuse as nonconsensual, regardless of perception, rumor,</i></p>

*appearance, or participant disclosure.” Additionally, “Arkansas Department of Corrections PREA Secretarial Directive (2024-02)” states, “PREA Coordinator: Individual responsible for developing PREA training as needed, writing, revising, and updating policies and procedures involving PREA standards; annually reviewing policies for effectiveness and possible standard deficiencies; and advising staff regarding implementation and interpretation of PREA policies.”*

This auditor reviewed “ARDOC’s Secretarial Directive (2025-01: Subject: PREA)” and has concluded that it has the necessary language to align with PREA Standard 115.11.

While onsite, this PREA auditor interviewed ARDOC’s Secretary of Corrections, who shared ARDOC’s commitment to PREA’s efforts to prevent, detect and respond to sexual abuse and sexual harassment within all ARDOC facilities. She also jails, work releases, and its community correction centers. Finally, ARDOC’s Secretary shared that ARDOC is committed to coordinating and monitoring PREA efforts within its facilities and having PREA Facility Audits conducted at least every 3 years.

Additionally, this PREA Auditor interviewed ARDOC’s PREA Coordinator (PC). She shared the same commitment to PREA’s efforts, as well as stated that she was supported by ARDOC Secretary of Corrections and ARDOC’s Chief of Legal Council (PC’s direct report under the Secretary of Corrections). She also shared that in October 2024, ARDOC added an Assistant PREA Coordinator position to assist ARDOC’s PC in the multiplicity of responsibilities in coordinating and monitoring PREA efforts throughout all 27 facilities statewide.

However, this auditor observed that within each of ARDOC’s Prisons, the Deputy Warden, who also serves as the PREA Compliance Manager, is unable to sustain the fidelity, consistency, monitoring, and coordination of PREA efforts at the facility level. Through interviews and observations of each ARDOC facility processes, Deputy Wardens are rotated from one facility to another (based on ARDOC needs and other factors) at any time. The rotation requires the Deputy Warden/PREA Compliance Manager to continue the progress of PREA from a previous Deputy Warden/PREA Compliance Manager effort (even if the previous efforts were below par). PREA’s success requires consistency to be sustained. This auditor has assessed that each time a Deputy Warden/PREA Compliance Manager is rotated, PREA momentum is decreased/lost, resulting in some area of PREA falling through the cracks. However, this auditor has assessed that the ARDOC facilities who experience either less PREA Compliance Manager rotation -or- have a permanent (non-rotating) facility-based PREA support staff assisting the rotating Deputy Warden/PREA Compliance Manager with PREA-related responsibilities (some responsibilities or all), have shown more PREA consistencies and compliance.

This auditor recommended ARDOC identify/designate a “*Facility-Based PREA Support Staff*” to sustain PREA consistency, by updating each rotating Deputy Warden/PREA Compliance Manager on the facility’s current PREA progress and assist the rotating Deputy Warden/PREA Compliance Manager with continuing PREA-related progress (assist with some responsibilities or all). The addition of this facility-based PREA team

	<p>will allow for enough time for rotating Deputy Warden/PREA Compliance Manager to effectively engage in their primary role and PREA responsibilities. Finally, this position does not need to be a hired role. This PREA auditor concluded that Arkansas Department of Corrections (ARDOC) was not in compliance with PREA Standard 115.11. Corrective action was required.</p> <p>During ARDOC’s Corrective Action Period (CAP), this auditor conducted multiple meetings and engaged in a series of email correspondence with ARDOC’s PREA Coordinator. The goal was to discuss and track the recommended corrective actions needed to meet compliance with this standard. After the meetings and email correspondence, ARDOC’s PREA Coordinator submitted to this auditor <b>“Memos”</b> from 16 ARDOC Prisons whose inmate capacity requires additional support, sharing that they an <i>“Assistant PREA Compliance Manager/PREA Compliance Manager Assistant”</i> (APCM/PCMA) has been added to provide support to their Deputy Warden/PREA Compliance Manager. Within each submitted <b>“Memo,”</b> the Deputy Warden/PREA Compliance Manager identified their APCM/PCMA’s name, the various capacities in which they provide PREA-related support. Additionally, during this Corrective Action Period (CAP), this auditor had the opportunity to interact with 9 of the 16 added APCM/PCMAs, during CAP Review meeting sessions with various ARDOC prison Deputy Wardens/PREA Compliance Managers.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.11.</p>
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<b>115.12</b>	<b>Contracting with other entities for the confinement of inmates</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.12. Arkansas Department of Corrections submitted in OAS 52 of their contracts for confinement. There were 6 with <i>“Contracted Re-Entry Facilities”</i> and 46 were with <i>“Contracted 309 Jails”</i> (through their <i>“309 Program”</i>). ARDOC’s <i>“Contracted 309 Jails”</i> are agreements between ARDOC and participating county jails within the state, to provide confinement (bed space) at local county jails for specifically screened/charged ARDOC inmates.</p> <p>This auditor reviewed the 6 contracts ARDOC have with the <i>“Contracted Re-Entry Facilities”</i> whose contractual language states, <i>“The FACILITY shall allow access to facilities and records to the DIVISION as needed to perform the informal audit. The FACILITY shall provide to the DIVISION a certification of full compliance with the PREA</i></p>

	<p><i>prior to August 19, 2026.” This auditor reviewed the 46 contracts ARDOC has with “Contracted 309 Jails” whose contractual language states, “The COUNTY shall allow access to facilities and records to the DIVISION as needed to perform the informal audit. The COUNTY shall provide to the DIVISION a certification of full compliance with the PREA prior to August 19, 2026.”</i></p> <p>Additionally, ARDOC’s PREA coordinator shared that ARDOC has identified their “Area Manager for Re-Entry Facilities” as their PREA Contracts Monitor for their 6 “Contracted Re-entry Facilities.” ARDOC have also identified their “309 Coordinator” and their “Assistant PREA Coordinator” as their PREA Contracts Monitors for their 46 “Contracted 309 Jails.” Each PREA Compliance Monitors goals are to ensure each facility or jail contracting with ARDOC become PREA compliant through receiving a PREA Facility Audit and full compliance by August 19, 2026.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.12.</p>
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<b>115.17</b>	<b>Hiring and promotion decisions</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.17. Arkansas Department of Corrections submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2024-03: Subject: Employment)” as evidence of compliance with PREA Standard 115.17. An excerpt states, <i>“The Department shall not hire or promote anyone who may have contact with inmates, and shall not enlist the services of any contractor who may have contact with inmates, who:</i></p> <p><i>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);</i></p> <p><i>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</i></p> <p><i>Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(ii) of this section.”</i></p> <p>Arkansas Department of Corrections also submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.17. An excerpt states, <i>“The DOC shall perform a</i></p>

*criminal background record check before enlisting the services of any Contractor who may have contact with Offenders.*

*b. The DOC shall conduct criminal background record checks at least every five years of current employees and Contractors who may have contact with Offenders."*

This auditor reviewed "ARDOC's Secretarial Directive (2024-03; Subject: Employment)" and (2024-02: Subject: PREA), concluding that they have the necessary language to align with PREA Standard 115.17.

While onsite, this PREA auditor interviewed two ARDOC Interim Human Resource (HR) Director. She shared that ARDOC conducts background checks on all employees and contractors. They further shared that background screenings include ACIC (Arkansas Crime Information Center), NCIC (National Crime Information Center) fingerprinting, Court Connect (Open Cases review system), and Employee reference Checks. When this auditor asked ARDOC's Interim HR Director about conducting 5-year background checks (on employees and contractors) and "*PREA Affirming Acknowledgement Disclosures*" for employees, ARDOC's HR shared that after conducting an agency-wide employee background check "sweep" in July 2024, ARDOC site-based HR Liaisons are required to conduct annual background checks on all employees. Contractors are required to conduct background checks on all employees annually, at the resigning/signing of their contract. Furthermore, ARDOC's Interim HR Director shared that after conducting an agency-wide employee reviewing/resigning of "*PREA Affirming Acknowledgement Disclosures*" in July 2024, ARDOC site-based HR Liaisons are now required to have all employees to review/resign "*PREA Affirming Acknowledgement Disclosures*" at hire, upon promotion, or as a part of annual performance reviews.

This auditor randomly selected 25 employee files to review in ARDOC's Human Resources "*LaserFische*" electronic employee personnel file management system. "*LaserFische*" is ARDOC's central inner system location where each site-based HR Liaison's personnel files are uploaded. This auditor's random selection consisted of employees from various years of service and rank, from ARDOC's 27 facilities. This auditor confirmed that 10 of the 25 employee files did not have their 5-year background/promotion background checks for active employees in their "*LaserFische*" files. Additionally, 6 out of the 25 employees had "*PREA Affirming Acknowledgement Disclosures*" in their "*LaserFische*" files.

Finally, this auditor asked ARDOC PREA Coordinator (PC) is ARDOC discloses former employee substantiation of sexual abuse or sexual harassment. ARDOC's PC shared Arkansas' Statute on providing references to prospective employers has recently changed since the previous PREA Agency audit. The new statute now allows current or former employers to disclose 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.

This auditor recommended HR Director develop "*Monitoring Procedures*" where a group of their site-based HR Liaison employee files are randomly reviewed quarterly. This would allow the HR Liaison and HR Director to catch where the gap is in getting

checks completed as policy/directives dictate and identify the gap in getting the completed information uploaded to ARDOC's "LaserFische" electronic employee personnel file management system. Finally, this auditor recommends ARDOC's Human Resources team establish consistency of practice before compliance can be concluded. This auditor will conduct another file review during this Agency Audit's corrective action period, to determine compliance. This PREA auditor concluded that Arkansas Department of Corrections (ARDOC) was not in compliance with PREA Standard 115.17. Corrective Action was required.

Immediately after the conclusion of this PREA Agency Audit's post audit debriefing, ARDOC's Interim HR Director sent out an email to all ARDOC facility-based HR Liaisons with updated directives regarding background checks and random file reviews. The email stated the following:

**From:** *Interim HR Director*>

**Sent:** *Thursday, July 17, 2025 8:56 AM*

**To:** *ADC Unit Human Resource Managers ; ADC Unit HR Assistants*

**Cc:** *HR Administration (DOC); PREA Coordinator (DOC); Chief of Staff (DOC); and Contract Administrator (DOC)*

**Subject:** *PREA Standards*

*Good morning,*

*We just concluded our yearly PREA audit. I would like to thank each of you for answering the auditor's questions while they audited your facilities. Overall, I believe we were compliant with personnel files and the needed documentation.*

*The initial sweep of the agency in July 2024 was a very quick and time crunching task. PREA Standards call for backgrounds to be ran every five years, but it was decided the Agency would go above and beyond this requirement and complete backgrounds every year. The month of August you must have each employee complete the PREA Questionnaire Form and HR Staff will need to complete a NCIC/ACIC background check on employees. Some of you have created a PREA Folder within Laserfiche which is great, and I am requesting as you complete this process on staff that if there is not a PREA Folder, you create one. The documents you collect during August on staff should be filed in that folder. (This will make it more easily accessible to review during audits)*

*It is very important that both documents are completed on every employee. I am suggesting you use a current position roster of employees to check off everyone as you complete.*

*During the month of September, a random review of each unit will be completed for completion.*

*I realize this will add to your normal filing in Laserfiche, if you need assistance with filing, please email Suzanne Rowland, she will assist with this task.*

*If you have any questions, please feel free to give me a call.*

*Thanks again for all your hard work,*

*(Interim HR Director/s Name)*

*Arkansas Department of Corrections*

*Associate Human Resources Administrator*

*Email*

*(870) 8\*\*-8\*\*\* Office*

Finally, during this Corrective Action Period, this auditor was able to verify HR Manager compliance. This verification of compliance occurred through interviewing HR Managers and reviewing randomly selected personnel records while onsite at each of the 9 ARDOC Prisons and Community Confinement facilities (after the conclusion of ARDOC's Agency Audit). Each of the 9 audited facilities personnel files were in compliance with this PREA Standard. The reviewed personnel files had verifications of completed backgrounds (prior to hire, promotions and annual background checks per ARDOC policy), PREA Self Disclosures, and References.

This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.17.

115.18	<b>Upgrades to facilities and technologies</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>  This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.18. Arkansas Department of Corrections (ARDOC) did not submit into OAS evidence of acquiring a new facility, substantial expansion or modification to their existing facilities, or current facility upgrades.  Furthermore, this auditor interviewed ARDOC's Secretary of Corrections (agency head) and Chief of Staff (designee). Both shared that ARDOC have made an expansion to some of their existing facilities since 2012, most recently 2022-2024. Furthermore, both shared that ARDOC has acquired another facility, and ARDOC is ensuring that the design, supervision, and monitoring technology will improve their

	<p>ability to protect inmates from sexual abuse.</p> <p>Additionally, this auditor interviewed ARDOC’s PREA Coordinator (PC) who confirmed the acquisition of another facility, as well as monitoring or physical plant upgrades to some of ARDOC’s current facilities.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.18.</p>
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<b>115.42</b>	<b>Use of screening information</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.42. Arkansas Department of Corrections submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.42. An excerpt states, <i>“Placement decisions regarding Transgender and Intersex Offenders shall be individualized.”</i> Arkansas Department of Corrections also submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.42. An excerpt states, <i>“The information from the PREA screening shall be used to make housing, bed, program, and work assignment decisions with the goal of keeping separate those Offenders who are prone to sexual Victimization from those who are prone to sexual aggression. The facility PCM is responsible for ensuring such separation.”</i></p> <p>This auditor reviewed “ARDOC’s Secretarial Directive (2025-01: Subject: PREA) and concludes that they have the necessary language to align with PREA Standard 115.42.</p> <p>While onsite, this auditor interviewed ARDOC’s Secretary of Corrections (agency head) and Chief of Staff (designee). Both shared that the courts make the decisions where ARDOC’s inmates are initially placed stating, <i>“Before remanding an individual to the ARDOC, whom the courts deem as male are placed at ARDOC’s Ouachita facility for further assessment. Whom the courts deem to be female are placed at ARDOC’s McPherson facility for further assessment.”</i> Both further shared that assessments conducted at Ouachita and McPherson facilities help ARDOC determine their inmate’s subsequent facility placement. Each placement of inmates is individualized. ARDOC do not have designated placement facilities solely for LGBTI or Transgender/Intersex inmates. Even more, transgender/intersex inmate’s placement considerations are done on a case-by-case basis.</p>

	<p>Furthermore, ARDOC’s PREA Coordinator (PC) shared that ARDOC inmates who identifies as Transgender or Intersex are referred to and meets with ARDOC’s multi-disciplinary “<i>Gender Dysphoria Committee.</i>” This committee consists of multidisciplinary practitioners from different disciplines (mental health, psychologist, psychiatric, medical, security, etc.) who assess and determined the inmate’s official transgender/intersex status. ARDOC’s “<i>Gender Dysphoria Committee’s</i>” decisions assist in case-by-case placement considerations. Through these multi-disciplinary assessments, the team identifies the best fit facility to place the inmate. Finally, ARDOC’s PC shared that the facility where transgender/intersex inmates are placed follows PREA Standards regarding transgender/intersex inmates.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.42.</p>
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<p><b>115.66</b></p>	<p><b>Preservation of ability to protect inmates from contact with abusers</b></p>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p>
	<p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.66. ARDOC’s PREA Coordinator submitted in their Pre-Audit Questionnaire that ARDOC have not engaged in collective bargaining on their agency’s behalf or renewed any collective bargaining agreement or other agreement since August 20, 2012. ARDOC’s PREA Coordinator did not submit any other pre-audit documentation from Arkansas Department of Corrections (ARDOC).</p> <p>During this auditor’s onsite interview with ARDOC’s Secretary of Corrections (agency head) and Chief of Staff (designee), both reported that ARDOC is a non-union agency. Both further shared that Arkansas State Law prohibits unionizing. This auditor also conducted a web search and reviewed that Arkansas is an at-will employment state, which means, “<i>An employer can terminate an employee at any time, for any reason, or for no reason at all, as long as the reason is not illegal. Likewise, an employee can quit at any time without providing a reason.</i>” Finally, this auditor interviewed ARDOC’s Interim Human Resources Director who confirmed that ARDOC’s hiring process and employee acquisition/onboarding does not include union options.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.66.</p>

<b>115.87</b>	<b>Data collection</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<p data-bbox="256 262 544 293"><b>Auditor Discussion</b></p> <p data-bbox="256 338 1485 831">This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.87. Arkansas Department of Corrections submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.87. An excerpt states, <i>“1. Data shall be collected for every allegation of Sexual Abuse using the PREA investigating screens in eOMIS designed to contain the data necessary to answer all questions for the Survey of Sexual Violence requested annually from the Department of Justice for the set of definitions. All data collected shall be securely retained.</i></p> <p data-bbox="256 871 1461 987"><i>2. Each facility shall document the number of allegations, completed investigations, and investigative outcomes in a monthly report. The report shall be submitted to the PREA Coordinator along with the facilities tracking spreadsheet.</i></p> <p data-bbox="256 1025 1449 1099"><i>3. All data from available incident-based documents related to allegations of Sexual Abuse shall be collected, reviewed, and maintained as needed.</i></p> <p data-bbox="256 1137 1310 1211"><i>4. Data shall be obtained from each private facility which contracts for the confinement of DOC Offenders.</i></p> <p data-bbox="256 1249 1449 1323"><i>5. Aggregated data collected shall be made available to the public annually through the DOC website.</i></p> <p data-bbox="256 1361 1461 1525"><i>6. All case records associated with claims of sexual offenses, including incident reports, investigation reports, Offender information, case disposition, and medical and counseling evaluation findings and recommendations for post-release treatment or counseling, shall be retained in accordance with the records retention schedule.”</i></p> <p data-bbox="256 1563 1422 1682">This auditor reviewed ARDOC’s Secretarial Directive (2025-01: Subject: PREA) and concludes that they have the necessary language to align with PREA Standard 115.87.</p> <p data-bbox="256 1720 1469 1962">While onsite at ARDOC’s Headquarters, this auditor interviewed ARDOC’s PREA Coordinator (PC). She shared the process for collecting and aggregating monthly data on sexual abuse/sexual harassments incidents and investigations. She also shared that she receives sexual abuse incident/investigation information from each ARDOC facility’s PREA Compliance Manager/Superintendent, develop monthly and annual reports, then submit ARDOC’s Secretary of Corrections for review/approval.</p> <p data-bbox="256 2000 1433 2074">Additionally, this PREA auditor interviewed ARDOC’s Media Specialist, who’s the gatekeeper of electronic information being disseminated to the public via ARDOC’s</p>

	<p>website. She stated that after ARDOC’s PREA Coordinator submits <i>PREA Annual Reports</i> and <i>PREA Facility Audit Final Reports</i>, ARDOC’s Secretary of Corrections (agency head) and Chief of Staff (designee) reviews and approves the reports before they are made public on the agency’s website. (submittal).</p> <p>ARDOC’s Media Specialist walked this auditor through the process once she receives <i>PREA Annual Reports</i> to the reports “going live” onto ARDOC’s website for public availability/viewing. ARDOC’s PC and Media Specialist also shared that Personal Identifiers are redacted from annual prior to “going live.” Finally, ARDOC’s Media Specialist shared that ARDOC PREA-related documents are still available for up to 10 years. Finally, this auditor reviewed <i>PREA Facility Annual Reports</i> on ARDOC’s website from years 2015 through 2024. Each report contained sexual abuse/sexual harassments statistics/data, corrective actions taken, and physical plant and/or visual monitoring upgrades within their facilities to prevent those incarcerated in ARDOC’s custody are kept safe from sexual abuse and sexual harassment.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.87.</p>
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<b>115.88</b>	<b>Data review for corrective action</b>
	<p><b>Auditor Overall Determination:</b> Meets Standard</p> <hr/> <p><b>Auditor Discussion</b></p> <p>This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA Resource Center’s Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.88. Arkansas Department of Corrections submitted their “Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)” as evidence of compliance with PREA Standard 115.88. An excerpt states, “1. <i>Data shall be collected for every allegation of Sexual Abuse using the PREA investigating screens in eOMIS designed to contain the data necessary to answer all questions for the Survey of Sexual Violence requested annually from the Department of Justice for the set of definitions. All data collected shall be securely retained.</i></p> <p>2. <i>Each facility shall document the number of allegations, completed investigations, and investigative outcomes in a monthly report. The report shall be submitted to the PREA Coordinator along with the facilities tracking spreadsheet.</i></p> <p>3. <i>All data from available incident-based documents related to allegations of Sexual Abuse shall be collected, reviewed, and maintained as needed.</i></p> <p>4. <i>Data shall be obtained from each private facility which contracts for the confinement of DOC Offenders.</i></p>

5. *Aggregated data collected shall be made available to the public annually through the DOC website.*

6. *All case records associated with claims of sexual offenses, including incident reports, investigation reports, Offender information, case disposition, and medical and counseling evaluation findings and recommendations for post-release treatment or counseling, shall be retained in accordance with the records retention schedule.”*

This auditor reviewed ARDOC’s Secretarial Directive (2025-01: Subject: PREA) and concludes that they have the necessary language to align with PREA Standard 115.88.

While onsite at ARDOC’s Headquarters, this auditor interviewed ARDOC’s PREA Coordinator (PC). She shared the process for collecting and aggregating monthly data on sexual abuse/sexual harassments incidents and investigations. She also shared that she receives sexual abuse incident/investigation information from each ARDOC facility’s PREA Compliance Manager/Superintendent, develop monthly and annual reports, then submit ARDOC’s Secretary of Corrections for review/approval.

Additionally, this PREA auditor interviewed ARDOC’s Media Specialist, who’s the gatekeeper of electronic information being disseminated to the public via ARDOC’s website. She stated that after ARDOC’s PREA Coordinator submits *PREA Annual Reports* and *PREA Facility Audit Final Reports*, ARDOC’s Secretary of Corrections (agency head) and Chief of Staff (designee) reviews and approves the reports before they are made public on the agency’s website. submittal).

ARDOC’s Media Specialist walked this auditor through the process once she receives *PREA Annual Reports* to the reports “going live” onto ARDOC’s website for public availability/viewing. ARDOC’s PC and Media Specialist also shared that Personal Identifiers are redacted from annual prior to “going live.” Finally, ARDOC’s Media Specialist shared that ARDOC PREA-related documents are still available for up to 10 years. Finally, this auditor reviewed *PREA Facility Annual Reports* on ARDOC’s website from years 2015 through 2024. Each report contained sexual abuse/sexual harassments statistics/data, corrective actions taken, and physical plant and/or visual monitoring upgrades within their facilities to prevent those incarcerated in ARDOC’s custody are kept safe from sexual abuse and sexual harassment.

This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.88.

<b>115.89</b>	<b>Data storage, publication, and destruction</b>
	<b>Auditor Overall Determination:</b> Meets Standard
	<b>Auditor Discussion</b>
	This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit

evidentiary documents uploaded via PREA Resource Center's Online Audit System (OAS), as well as documents submitted through other electronic sources. This PREA Auditor also relied upon documentation from on-site interviews, as well as on-site documents/files reviewed and observations to determine compliance for Standard 115.89. Arkansas Department of Corrections submitted their "Arkansas Department of Corrections PREA Secretarial Directive (2025-01: Subject: PREA)" as evidence of compliance with PREA Standard 115.89. An excerpt states, *"1. Data shall be collected for every allegation of Sexual Abuse using the PREA investigating screens in eOMIS designed to contain the data necessary to answer all questions for the Survey of Sexual Violence requested annually from the Department of Justice for the set of definitions. All data collected shall be securely retained.*

*2. Each facility shall document the number of allegations, completed investigations, and investigative outcomes in a monthly report. The report shall be submitted to the PREA Coordinator along with the facilities tracking spreadsheet.*

*3. All data from available incident-based documents related to allegations of Sexual Abuse shall be collected, reviewed, and maintained as needed.*

*4. Data shall be obtained from each private facility which contracts for the confinement of DOC Offenders.*

*5. Aggregated data collected shall be made available to the public annually through the DOC website.*

*6. All case records associated with claims of sexual offenses, including incident reports, investigation reports, Offender information, case disposition, and medical and counseling evaluation findings and recommendations for post-release treatment or counseling, shall be retained in accordance with the records retention schedule."*

This auditor reviewed ARDOC's Secretarial Directive (2025-01: Subject: PREA) and concludes that they have the necessary language to align with PREA Standard 115.89.

While onsite at ARDOC's Headquarters, this auditor interviewed ARDOC's PREA Coordinator (PC). She shared the process for collecting and aggregating monthly data on sexual abuse/sexual harassments incidents and investigations. She also shared that she receives sexual abuse incident/investigation information from each ARDOC facility's PREA Compliance Manager/Superintendent, develop monthly and annual reports, then submit ARDOC's Secretary of Corrections for review/approval.

Additionally, this PREA auditor interviewed ARDOC's Media Specialist, who's the gatekeeper of electronic information being disseminated to the public via ARDOC's website. She stated that after ARDOC's PREA Coordinator submits *PREA Annual Reports* and *PREA Facility Audit Final Reports*, ARDOC's Secretary of Corrections (agency head) and Chief of Staff (designee) reviews and approves the reports before they are made public on the agency's website. submittal).

ARDOC's Media Specialist walked this auditor through the process once she receives

	<p><i>PREA Annual Reports</i> to the reports “going live” onto ARDOC’s website for public availability/viewing. ARDOC’s PC and Media Specialist also shared that Personal Identifiers are redacted from annual prior to “going live.” Finally, ARDOC’s Media Specialist shared that ARDOC PREA-related documents are still available for up to 10 years. Finally, this auditor reviewed <i>PREA Facility Annual Reports</i> on ARDOC’s website from years 2015 through 2024. Each report contained sexual abuse/sexual harassments statistics/data, corrective actions taken, and physical plant and/or visual monitoring upgrades within their facilities to prevent those incarcerated in ARDOC’s custody are kept safe from sexual abuse and sexual harassment.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.89.</p>
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<b>115.401</b>	<b>Frequency and scope of audits</b>
	<b>Auditor Overall Determination:</b>
	<b>Auditor Discussion</b>
	<p>Arkansas Department of Corrections (ARDOC) understands PREA Standard 115.401, which states, <i>“During the three-year period starting on August 20, 2013, and during each three-year period thereafter, the agency shall ensure that each facility operated by the agency, or by a private organization on behalf of the agency, is audited at least once.”</i> This auditor interviewed ARDOC’s Secretary of Corrections (agency head), who shared that she, ARDOC, and Arkansas Governor supports and are committed to their facilities receiving PREA Audits during this 1st year of this 5th Cycle. ARDOC plans to continue to have a PREA audit conducted every three years.</p> <p>This is ARDOC’s second PREA Agency/Facility Audits to be applied with all ARDOC prisons, who will be receiving a PREA Facility Audit in Cycle 5; Year 1.</p> <p>This auditor had unimpeded access to the ARDOC Headquarters, and the ability to observe, all areas of the audited agency. This auditor was permitted to request and receive copies of any relevant documents. The auditor was permitted to conduct private interviews with agency staff whose roles held responsibility for specific PREA Standards, as well as reviewing relevant files. The ARDOC were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel.</p> <p>This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.401.</p>

<b>115.403</b>	<b>Audit contents and findings</b>
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**Auditor Overall Determination:** Meets Standard

**Auditor Discussion**

This PREA Auditor reviewed Arkansas Department of Corrections (ARDOC) pre-audit evidentiary documents uploaded via PREA's Online Audit System (OAS), documents submitted through other electronic sources, conducted on-site interviews, as well as on-site document/file reviews and observations to determine compliance for Standard 115.403.

While onsite at ARDOC's Headquarters, this auditor interviewed ARDOC's PREA Coordinator (PC). She shared the process for collecting and aggregating monthly data on sexual abuse/sexual harassments incidents and investigations. She also shared that she receives sexual abuse incident/investigation information from each ARDOC facility's PREA Compliance Manager/Superintendent, develop monthly and annual reports, then submit ARDOC's Secretary of Corrections for review/approval.

Additionally, this PREA auditor interviewed ARDOC's Media Specialist, who's the gatekeeper of electronic information being disseminated to the public via ARDOC's website. She stated that after ARDOC's PREA Coordinator submits *PREA Annual Reports* and *PREA Facility Audit Final Reports*, ARDOC's Secretary of Corrections (agency head) and Chief of Staff (designee) reviews and approves the reports before they are made public on the agency's website. submittal).

ARDOC's Media Specialist walked this auditor through the process once she receives *PREA Annual Reports* to the reports "going live" onto ARDOC's website for public availability/viewing. ARDOC's PC and Media Specialist also shared that Personal Identifiers are redacted from annual prior to "going live." Finally, ARDOC's Media Specialist shared that ARDOC PREA-related documents are still available for up to 10 years.

This auditor reviewed *PREA Annual Reports* on ARDOC's website from years 2015 through 2024. Each report contained sexual abuse/sexual harassments statistics/data, corrective actions taken, and physical plant and/or visual monitoring upgrades within their facilities to prevent those incarcerated in ARDOC's custody are kept safe from sexual abuse and sexual harassment. All of ARDOC's Prisons, Work Release Centers, and Contracted Re-Entry Facilities...

1. Are scheduled to receive their PREA Facility Audit during Cycle 5; Year 1,
2. Have received a PREA Facility Audit and are in their Corrective Action Period (CAP), from their Cycle 4; Year 3 audit; or
3. Have received their PREA Facility Audit Final Report.

Finally, this auditor has viewed completed and uploaded PREA Facility Audit Final Reports to ARDOC's website from Cycle 4; Year 3 audited facilities. Each reviewed audit uploaded to ARDOC's website met the requirements of this PREA Standard 115.403 which states, "*c) For each standard the auditor shall determine whether the audited facility reaches one of the following findings: 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).*

*The audit summary shall indicate, among other things, the number of provisions the facility has achieved at each grade level.*

*(d) Audit reports shall describe the methodology, sampling sizes, and basis for the auditor's conclusions with regard to each standard provision for each audited facility and shall include recommendations for any required corrective action."*

This PREA auditor concludes that Arkansas Department of Corrections (ARDOC) is in compliance with PREA Standard 115.403.

<b>Appendix: Provision Findings</b>		
<b>115.11 (b)</b>	<b>Zero tolerance of sexual abuse and sexual harassment; PREA coordinator</b>	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
<b>115.12 (a)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
<b>115.12 (b)</b>	<b>Contracting with other entities for the confinement of inmates</b>	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
<b>115.17 (a)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency prohibit the hiring or promotion of anyone 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)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity	yes

	described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of 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)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
<b>115.17 (b)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
<b>115.17 (c)</b>	<b>Hiring and promotion decisions</b>	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
<b>115.17 (d)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
<b>115.17 (e)</b>	<b>Hiring and promotion decisions</b>	

	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
<b>115.17 (f)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
<b>115.17 (g)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
<b>115.17 (h)</b>	<b>Hiring and promotion decisions</b>	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
<b>115.18 (a)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
<b>115.18 (b)</b>	<b>Upgrades to facilities and technologies</b>	
	If the agency installed or updated a video monitoring system,	yes

	electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	
<b>115.42 (c)</b>	<b>Use of screening information</b>	
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
	This provision is no longer applicable to your compliance finding, please select N/A.	yes
<b>115.66 (a)</b>	<b>Preservation of ability to protect inmates from contact with abusers</b>	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	no
<b>115.87 (a)</b>	<b>Data collection</b>	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
<b>115.87 (b)</b>	<b>Data collection</b>	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
<b>115.87 (c)</b>	<b>Data collection</b>	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
<b>115.87 (d)</b>	<b>Data collection</b>	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports,	yes

	investigation files, and sexual abuse incident reviews?	
<b>115.87 (e)</b>	<b>Data collection</b>	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
<b>115.87 (f)</b>	<b>Data collection</b>	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
<b>115.88 (a)</b>	<b>Data review for corrective action</b>	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
<b>115.88 (b)</b>	<b>Data review for corrective action</b>	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
<b>115.88 (c)</b>	<b>Data review for corrective action</b>	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
<b>115.88 (d)</b>	<b>Data review for corrective action</b>	
	Does the agency indicate the nature of the material redacted	yes

	where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	
<b>115.89 (a)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
<b>115.89 (b)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
<b>115.89 (c)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
<b>115.89 (d)</b>	<b>Data storage, publication, and destruction</b>	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
<b>115.401 (a)</b>	<b>Frequency and scope of audits</b>	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
<b>115.401 (b)</b>	<b>Frequency and scope of audits</b>	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by	na

	the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	
<b>115.403 (f)</b>	<b>Audit contents and findings</b>	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes