

PREA Facility Audit Report: Final

Name of Facility: Swanson Center for Youth at Monroe

Facility Type: Juvenile

Date Interim Report Submitted: NA

Date Final Report Submitted: 05/19/2026

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"/>
Auditor Full Name as Signed: Robert Burns Latham	Date of Signature: 05/19/2026

AUDITOR INFORMATION	
Auditor name:	Latham, Robert
Email:	robertblatham@icloud.com
Start Date of On-Site Audit:	03/24/2026
End Date of On-Site Audit:	03/26/2026

FACILITY INFORMATION	
Facility name:	Swanson Center for Youth at Monroe
Facility physical address:	4701 South Grand Street, Monroe, Louisiana - 71202
Facility mailing address:	4701 South Grand, Monroe, LA, Louisiana - 71202

Primary Contact

Name:	Calvin Lewis
Email Address:	Calvin.Lewis@LA.GOV
Telephone Number:	318-551-6148

Superintendent/Director/Administrator	
Name:	Calvin Lewis
Email Address:	Calvin.Lewis@LA.GOV
Telephone Number:	(318)551-6148

Facility PREA Compliance Manager	
Name:	Marsha Fountain
Email Address:	marsha.fountain2@la.gov
Telephone Number:	(318) 551-6168

Facility Health Service Administrator On-Site	
Name:	Mark Gaines
Email Address:	MaGaines@Wellpath.us
Telephone Number:	(318) 551-6083

Facility Characteristics	
Designed facility capacity:	216
Current population of facility:	124
Average daily population for the past 12 months:	120
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Men/boys

Age range of population:	12-21
Facility security levels/resident custody levels:	Secure Maximum
Number of staff currently employed at the facility who may have contact with residents:	216
Number of individual contractors who have contact with residents, currently authorized to enter the facility:	49
Number of volunteers who have contact with residents, currently authorized to enter the facility:	7

AGENCY INFORMATION

Name of agency:	Louisiana Office of Juvenile Justice
Governing authority or parent agency (if applicable):	
Physical Address:	7919 Independence Boulevard, Baton Rouge, Louisiana - 70806
Mailing Address:	
Telephone number:	2252877900

Agency Chief Executive Officer Information:

Name:	Chad Wells
Email Address:	chad.wells@la.gov
Telephone Number:	(225) 287-7900

Agency-Wide PREA Coordinator Information

Name:	Patsy Adams	Email Address:	patsy.adams@la.gov
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Facility 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:

43

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2026-03-24
2. End date of the onsite portion of the audit:	2026-03-26

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	1. Just Detention International 2. The Wellspring Alliance for Families 3. State of Louisiana Child Ombudsman

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	216
15. Average daily population for the past 12 months:	120
16. Number of inmate/resident/detainee housing units:	13
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	114
25. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	0
26. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	70
27. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
28. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
29. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	0
30. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	0

<p>31. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>32. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>33. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>7</p>
<p>34. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>35. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>36. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>216</p>
<p>37. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	<p>7</p>

38. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	<p>49</p>
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	<p>No text provided.</p>
<h2>INTERVIEWS</h2>	
<h3>Inmate/Resident/Detainee Interviews</h3>	
<h4>Random Inmate/Resident/Detainee Interviews</h4>	
40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	<p>11</p>
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<p> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	<p>Residents were interviewed from all thirteen housing units and the infirmary.</p>
43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

<p>44. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>The auditor was provided with a roster of residents confined on the first day of the onsite audit. The auditor selected residents from each housing unit with consideration given to age, race, ethnicity, and length of time in the facility. Additionally, the auditor was provided with lists of residents for selecting targeted interviews.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>10</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p>47. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>

<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included interviewing staff and residents.</p>
<p>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>4</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included interviewing staff and residents.</p>
<p>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included interviewing staff and residents.</p>
<p>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included interviewing staff and residents.</p>
<p>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Interviews conducted with residents who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol were not applicable.</p>
<p>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Interviews conducted with residents who identify as transgender and intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol were not applicable.</p>
<p>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>3</p>

<p>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>56. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Corroboration strategies included interviewing staff and residents.</p>
<p>57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The auditor was provided with lists of residents for selecting targeted interviews. In addition to picking residents from the lists, the auditor corroborated the information provided by interviewing staff and residents and reviewing risk screening information and a sexual abuse and sexual harassment investigation files.</p>

Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	12
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input checked="" type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
If "Other," describe:	Gender, race, ethnicity, and languages spoken were considered.
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The auditor was provided a roster on the first day of the onsite audit. Staff were selected all housing units and from each shift. To enable a cross section of staff interviewed, the auditor considered, length of tenure in the facility, rank, work assignments, gender, race, ethnicity, and languages spoken.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	12

63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input type="checkbox"/> Other
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	2
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	The auditor was provided with rosters for staff, volunteers, and contractors.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

PREA Standard 115.401 (h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: As you are conducting the site review, you must document your tests of critical functions, important information gathered through observations, and any issues identified with facility practices. The information you collect through the site review is a crucial part of the evidence you will analyze as part of your compliance determinations and will be needed to complete your audit report, including the Post-Audit Reporting Information.

71. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
75. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

<p>76. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>The auditor had access to all areas of the facility. During the site review the auditor had informal, conversations with residents and staff. The auditor tested the following critical functions:</p> <ul style="list-style-type: none"> • The facility’s process for securing interpretation services on-demand (1-World Language LLC) • Internal reporting methods for confined persons (grievance and Investigative Services Hotline) • External reporting methods for confined persons (Louisiana Ombudsman) • Access to outside emotional support services (Wellspring Alliance for Families) • Third-Party Reporting (Investigative Services Hotline)
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Documentation Sampling

Where there is a collection of records to review-such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files-auditors must self-select for review a representative sample of each type of record.

<p>77. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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<p>78. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>The auditor selected documents for staff interviewed and additional documents though corrective action. Documents reviewed included personnel records and training records. The auditor reviewed documents for residents interviewed covering the 12-month audit period. Documents reviewed included intake records, initial risk assessments, risk reassessments, use of screening information and sexual abuse and sexual harassment investigation files.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted. Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

79. Total number of SEXUAL ABUSE allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	9	0	9	0
Staff-on-inmate sexual abuse	2	0	2	0
Total	11	0	11	0

80. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	7	0	7	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	7	0	7	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

Note: these counts should reflect where the investigation is currently (i.e., if a criminal investigation was referred for prosecution and resulted in a conviction, that investigation outcome should only appear in the count for “convicted.”) Do not double count. Additionally, for question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, and detainee sexual abuse investigation files, as applicable to the facility type being audited.

81. Criminal SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	0	0	0	0

82. Administrative SEXUAL ABUSE investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	2	6	1
Staff-on-inmate sexual abuse	0	2	0	0
Total	0	4	6	1

Sexual Harassment Investigation Outcomes

Note: these counts should reflect where the investigation is currently. Do not double count. Additionally, for question brevity, we use the term "inmate" in the following questions. Auditors should provide information on inmate, resident, and detainee sexual harassment investigation files, as applicable to the facility type being audited.

83. Criminal SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

84. Administrative SEXUAL HARASSMENT investigation outcomes during the 12 months preceding the audit:

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	7	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	0	7	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

85. Enter the total number of SEXUAL ABUSE investigation files reviewed/ sampled:	11
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<p>86. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>9</p>
<p>88. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>89. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>91. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>92. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>7</p>
<p>94. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>7</p>
<p>96. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>97. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	0
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

103. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

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

115.311	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Louisiana Office of Juvenile Justice Policy, C.2.11: Prison Rape Elimination Act dated June 3, 2025 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice Organizational Chart 4. Swanson Center for Youth at Monroe Organizational Chart 5. Swanson Center for Youth at Monroe Pre-Audit Questionnaire (Juvenile Facilities) <p>Reasoning and analysis (by provision): 15.311 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has a written policy mandating zero tolerance toward all forms of sexual</p>

abuse and sexual harassment in facilities it operates directly or under contract. The facility has a policy outlining how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of residents.

Louisiana Office of Juvenile Justice PREA Manual (page 6):

The Office of Juvenile Justice is committed to complying with all provisions of the U.S. Department of Justice (DOJ) "Prison Rape Elimination Act" (PREA) by establishing zero tolerance toward all forms of sexual abuse and sexual harassment and provide for safe practices related to the prevention, detection, reduction, and punishment of all sexual assaults.

The policy outlines the agency's approach to preventing, detecting, and responding to such conduct. The policy, pages 46-49, Appendix A - Definitions, includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment and sanctions for those found to have participated in prohibited behaviors. OJJ policies address prevention of sexual abuse and sexual harassment through appropriate hiring and staffing of facilities, the designation of an agency PREA Coordinator, the designation of facility PREA Compliance Managers, staff supervision, identifying opportunities to separate and monitor sexually aggressive youth and potential victims, housing assignments, criminal background checks, staff training, resident education, PREA posters and educational materials and creating facility cultures that discourage sexual aggression, abuse and harassment. The policies address detection of sexual abuse and sexual harassment through resident education, providing specific treatment for youth with disabilities, providing protections for viewing and searches, staff training, and intake screening for risk of sexual victimization and abusiveness. The policies address responding to sexual abuse and sexual harassment through increasing awareness of safe reporting mechanisms and available services to victims, continuing education of staff and youth, investigations, disciplinary sanctions for residents and staff, victim advocates, access to emergency medical treatment and crisis intervention services, sexual abuse incident reviews, data collection, and data review for corrective action.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.311 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency employs or designates an upper-level, agency-wide PREA coordinator. The PREA coordinator has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards at the facility. The

position of the PREA coordinator is in the agency's organizational structure is PREA coordinator.

Louisiana Office of Juvenile Justice PREA Manual (page 7):
YS shall employ a PREA Coordinator who is responsible for developing, implementing, and overseeing PREA compliance Agency wide.

What was heard, as part of a systematic review of evidence:

Interview with the PREA coordinator:

The PREA Coordinator reported having sufficient time to manage PREA-related responsibilities.

They stated that the Office of Juvenile Justice has three PREA Compliance Managers assigned to secure facilities. Communication with these staff occurs through phone, email, virtual meetings, and in-person interactions.

They further reported that when issues with PREA compliance are identified, the agency initiates a structured corrective action process. This includes annual audits and follow-up reviews, formal notification of deficiencies to facility leadership and Central Office staff, and the issuance of corrective action requests via email. Ongoing monitoring includes monthly follow-up communication with facility leadership and PREA compliance managers, as well as follow-up site visits to verify implementation of corrective measures. If deficiencies persist, central office leadership and department heads are engaged to ensure compliance is achieved.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.311 (c)

What was read, as part of a systematic review of evidence:

The facility has designated a PREA compliance manager. The PREA compliance manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards. The position of the PREA compliance manager in the agency's organizational structure as program consultant. The PREA compliance manager reports to the facility director.

Louisiana Office of Juvenile Justice PREA Manual (page 7):
Each facility shall designate a PREA Compliance Manager who shall be responsible for coordinating the facility's PREA compliance efforts.

What was heard, as part of a systematic review of evidence:

Interview with the PREA compliance manager:

The PREA compliance manager reported having adequate time to manage PREA-related responsibilities.

They stated that facility efforts to comply with PREA standards are coordinated through monitoring daily staffing patterns in the dormitories, reviewing Unusual

	<p>Occurrence Reports (UOR's), conducting dormitory visits, and engaging in conversations with both youth and staff.</p> <p>They further reported that when a compliance issue is identified, the director is notified, and the PREA compliance manager works with the appropriate discipline to address the issue, implement corrective actions, and develop a plan to ensure compliance with PREA standards.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.312	Contracting with other entities for the confinement of residents
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) Contracts <p>Reasoning and analysis (by provision): 115.312 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:</p> <ul style="list-style-type: none"> The agency has entered into or renewed contracts for the confinement of residents since the last PREA audit. All of the above contracts require contractors to adopt and comply with PREA Standards. Since the last PREA audit the number of contracts for the confinement of residents that the agency entered into or renewed with private entities or other government agencies was 17. Of those, zero contracts did not require contractors to adopt and comply with PREA standards. <p>Contracts: OJJ contracts for the confinement of its residents with private agencies or other entities include the following language, "Contractor will comply with the Prison Rape Elimination Act of 2003 (Federal Law 42. U.S.C. 15601 Et. Seq.), and with all applicable PREA Standards, YS Policies related to PREA, and Standards related to PREA for preventing, detecting, monitoring, investigating, and eradicating any form of sexual abuse within YS Facilities/Programs /Offices owned, operated or contracted."</p>

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.312 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- All of the above contracts require the agency to monitor the contractor's compliance with PREA Standards.
- Since the last PREA audit, the number of contracts referenced in §115.312(a) that do not require the agency to monitor contractor compliance with PREA standards is zero.

Contracts:

OJJ contracts for the confinement of its residents with private agencies or other entities include the following language, "Contractor acknowledges that, in addition to "self-monitoring requirements" YS will conduct announced or unannounced, compliance monitoring to include "on-site" monitoring. Failure to comply with PREA, including PREA Standards and YS Policies may result in termination of the contract. Additionally, Contractor will work with the Office of Juvenile Justice PREA Coordinator in scheduling audits in accordance with the agency audit cycle established by OJJ. Failure to pass the audit after any corrective action period will/may result in the cancellation of the contract. Contractor is required to comply with all applicable provisions of the Louisiana Children's Code."

What was heard, as part of a systematic review of evidence:

Interview with the PREA coordinator:

The PREA Coordinator stated new and renewed contracts for confinement services are monitored to determine if the contractor complies with required PREA practices. PREA compliance results have been completed for each contract entered into agreement within the past 12 months. Contract facilities have completed and submitted PREA compliance results.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.313	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Swanson Center for Youth at Monroe 2024 Staffing Plan
4. Swanson Center for Youth at Monroe 2025 Staffing Plan
5. Swanson Center for Youth at Monroe 2026 Staffing Plan
6. Shift reports
7. Supervisory monitoring logs (unannounced rounds)
8. Interview with superintendent
9. Interview with PREA coordinator
10. Interview with PREA compliance manager
11. Interview with intermediate or higher-level facility staff

Reasoning and analysis (by provision):

115.313 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- The agency requires each facility it operates to develop, document, and make 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 residents against abuse.
- Since the last PREA audit, the average daily number of residents was 140. During that period, the average daily number of residents on which the staffing plan was predicated was 178.

Louisiana Office of Juvenile Justice PREA Manual (page 7):

Each facility shall develop, implement, and document a staffing plan that provides for adequate level of staffing, and where applicable, video monitoring, to protect youth against all forms of abuse. In calculating adequate staffing levels and determining the need for video monitoring, facilities shall take into consideration the following:

1. Generally accepted juvenile detention and correctional secure residential 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 youth may be isolated);
6. The composition of the youth population;
7. The number and placement of supervisory staff;
8. Facility programs occurring on a particular shift;
9. Any applicable State or local laws, regulations, or standards;
10. The prevalence of substantiated and unsubstantiated incident of

- sexual abuse;
11. Any other relevant factors.

Review of staffing plan:

The auditor reviewed the Swanson Center for Youth at Monroe 2026 Staffing Plan and observed the plan is inclusive of the standard provision requirements. The evidence shows the facility develops, implements, and documents a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect residents against sexual abuse. The staffing plan is well documented and provides for adequate levels of staffing.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent and PREA compliance manager:

The facility director and PREA compliance manager both stated the facility regularly develops a staffing plan, maintains adequate staffing levels to protect residents against sexual abuse, considers video monitoring as part of the plan, and documents the plan. When assessing staffing levels and the need for video monitoring, the staffing plan considers: generally accepted juvenile detention and correctional/secure residential practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the facility's physical plant (including "blind spots" or areas where staff or residents may be isolated); the composition of the resident population; the number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; the prevalence of substantiated and unsubstantiated incidents of sexual abuse; and any other relevant factors.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Each time the staffing plan is not complied with, the facility documents and justifies all deviations from the staffing plan.

Louisiana Office of Juvenile Justice PREA Manual (page 7):

Facilities shall comply with the staffing plan except during limited, discrete exigent circumstances and shall fully document deviations from the plan during such circumstances. Only Security Staff are applicable in the staff to youth ratios. Deviations from staffing plans shall be fully documented.

Documentation of deviations from staffing plan:

There were no reported deviations.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent:

The facility director stated there has been no instances in which the facility was unable to meet the requirements of the staffing plan.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- The facility is obligated by law, regulation, or judicial consent decree to maintain staffing ratios of a minimum of 1:8 during resident waking hours and 1:16 during resident sleeping hours.
- The facility maintains staff ratios of a minimum of 1:8 during resident waking hours.
- The facility maintains staff ratios of a minimum of 1:16 during resident sleeping hours.
- In the past 12 months, the facility did not deviate from the staffing ratio of 1:8 security staff during resident waking hours.
- In the same period, the facility did not deviate from the staffing ratio of 1:16 during resident sleeping hours.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent:

The facility director stated the ratios are 1:8 during waking hours and 1:16 during sleeping hours.

What was observed as part of a systematic review of evidence:

Site review:

During the site review, the auditor observed that areas where residents were present, including the school, living units, gymnasium, and cafeteria, were in compliance with the required 1:8 and 1:16 staffing ratios.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

At least once every year the agency or facility, in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to:

- The staffing plan;
- Prevailing staffing patterns;
- The deployment of monitoring technology; or
- The allocation of agency or facility resources to commit to the staffing plan to ensure compliance with the staffing plan.

Louisiana Office of Juvenile Justice PREA Manual (page 7):

At least once per year, the agency in consultation with the PREA coordinator, shall assess, determine and document whether adjustments are necessary to the staffing plans and deployment of video monitoring and other monitoring systems for its secure care facilities. Upon completion of the Staffing Plan and attainment of all secure facility signatures, a copy shall be sent to the CO PREA Coordinator.

Annual staffing plan reviews:

The auditor reviewed the annual staffing plan assessments for 2024, 2025, and 2026 and observed that they include the standard provision requirements.

What was heard, as part of a systematic review of evidence:

Interviews with PREA coordinator:

The PREA coordinator stated they are consulted regarding any assessments of, or adjustments to, the staffing plan.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.313 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. The facility documents unannounced rounds. The unannounced rounds cover all shifts. The facility prohibits staff from alerting other staff of the conduct of such rounds.

Louisiana Office of Juvenile Justice PREA Manual (pages 7-8):

YS Policy and facility Standard Operating Procedures (SOPs) shall implement practices requiring intermediate or higher-level supervisors to conduct and document unannounced rounds on all shifts to identify and deter sexual abuse and sexual harassment, pursuant to YS Policy No. C.2.19. Documentation of all unannounced rounds by supervisors shall be documented on the Supervisory Monitoring Log.

YS Policy and Facility SOPs shall prohibit staff from alerting other staff of the occurrence of supervisory rounds unless it is related to legitimate operational functions. Any unusual events or observations made during the performance of an unannounced round must be documented on an Unusual Occurrence Report as

	<p>indicated in YS Policy No. A.1.14 “Unusual Occurrence Report”.</p> <p>Review of documented unannounced rounds: The auditor reviewed documented unannounced rounds for the audit period and observed they occur regularly on all shifts.</p> <p>What was heard, as part of a systematic review of evidence: Interviews with intermediate or higher-level facility staff: The supervisor stated that unannounced rounds are conducted and documented. They also indicated that the timing of the rounds is varied and alternate between the front and back entrances.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.315	Limits to cross-gender viewing and searches
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice Policy, C.2.3: Searches of Youth dated April 4, 2025 3. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 4. Interviews with random sample of staff 5. Interviews with random sample of residents <p>Evidence (corrective action):</p> <ol style="list-style-type: none"> 1. New shower curtain installed (03/31/2026) <p>Reasoning and analysis (by provision): 115.315 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility does not conduct cross-gender strip or cross-gender visual body cavity searches of residents.</p> <p>In the past 12 months there were no cross-gender strip or cross-gender visual body cavity searches of residents.</p>

Louisiana Office of Juvenile Justice PREA Manual (page 8):
Cross-gender strip searches or visual body cavity searches are prohibited except in exigent circumstances or when performed by medical practitioners.

What was observed as part of a systematic review of evidence:

The auditor observed the search area is not under video surveillance and doesn't allow for cross-gender viewing. Staff explained the searches process and confirmed that searches are completed by staff of the same gender as the resident being searched.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The facility does not permit cross-gender pat-down searches of residents, absent exigent circumstances.

In the past 12 months there were no cross-gender pat-down searches of residents.

Louisiana Office of Juvenile Justice PREA Manual (page 8):
Cross-gender pat-down searches are prohibited unless exigent circumstances are present and shall be justified and documented on a UOR when they occur.

Review of logs of cross-gender pat down searches of residents to identify documentation of exigent circumstances:

The auditor observed no documented cross-gender searches.

What was heard, as part of a systematic review of evidence:

Interviews with 16 random residents:

All 16 residents interviewed stated no staff of the opposite gender have performed a pat-down search of their body.

Interviews with 12 random staff:

All 12 staff interviewed stated they are restricted from conducting cross-gender pat-down searches. No staff interviewed provided an example of a circumstance that would warrant such a search other than an emergency.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Facility policy requires that all cross-gender strip searches, cross-gender visual body

cavity searches, and cross-gender pat-down searches be documented and justified.

Louisiana Office of Juvenile Justice PREA Manual (page 8):

Pursuant to YS Policy Nos. B.2.20 and C.2.3, when cross-gender searches occur they must be justified and documented on an Unusual Occurrence Report (UOR) by the employee conducting the search and a witness to the search.

Review of documentation, including justification, of cross-gender strip searches, cross-gender visual body cavity searches, and all cross-gender pat-down searches of residents:

The auditor observed no documented cross-gender searches.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.315 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility has implemented policies and procedures that enable residents to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering a resident housing unit or area where residents are likely to be showering, performing bodily functions, or changing clothing.

Louisiana Office of Juvenile Justice PREA Manual (page 8):

YS policies and secure care facility SOPs shall be implemented that enable youths to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing private body parts except in exigent circumstances or when such viewing is incidental to routine cell checks.

YS policies, facility SOPs and contract facility SOPs shall provide procedures for cross-gender staff announcing their entrance into housing areas

What was heard, as part of a systematic review of evidence:

Interviews with 16 random residents:

All 16 residents interviewed stated that staff of the opposite gender consistently announce their presence when entering housing units that house residents of the opposite gender, and that they are able to dress, shower, and perform bodily functions without being viewed by staff of the opposite gender.

Interviews with 12 random staff:

All 12 staff interviewed stated that they or other officers announce their presence when entering housing units that house residents of the opposite gender. They further stated that residents are able to dress, shower, and use the toilet without

	<p>being viewed by staff of the opposite gender.</p> <p>What was observed as part of a systematic review of evidence:</p> <p>Site review: The auditor observed residents shower and change clothing in individual showers equipped with curtains for privacy, while other showers are located behind doors. The shower curtain in Holly D Dorm did not close properly; however, it was replaced during the corrective action period. The facility provided a photograph of the newly installed shower curtain on March 31, 2026. Lastly, the auditor observed that cross-gender announcements were being made.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.</p> <p>A new shower curtain was installed in Holly D Dorm on March 31, 2026.</p> <p>Reasoning and analysis (by provision): 115.315 (e) N/A</p> <p>Reasoning and analysis (by provision): 115.315 (f) N/A</p>
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115.316	Residents with disabilities and residents who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice Policy, B.8.5: Language Assistance Services dated May 7, 2024 3. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 4. Memorandum of Understanding between the Louisiana Office of Juvenile Justice and 1-World Language LLC 5. Louisiana Office of Juvenile Justice Youth PREA Orientation PowerPoint 6. Louisiana Office of Juvenile Justice “Youth Safety Guide” pamphlet 7. “No Means No” poster 8. “Break the Silence” poster 9. Systems test: access to interpreter 10. Interview with agency head 11. Interviews with random sample of staff

12. Interviews with residents (with disabilities or who are limited English proficient)

Reasoning and analysis (by provision):

115.316 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency has established procedures to provide disabled residents 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.

Louisiana Office of Juvenile Justice PREA Manual (page 9):

Youth with disabilities shall have an equal opportunity to participate in and benefit from all aspects of YS's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. When necessary, to ensure effective communication, youth with hearing deficits shall be provided an interpreter. Written materials shall be provided in a format which ensures effective communication with youth with disabilities. YS is not mandated to take steps which would result in a fundamental alteration in a service program or activity or in undue financial and administrative burdens in accordance with Title II of the American with Disabilities Act (ADA).

What was observed as part of a systematic review of evidence:

Site review discussions and observations:

The facility has procedures to provide disabled residents 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 procedures include providing services to residents who: are deaf or hard of hearing; are blind or have low vision; have intellectual disabilities; have psychiatric disabilities; have sensory disabilities; or have physical disabilities.

The auditor observed that PREA orientation is conducted individually with each resident. Residents with low vision, intellectual disabilities, psychiatric disabilities, or limited reading skills receive the information verbally in a manner that promotes comprehension. Staff ensure that residents with speech disabilities are able to demonstrate their understanding of the PREA material. Special education teachers and mental health staff are available, as needed, to provide additional support and accommodations. Additionally, the agency maintains a contract with the Louisiana Special School District to provide special education and related services. The "End the Silence" poster is also available in Braille.

What was heard, as part of a systematic review of evidence:

Interview with agency head:

The Deputy Secretary stated the agency has established procedures to provide disabled residents 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.

Interviews with residents (with disabilities or who are limited English proficient):

Four residents with psychiatric disabilities were interviewed during the onsite phase of the audit. These residents reported that they did not require assistance.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.316 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency has established procedures to provide residents 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.

Louisiana Office of Juvenile Justice PREA Manual (page 9):

Youth who are limited English proficient shall have meaningful access to all aspects of YS' efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

What was heard, as part of a systematic review of evidence:

Interviews with residents who are limited English proficient:

No residents were identified as limited English proficient during the onsite phase of the audit.

What was observed as part of a systematic review of evidence:

Systems test of interpreter services:

The treatment program director successfully demonstrated the facility's ability to provide interpreter services through 1-World Language by calling the language service, entering the required PIN, selecting Spanish, and entering the JETS number to obtain access to a qualified interpreter.

Site review:

The auditor further observed the Youth PREA Orientation PowerPoint, "Youth Safety Guide" pamphlet, "Break the Silence" poster, and "No Means No" poster are available in both English and Spanish.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.316 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- Agency policy prohibits use of resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an

extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations.

- The agency or facility documents the limited circumstances in individual cases where resident interpreters, readers, or other types of resident assistants are used.
- In the past 12 months, there were zero instances in which resident interpreters, readers, or other types of resident assistants were used when an extended delay in obtaining another interpreter would not have compromised resident safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations.

Louisiana Office of Juvenile Justice PREA Manual (page 9):

Youth interpreters, readers or assistants shall not be relied upon except where an extended delay in obtaining an effective interpreter could compromise a youth's safety, the performance of first-responder duties under US DOJ PREA Standard 115.364, or the investigation of the youth's allegations. Translation services will be provided through outside contractors and resources.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

No staff interviewed had any knowledge of resident interpreters, resident readers, or any other types of resident assistants being used in relation to allegations of sexual abuse or sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.317	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Criminal background records checks capture system: Automated Fingerprint Identification System (AFIS) 4. Louisiana Office of Juvenile Justice PREA Questionnaires for New Staff and Contractors form 5. Louisiana Office of Juvenile Justice Criminal Record Check Requests

6. Louisiana Department of Children and Family Services State Central Registry Disclosures
7. Louisiana Office of Juvenile Justice PREA Reference Checks form
8. Louisiana Office of Juvenile Justice PREA Questionnaires
9. Interview with administrative (human resources) staff

Reasoning and analysis (by provision):

115.317 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy prohibits hiring or promoting anyone who may have contact with residents, and prohibits enlisting the services of any contractor who may have contact with residents, 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 paragraph (a)(2) of this section.

Louisiana Office of Juvenile Justice PREA Manual (page 9):

1. Job applicants and contractors shall NOT be hired, or services contracted for if the applicant/contractor has:
2. Engaged in sexual abuse in a prison, jail, lockup, community confinement facility or juvenile facility or other institution as defined in federal law. (42 USC 1997)
3. Been convicted of engaging or attempting to engage in sexual activity in the community using force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or
4. Been civilly or administratively adjudicated to have engaged in any activity described in subparagraph b. above.

Review of files of personnel files:

The auditor reviewed the PREA Questionnaires for New Staff and Contractors for the staff interviewed and observed that the facility asks the three required PREA questions regarding prior misconduct at the time of hire.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff:

The human resources staff stated the facility asks all applicants and employees

about previous misconduct when hiring new employees.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy requires the consideration of 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 residents.

Louisiana Office of Juvenile Justice PREA Manual (page 10):

The agency shall consider any incidents of sexual harassment in determining whether to hire anyone, or to enlist the services of any contractor, who may have contact with inmates. The agency shall ask all applicants and employees who may have contact with inmates directly about previous misconduct described above in written applications or interviews for hiring. (28 CFR § 115.17)

Document review:

The auditor observed the PREA Questionnaire for New Staff and Contractors includes consideration of incidents of sexual harassment.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff:

The human resources staff stated the facility considers prior 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 the residents.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy requires that before it hires any new employees who may have contact with residents, it (a) conducts criminal background record checks, (b) consults any child abuse registry maintained by the State or locality in which the employee would work; and (c) consistent with Federal, State, and local law, makes 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.

During the past 12 months, 123 persons hired who may have contact with residents received criminal background record checks, representing 100% of such hires.

Louisiana Office of Juvenile Justice PREA Manual (page 10):
Prior to hiring new employees, the following checks shall occur:

1. The Unit's HR Liaison shall perform a criminal background check pursuant to YS Policy No. A.2.18;
2. DPS HR will send a list of newly hired OJJ employees to DCFS on the first and the fifteenth of each month for the purpose of conducting Child Abuse Registry checks. Should the designated date fall on a non-working day, the list will be sent on the closest regularly scheduled work day immediately preceding the designated send date. In the event a violation OJJ will be immediately notified, otherwise a quarterly review of submissions will be sent to the Undersecretary, Deputy Undersecretary or designee(s) of the results for record keeping and auditing purposes;
3. Notification of hire must be received in HR no later than 12pm on the last working day prior to the list being sent to DCFS for screening. Should notification be received in HR of a pending new hire after this deadline, or the number of allowable submissions to DCFS have been exceeded, that applicant will be added to a future submission; and
4. Consistent with law, PSS/HR shall additionally use their best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or resignation during a pending investigation of allegation of sexual abuse. (28 CFR § 115.17)

Review of files of personnel files:

The auditor reviewed the Louisiana Office of Juvenile Justice Criminal Record Check Requests for the staff interviewed and found that the initial criminal background record checks were completed in accordance with the requirements of the standard.

The auditor reviewed the Louisiana Department of Children and Family Services State Central Registry Disclosures for the interviewed staff and observed that these checks were conducted consistent with standard provisions.

The auditor reviewed the Louisiana Office of Juvenile Justice PREA Reference Checks form and observed that it contains questions consistent with standard requirements for obtaining information regarding substantiated allegations of sexual abuse or resignations during a pending investigation of an allegation of sexual abuse. The auditor reviewed nine applicable examples for employees interviewed who had prior institutional employment and observed that the agency is following the standard provision requirement.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff:

The human resources staff stated the agency performs criminal background record checks and considers pertinent civil or administrative adjudications for all newly hired employees who may have contact with the residents and all employees, who

may have contact with residents who are being considered for promotions. They also confirmed the facility consults with the Louisiana Department of Children and Family Services State Central Registry.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency policy requires that a criminal background records check be completed, and applicable child abuse registries consulted before enlisting the services of any contractor who may have contact with residents.

During the past 12 months, criminal background record checks were conducted on all staff covered in 3 contracts for services who might have contact with residents, representing 75% of such contracts.

Records of background checks of contractors who might have contact with residents:

The auditor reviewed background check records for contractors who may have contact with residents, including contracted medical and mental health staff who were interviewed, as well as additional contractors randomly selected from a roster. The auditor observed that these checks were completed in accordance with the requirements of the standard.

The auditor reviewed Louisiana Department of Children and Family Services State Central Registry clearances for the same contracted staff and observed that the clearances were completed in accordance with the standard's requirements.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff:

The human resources staff stated the facility performs criminal background record checks and considers pertinent civil or administrative adjudications for all contractors who may have contact with the residents and all contractors, who may have contact with residents who are being considered for promotions. Additionally, the facility consults with the Louisiana Department of Children and Family Services State Central Registry.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy requires that either criminal background records checks be conducted at least every five years of current employees and contractors who may have contact with residents or that a system is in place for otherwise capturing such information for current employees.

The PREA Coordinator provided a statement dated November 12, 2025, that includes a detailed description of the background check monitoring system. An initial criminal background check is completed for all staff, and individuals are entered into the Automated Fingerprint Identification System (AFIS). AFIS is a computerized system used by law enforcement and government agencies to store and compare fingerprint data, allowing for the identification and verification of individuals through digital fingerprint records. Once staff are entered into AFIS, an automatic notification process known as 'Rap Back' is initiated. The Rap Back Service provides continuous monitoring of an individual's criminal history following the initial background check. Notifications are received by the Department of Public Safety (DPS) and forwarded to the Office of Juvenile Justice. Through this system, staff, contractors, and other applicable individuals are subject to ongoing criminal history monitoring to ensure continued compliance with background check requirements.

What was heard, as part of a systematic review of evidence:

Interview with administrative (human resources) staff:

The PREA coordinator stated the agency has in place a system that alerts agency staff of an arrest.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.317 (f)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 10):

Job applicants and employees shall be asked directly about previous misconduct described in Section II.F.1.a - c above in written applications, interviews for hiring or promotions, and in any interviews or written self-evaluations conducted as part of reviews of current employees.

Review of employe records:

The auditor reviewed Louisiana Office of Juvenile Justice PREA Questionnaires for the staff interviewed and observed the facility asks all applicants and employees who may have contact with residents about prior misconduct during the hiring and promotion process, as well as through written self-evaluations and interviews conducted for current employees.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

	<p>Reasoning and analysis (by provision): 115.317 (g) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 9): Employees have a continuing duty to disclose any such misconduct; material omissions or providing materially false information shall be grounds for termination.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.317 (h) What was read, as part of a systematic review of evidence: Louisiana Office of Juvenile Justice PREA Manual (page 10): Employees designated to respond to requests from an institutional employer for whom a former employee has applied to work, shall provide information on substantiated allegations of sexual abuse or sexual harassment involving the former employee.</p> <p>What was heard, as part of a systematic review of evidence: Interview with administrative (human resources) staff: The human resources staff stated the agency would 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.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.318	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Summary of Swanson Center for Youth at Monroe design and expansion

3. Summary of Swanson Center for Youth diagram with camera locations
4. Interview with agency head
5. Interview with superintendent
6. Site review

Reasoning and analysis (by provision):

115.318 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency or facility has acquired a new facility or made a substantial expansion or modification to existing facilities since the last PREA audit.

Louisiana Office of Juvenile Justice PREA Manual (page 11):

All designing, acquiring, renovations, additions, and new construction shall be of a design that facilitates direct contact between youth and staff, while considering the agency's ability to protect youth from sexual abuse.

Summary of Swanson Center for Youth at Monroe design and expansion summary:

The agency constructed an expansion to the Swanson Center for Youth at Monroe within the past three years. The PREA Coordinator provided a summary describing how, in planning and implementing the substantial expansion, the agency considered the effect of the expansion on its ability to protect residents from sexual abuse, consistent with the standard provision. The summary reflected that resident sexual safety was considered in the design and implementation of the expansion, including supervision and other operational features intended to enhance protection from sexual abuse.

What was heard, as part of a systematic review of evidence:

Interviews with the agency head and superintendent:

The deputy secretary and facility director both stated the facility considers the ability to protect residents from sexual abuse when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities. Also, the agency considers the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect residents from sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.318 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency or facility has installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.

Summary of Swanson Center for Youth diagram with camera locations:

The facility provided a diagram of the expansion to the Swanson Center for Youth

	<p>identifying camera locations throughout the expanded area. The documentation demonstrated that, consistent with the standard provision, when installing or updating video monitoring, electronic surveillance, or other monitoring technology, the agency considered how the placement of cameras and related monitoring technology would enhance its ability to protect residents from sexual abuse.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 11): When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect youth from sexual abuse.</p> <p>What was heard, as part of a systematic review of evidence: Interviews with the agency head and superintendent: The deputy secretary and facility director both stated that when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency considers how such technology may enhance the agency's ability to protect residents from sexual abuse.</p> <p>What was observed as part of a systematic review of evidence: Site review: The auditor observed the video monitoring system and noted that cameras are located throughout the facility.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.321	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Laws Revised Statutes Title 13 - Courts and Judicial Procedure §13:5713. Duties; autopsies and investigations 4. National Protocol for Sexual Assault Medical Forensic Examinations dated 09/2024 5. Memorandum of agreement between Louisiana Office of Juvenile Justice and the Wellspring Alliance for Families dated January 16, 2025 6. Interview with PREA compliance manager 7. Interviews with a random sample of staff

8. Interviews with residents who reported a sexual abuse

Reasoning and analysis (by provision):

115.321 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The Louisiana Office of Juvenile Justice Department of Investigative Services (IS) is responsible for administrative and criminal investigations of allegations of sexual abuse.

When conducting a sexual abuse investigation, the investigators follow a uniform evidence protocol.

Review of uniform evidence protocol:

The auditor reviewed the National Protocol for Sexual Assault Medical Forensic Examinations dated 09/2024 and observed investigators follow a uniform evidence protocol.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff interviewed stated they are knowledgeable of the agency's protocol for obtaining usable physical evidence if a resident alleges sexual abuse. They also stated that Investigative Services is responsible for conducting sexual abuse investigations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The protocol is developmentally appropriate for youth. The protocol was adapted from or otherwise based on the most recent edition of the DOJ's Office on Violence Against Women publication, 'A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents,' or similarly comprehensive and authoritative protocols developed after 2011.

Louisiana Office of Juvenile Justice PREA Manual (page 11):

Investigative Services (IS) shall follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions, pursuant to YS Policy Nos. A.1.4 and C.4.6.

The protocol shall be developmentally appropriate for youth and as appropriate, shall be adapted from or otherwise based on the most recent edition of the U.S. DOJ's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly

comprehensive and authoritative protocols developed after 2011.

Review of uniform evidence protocol:

The auditor reviewed the National Protocol for Sexual Assault Medical Forensic Examinations dated 09/2024 and observed the protocol is developmentally appropriate for youth.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility offers all residents who experience sexual abuse access to forensic medical examinations. Forensic medical examinations are offered without financial cost to the victim. Where possible, examinations are conducted by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs). When SANEs or SAFEs are not available, a qualified medical practitioner performs forensic medical examinations.

In the past 12 months, no forensic medical examinations were conducted at the facility. Accordingly, zero exams were performed by SANEs/SAFEs and zero exams were performed by a qualified medical practitioner. The auditor noted that the PAQ incorrectly reported six forensic medical exams during the audit period.

Louisiana Office of Juvenile Justice PREA Manual (pages 11-12):

Youth who experience sexual abuse shall have access to forensic medical examinations, without financial cost where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible.

If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The CHP shall document its efforts to provide SAFEs or SANEs and forward that documentation to the youth's Case Manager for entry into JETS.

Louisiana Laws Revised Statutes Title 13 - Courts and Judicial Procedure §13:5713. Duties; autopsies and investigations the coroner or his designee shall examine all alleged victims of a sexually-oriented criminal offense. The coroner may select the hospital or healthcare provider named as the lead entity for sexual assault examinations in the regional plan required by R.S.40:1216.1 as his designee to perform the forensic medical examination.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility makes a victim advocate from a rape crisis center available to the victim, in person or by other means. These efforts are documented. If and when a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff member from a community-based organization or a qualified agency staff member.

Louisiana Office of Juvenile Justice PREA Manual (page 10):

Every attempt shall be made to make a victim advocate from a rape crisis center available to the victim. If a rape crisis center is not available to provide victim advocate services, a qualified staff member from a community-based organization or a qualified Agency staff member shall be made available to provide these services.

Efforts to secure services from rape crisis centers shall be documented by the CHP. A rape crisis center that is part of a governmental unit may be utilized as long as the center is not part of the criminal justice system (such as a law enforcement Agency), and offers a comparable level of confidentiality as a nongovernmental entity that provides similar victim services. Documented efforts shall be forwarded by the CHP to the youth's Case Manager for entry into JETS.

Review of memorandum of agreement between Louisiana Office of Juvenile Justice and the Wellspring Alliance for Families dated January 16, 2025:

The auditor reviewed the memorandum of understanding and observed that the agreement provides for a victim advocate to be made available to victims of sexual abuse.

What was heard, as part of a systematic review of evidence:

Interview with PREA compliance manager:

The PREA compliance manager stated the facility makes a qualified victim advocate available from the Wellspring Alliance for Families.

Interviews with residents who reported a sexual abuse:

Three residents present during the onsite phase of the audit reported sexual abuse. When asked whether the facility allowed them to contact anyone after making the report, the residents indicated that such contact was not needed.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

If requested by the victim, a victim advocate, or qualified agency staff member, or

qualified community-based organization staff member accompanies and supports the victim through the forensic medical examination process and investigatory interviews and provides emotional support, crisis intervention, information, and referrals.

What was heard, as part of a systematic review of evidence:

Interview with PREA compliance manager:

The PREA compliance manager stated if requested by the victim, a victim advocate from the Wellspring Alliance for Families will accompany a victim and provide emotional support, crisis intervention, information, and referrals during the forensic medical examination process and investigatory interviews.

Interviews with residents who reported a sexual abuse:

See 115.321 (d).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.321 (f)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The Louisiana Office of Juvenile Justice Department of Investigative Services (IS) is responsible for administrative and criminal investigating allegations of sexual abuse and does not rely on another agency to conduct these investigations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.322	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Evidence relied upon in making the compliance determinations: <ol style="list-style-type: none">1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)2. Louisiana Office of Juvenile Justice Policy, A.1.4: Investigative Services dated February 1, 20243. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 20254. Interview with agency head Reasoning and analysis (by provision):

115.322 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment.

In the past 12 months, the facility received 18 allegations of sexual abuse and sexual harassment. All 18 allegations resulted in an administrative investigation, and none were referred for criminal investigation. The PAQ incorrectly stated 18.

Louisiana Office of Juvenile Justice PREA Manual (page 13):
An administrative or criminal investigation shall be completed for all allegations of sexual abuse and sexual harassment pursuant to YS Policy No. A.1.4.

Review of documentation of reports of sexual abuse and harassment and documentation of investigations, including full investigative reports with findings:
The auditor reviewed 18 completed investigative reports with findings. These included two unfounded and five unsubstantiated allegations, as well as one substantiated allegation, of resident-on-resident sexual abuse; eight unsubstantiated allegations of resident-on-resident sexual harassment; and two unfounded allegations of staff-on-resident sexual abuse.

What was heard, as part of a systematic review of evidence:

Interview with agency head:
The deputy secretary stated the agency ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.322 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency has a policy that requires that allegations of sexual abuse or sexual harassment be referred for investigation to an agency with the legal authority to conduct criminal investigations, including the agency if it conducts its own investigations, unless the allegation does not involve potentially criminal behavior.

Louisiana Office of Juvenile Justice PREA Manual (page 13):
Allegations of sexual abuse or sexual harassment shall be referred to IS for investigation. The IS policy shall be published on the Office of Juvenile Justice (OJJ) website at <http://www.ojj.la.gov/>.

Review of policy published on the agency's website:
Louisiana Office of Juvenile Justice Policy, A.1.4: Investigative Services dated February 1, 2024 is published on the OJJ website under the URL <https://ojj.la.gov/page/policies>. The Louisiana Office of Juvenile Justice Department of Investigative

	<p>Services has the legal authority to conduct criminal investigations.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.322 (c) What was read, as part of a systematic review of evidence: Review of policy published on the agency’s website: The publication states the Louisiana Office of Juvenile Department of Investigative Services (IS) is responsible for administrative and criminal investigations of allegations of sexual abuse.</p> <p>Review of documentation of referrals of allegations of sexual abuse and sexual harassment: See 115.322 (a).</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.331	Employee training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice PREA Training Curriculum 4. Louisiana Office of Juvenile Justice PREA Class Attendance Roster 5. Staff Confirmation of Receipt of PREA forms 6. Interviews with random sample of staff <p>Reasoning and analysis (by provision): 115.331 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency trains all employees who may have contact with residents on the ten required topics.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 14): Prior to having contact with youth, all staff shall be trained on how to recognize the</p>

signs of injurious sexual conduct, and understand their responsibility in the detection, prevention, investigation, and reporting of sexual abuse and sexual harassment during new employee orientation and annual in-service training. Training topics shall consist of, but not be limited to, the following:

1. The policy of zero-tolerance for sexual abuse and sexual harassment;
2. Fulfilling their responsibilities regarding sexual abuse and sexual harassment prevention, detection and reporting, including relevant laws related to mandatory reporting of sexual abuse to outside authorities;
3. Youths' right to be free from sexual abuse and sexual harassment;
4. Youths' and employees' right to be free from retaliation for reporting sexual abuse and sexual harassment;
5. The dynamics of sexual abuse and sexual harassment in juvenile facilities;
6. Common reactions of juvenile victims of sexual abuse and sexual harassment, including isolation, depression, etc.;
7. Detecting and responding to signs of threatened and actual sexual abuse; sexually aggressive behavior and how to distinguish between consensual sexual contact and sexual abuse between youth;
8. Avoiding inappropriate relationships with youth;
9. Communicating effectively and professionally with youth, including those who are lesbian, gay, bisexual, transgender, intersex, questioning (LGBTIQ), or gender nonconforming;
10. Relevant laws regarding the applicable age of consent; and
11. Awareness and enforcing of policies and procedures regarding sexual conduct of youth

Review of training curriculum:

The auditor reviewed the Louisiana Office of Juvenile Justice PREA Training Curriculum and observed the curriculum includes all of the topics required by the standard provision.

Review of staff training records:

The auditor reviewed 17 Staff Confirmation of Receipts of PREA for 2025 for staff interviewed.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff interviewed stated they receive training annually.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Training is tailored to the unique needs and attributes and gender of the residents at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training.

Louisiana Office of Juvenile Justice PREA Manual (page 15):
Training shall be tailored to the unique needs and attributes of youth of juvenile facilities and to the gender of the youth at the employee's facility. The employee shall receive additional training if the employee is reassigned from a facility that houses only male youths to a facility that houses only female youths, or vice versa.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Between trainings the agency provides employees who may have contact with residents with refresher information about current policies regarding sexual abuse and harassment. The frequency with which employees who may have contact with residents receive refresher training on PREA requirements: Annually

Louisiana Office of Juvenile Justice PREA Manual (page 15):
All current employees shall be provided with annual refresher training on current sexual abuse and sexual harassment policies and procedures pursuant to YS Policy No. A.2.24.

Review of staff training records:
See 115.331 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.331 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency documents that employees who may have contact with residents understand the training they have received through employee signature or electronic verification.

Louisiana Office of Juvenile Justice PREA Manual (page 15):
Employee attendance and understanding of the training provided shall be documented, through employee signature on the "Staff Confirmation of Receipt" [see Attachment C.2.11 (b)], as well as entry into the "Training Records Entry Database" (TREC) pursuant to YS Policy No. A.2.24. Signed receipts shall be

	<p>forwarded to PSS/HR to be filed in the employee’s personnel file.</p> <p>Review of staff training records: See 115.331 (a). Training is documented with staff signature.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.332	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Contract Provider/Volunteer Confirmation of Receipt of PREA form 4. Online PREA Course Acknowledgements 5. Receipt of specialized training for medical and mental health care practitioners. 6. Interviews with volunteers or contractors who have contact with residents <p>Reasoning and analysis (by provision): 115.332 (a)</p> <p>What was read, as part of a systematic review of evidence:</p> <p>Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: All volunteers and contractors who have contact with residents have been trained on their responsibilities under the agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.</p> <p>The number of volunteers and contractors, who have contact with residents, who have been trained in agency’s policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response: 57</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 15): Volunteers and contractors who have contact with youths shall be trained on their responsibilities under the Agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with youth, but all volunteers and contractors who have contact with youth shall be notified of the Agency’s zero- tolerance policy regarding sexual abuse and sexual harassment and informed how to report such</p>

incidents.

Review of training records of volunteers and contractors:

The auditor reviewed Confirmation of Receipt of PREA forms for seven contractors and four volunteers selected from rosters, including individuals interviewed, and observed that each had received PREA training.

What was heard, as part of a systematic review of evidence:

Interviews with volunteers or contractors who have contact with residents:

The auditor interviewed two contracted medical and mental health staff and two volunteers. All four individuals stated that they had been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and sexual harassment prevention, detection, and response.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.332 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents, but all volunteers and contractors who have contact with residents shall be notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

Louisiana Office of Juvenile Justice PREA Manual (page 15):

The level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with youth.

Review of training records of volunteers and contractors:

Additionally, the auditor reviewed documentation reflecting receipt of the specialized training topics, as well as Confirmation of Receipt of PREA forms covering the Standard 115.331 training topics for seven contracted medical and mental health staff.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.332 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency maintains documentation confirming that volunteers and contractors understand the training they have received.

	<p>Louisiana Office of Juvenile Justice PREA Manual (page 11): The PREA Compliance Manager shall maintain documentation confirming the volunteers/interns/contractors understand the zero-tolerance policy training they received.</p> <p>Review of training records of volunteers and contractors: See 115.332 (a). Staff sign the Contract Provider/Volunteer Confirmation of Receipt of PREA form to acknowledge receipt and understanding of the training.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.333	Resident education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice Policy, B.8.5: Language Assistance Services dated May 7, 2024 3. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 4. Memorandum of Understanding between the Louisiana Office of Juvenile Justice and 1-World Language LLC 5. Louisiana Office of Juvenile Justice Youth PREA Orientation PowerPoint 6. Louisiana Office of Juvenile Justice Youth Safety Guide pamphlet 7. "No Means No" poster 8. Break the Silence Poster 9. Youth Confirmation of Receipt of PREA forms 10. Interview with intake staff 11. Interviews with random sample of residents <p>Evidence (Corrective Action):</p> <ol style="list-style-type: none"> 1. Staff Training Attendance Roster (03/26/2026) 2. Youth Confirmation of Receipt of PREA forms (03/31/2026) 3. Magnolia dorm corrected signage (03/31/2026) <p>Reasoning and analysis (by provision): 115.333 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:</p>

Residents receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. This information is provided in an age-appropriate fashion.

Of the residents admitted during the past 12 months, 120 were provided this information at intake.

Louisiana Office of Juvenile Justice PREA Manual (page 18):

Upon admission to a YS secure care or contracted facility, youth shall receive: Information in an age appropriate fashion explaining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment.

Review of intake records of residents:

The auditor reviewed 10 Youth Confirmation of Receipt of PREA forms for residents interviewed. The forms indicate all of the residents interviewed received the information at intake.

What was observed as part of a systematic review of evidence:

Process Observation:

The social services counselor demonstrated the intake process. During intake, residents sign the Youth Confirmation of Receipt of PREA form to document receipt of required PREA information. Residents are also provided a copy of the Youth Safety Guide pamphlet, which includes information regarding the agency's zero-tolerance policy for sexual abuse and sexual harassment, as well as instructions on how to report incidents or suspicions.

The demonstration revealed that the social services counselor was not reviewing the Youth PREA Orientation PowerPoint with each resident. The PowerPoint includes information on basic rules, maintaining healthy relationships, safety, personal responsibility, reporting options, the grievance system, steps taken if a sexual assault occurs, follow-up care, false allegations, disciplinary sanctions, sexually transmitted diseases, and facts related to sexual abuse.

Through corrective action, facility staff completed the Swanson Center for Youth PREA Intake for Youth Training on March 25, 2026. The training was conducted by the agency PREA Coordinator and addressed the youth intake process, including the provision of PREA-related information to residents in a manner they can understand.

The curriculum included Youth Intake PowerPoints in English and Spanish; youth posters in English and Spanish; pamphlets in English and Spanish; information regarding reporting services through Investigative Services and the Louisiana Ombudsman; information regarding support services through Wellspring; and Youth Confirmation of Receipt forms. This training was provided to reinstate use of the PowerPoint, strengthen staff understanding of intake education requirements, clarify available reporting avenues and outside support services, and reinforce documentation expectations.

Additionally, all current residents were educated using the full PREA curriculum, and

Youth Confirmation of Receipt of PREA forms were provided for review on March 31, 2026.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

See 115.333 (a) Process observation.

Reasoning and analysis (by provision):

115.333 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Of the residents admitted during the past 12 months, 120 received such education within 10 days of intake.

Louisiana Office of Juvenile Justice PREA Manual (page 18):
Within two (2) days, but no more than ten (10) days of direct admission, comprehensive age-appropriate education shall be provided to youth by showing the OJJ designed PowerPoint presentation regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and Agency policies and procedures for responding to such incidents pursuant to YS Policy No. B.2.3. The PowerPoint presentation shall include information to teach youth how to:

1. Avoid risky situations related to sexual assault;
2. Safely report rape or sexually inappropriate behavior;
3. Obtain counseling services and/or medical assistance if victimized;
and
4. Evaluate the risks and potential consequences for engaging in any type of sexual contact while in the facility.

Review of education materials:

Refer to 115.333 (a). Process Observation

What was heard, as part of a systematic review of evidence:

Interviews with 21 random residents:

All 21 residents interviewed stated they were told about their right not to be sexually abused and sexually harassed, how to report sexual abuse or sexual harassment, and their right not to be punished for reporting sexual abuse or sexual harassment. They stated they received PREA education upon admission to the facility, during intake.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Refer to 115.333 (a). Process Observation

Reasoning and analysis (by provision):

115.333 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
All residents were educated within 10 days of intake.

Louisiana Office of Juvenile Justice PREA Manual (page 18):

Upon transfer to a different facility, youth shall be briefed on the same information required by provision (b) within the same time parameters.

What was heard, as part of a systematic review of evidence:

Interview with intake staff:

The social services counselor stated residents have been educated on the agency's zero-tolerance policy on sexual abuse and sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.333 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency shall provide resident education in formats accessible to all residents, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to residents who have limited reading skills.

Louisiana Office of Juvenile Justice PREA Manual (page 18):

The Agency shall provide youth education in formats accessible to all youth, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to youths who have limited reading skills.

What was observed as part of a systematic review of evidence:

Site review:

The facility has procedures to provide disabled residents 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 procedures include providing services to residents who: are deaf or hard of hearing; are blind or have low vision; have intellectual disabilities; have psychiatric disabilities; have sensory disabilities; or have physical disabilities.

The auditor observed that PREA orientation is conducted individually with each resident. Residents with low vision, intellectual disabilities, psychiatric disabilities, or limited reading skills receive the information verbally in a manner that promotes comprehension. Staff also ensure that residents with speech disabilities are able to demonstrate their understanding of the PREA material. Special education teachers and mental health staff are available, as needed, to provide additional support and accommodations. Additionally, the agency has a contract with the Louisiana Special School District to provide special education and related services.

The auditor further observed that the facility has access to interpreter services through a memorandum of understanding with the Louisiana Office of Juvenile Justice and 1-World Language. The Youth PREA Orientation PowerPoint, "Youth Safety Guide" pamphlet, "Break the Silence" poster, and "No Means No" poster are available in both English and Spanish.

Systems test of interpreter services:

The treatment program director successfully demonstrated the facility's ability to provide interpreter services through 1-World Language by calling the language service, entering the required PIN, selecting Spanish, and entering the JETS number to obtain access to a qualified interpreter.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.333 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency maintains documentation of resident participation in PREA education sessions.

Louisiana Office of Juvenile Justice PREA Manual (page 19):

The agency shall maintain documentation of a youth's participation in these education sessions. Secure care staff shall ensure the youth signs a "Youth Confirmation of Receipt" during the orientation/admission process, and files it in the youth's hard copy Master Record under Clip VIII. Secure care staff shall ensure youth signs a "Youth Confirmation of Receipt" form again upon transfer to a different facility as indicated in Section V.A.4.

Review of documentation of resident participation in education sessions:

The auditor reviewed resident participation in intake education is documented with the Youth Confirmation of Receipt of PREA form.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.333 (f)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, resident handbooks, or other written formats.

Louisiana Office of Juvenile Justice PREA Manual (page 19):

In addition to providing education sessions, the facility will ensure that key

	<p>information is continuously and readily available or visible to youth through posters, student rule books, or other written formats.</p> <p>What was observed as part of a systematic review of evidence:</p> <p>Site review:</p> <p>The auditor observed that residents are provided the Youth Safety Guide pamphlet in both English and Spanish. The pamphlet includes information regarding the agency’s zero-tolerance policy for sexual abuse and sexual harassment, as well as instructions for reporting incidents or suspicions.</p> <p>The auditor also observed that the “Break the Silence” and “No Means No” posters are consistent, accessible to residents, and posted in close proximity to resident telephones. The “No Means No” posters are available in both English and Spanish. Signage throughout the facility is provided in both English and Spanish, with the exception of Magnolia Dorm, which was corrected through corrective action on March 31, 2026.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.</p> <p>The agency provided a photograph of the corrected signage in Magnolia Dorm on March 31, 2026.</p>
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115.334	Specialized training: Investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Staff Confirmation of Receipt of PREA 4. National Institute of Corrections Certificate for PREA: Investigating Sexual Abuse in a Confinement Setting 5. Interview with investigative staff <p>Reasoning and analysis (by provision): 115.334 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p>

Louisiana Office of Juvenile Justice PREA Manual (page 16):
Investigators shall have received training in conducting sex abuse investigations in confinement settings.

Review of training records/logs of investigative staff:

The auditor reviewed annual training required by PREA Standard 115.331, documented through the Staff Confirmation of Receipt of PREA and the NIC certificate for PREA: Investigating Sexual Abuse in a Confinement Setting. The training was completed by three investigators with the Louisiana Office of Juvenile Justice Department of Investigative Services.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated they received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. They stated they received the training required by §115.331 and completed the specialized training topics.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.334 (b)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 16):
Specialized training shall include techniques for interviewing juvenile 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, pursuant to YS Policy No. A.1.4.

Review of training records/logs of investigative staff:

See 115.334 (a).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

See 115.334 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.334 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency maintains documentation showing that investigators have completed the required training. The number of investigators currently employed who have

	<p>completed the required training: 3</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 16): Required training shall be documented in TREC, Success Factors and/or Corner Stone.</p> <p>Review of training records/logs of investigative staff: See 115.334 (a) and 115.334 (b).</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.335	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Staff Confirmation of Receipt of PREA 4. Receipt of specialized training for medical and mental health care practitioners. 5. Interviews with medical staff and mental health staff <p>Reasoning and analysis (by provision): 115.335 (a)</p> <p>What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities.</p> <p>The number of all medical and mental health care practitioners who work regularly at the facility and received the required training is 39, representing 100% of applicable staff.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 17): All full-and part-time medical and mental health care practitioners who work regularly in its facilities shall be trained in the methods of and procedures to:</p> <ol style="list-style-type: none"> 1. Detecting and assessing signs of sexual abuse and sexual harassment;

2. Preserving physical evidence of sexual abuse;
3. Responding effectively and professionally to juvenile victims of sexual abuse and sexual harassment; and
4. Reporting allegations or suspicions of sexual abuse and sexual harassment.

Review of training records of medical staff and mental health staff:

The auditor reviewed documented evidence of completion of the specialized PREA training topics for the two medical and mental health staff interviewed, as well as for five additional medical and mental health practitioners selected from a roster, and observed that the training had been completed.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff and mental health staff:

The health services administrator stated and mental health coordinator both stated they have received the specialized training topics regarding sexual abuse and sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.335 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Agency medical staff at the facility do not conduct forensic exams.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff and mental health staff:

The health services administrator stated forensic medical examinations would be conducted offsite.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.335 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency maintains documentation showing that medical and mental health practitioners have completed the required training.

Louisiana Office of Juvenile Justice PREA Manual (page 17):

Documentation that medical and mental health practitioners have received the training referenced in Section IV.D.1 above from the Agency shall be documented through signature on the "Staff Confirmation of Receipt", pursuant to YS Policy No.

	<p>A.2.24. Receipts shall be maintained in the CHP employee’s file with a copy forwarded to the unit’s designated training staff for filing.</p> <p>Documentation that the training referenced in Section IV.D.1 above was received elsewhere shall be maintained in the CHP employee’s file with a copy forwarded to the unit’s designated training staff for filing.</p> <p>Document review: See 115.335 (a).</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.335 (d) What was read, as part of a systematic review of evidence: Louisiana Office of Juvenile Justice PREA Manual (page 17): Medical and mental health care practitioners shall also receive the training mandated for employees under Section IV.A above, or for contractors and volunteers under Section IV.B above, depending upon the practitioner’s status at the Agency. Receipts shall be maintained in the CHP employee’s file with a copy forwarded to the unit’s designated training staff for filing.</p> <p>Document review: The auditor reviewed Confirmation of Receipt of PREA forms for the two contracted medical and mental health practitioners interviewed, as well as five additional individuals selected from a roster, and observed documentation of receipt of the training required by Standard 115.331.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.341	Obtaining information from residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice Intake and Quarterly Staffing Screening and Housing Assessment dated August 2024

4. Interview with PREA coordinator
5. Interview with PREA compliance manager
6. Interview with staff responsible for risk screening
7. Interviews with random sample of residents
8. Site review

Reasoning and analysis (by provision):

115.341 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- The agency has a policy that requires screening (upon admission to a facility or transfer to another facility) for risk of sexual abuse victimization or sexual abusiveness toward other residents.
- The policy requires that residents be screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of their intake.
- The policy requires that a resident's risk level be reassessed periodically throughout their confinement at six month intervals.

In the past 12 months, 125 residents entering the facility through intake or transfer who remained at the facility for 72 hours or more were screened for risk of sexual victimization or risk of sexually abusing other residents within 72 hours of entry, representing 100% of applicable residents. The auditor noted that the PAQ incorrectly reported that 120 residents entered the facility during the audit period.

Louisiana Office of Juvenile Justice PREA Manual (page 18):

Within 72 hours of the youth's arrival at the facility, 30 days from youth's arrival at the facility, each full SAVRY reassessment, after a PREA Incident, and if the youth is at substantial risk of imminent sexual abuse, the Agency shall obtain and use information about each youth's personal history and behavior to reduce the risk of sexual abuse by or upon a youth.

Review of records for residents admitted to the facility:

The auditor reviewed 16 completed risk assessments for residents interviewed and an additional 11 risk screenings for residents who disclosed prior victimization or previously perpetrated sexual abuse during risk screening and observed that all assessments were completed within 72 hours of intake.

The auditor also reviewed 27 completed 30-day risk reassessments for the same residents and observed that all reassessments were completed as required by agency policy.

Lastly, the auditor reviewed 40 applicable risk reassessments for the same residents and observed that these reassessments were completed at three-month intervals, consistent with PREA Standard §115.341 and agency policy.

What was observed as part of a systematic review of evidence:

Site review:

The staff responsible for risk screening (social services counselor) demonstrated the screening process. The screening is conducted in a conference room to ensure as much privacy as possible.

They confirmed that residents are screened upon admission to the facility or transfer from another facility for risk of sexual victimization or sexual abusiveness toward other residents. They further stated that screenings are completed within 72 hours of intake, in accordance with PREA requirements.

Information is obtained through conversations with residents and during intake using the Intake and Quarterly Staffing Screening and Housing Assessment form.

What was heard, as part of a systematic review of evidence:

Interviews with 16 random residents:

All 16 of the residents stated they were asked questions like the following examples at intake:

- Have you have ever been sexually abused?
- Do you have any disabilities?
- Do you think you might be in danger of sexual abuse at the facility?

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.341 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Risk assessment is conducted using an objective screening instrument.

Louisiana Office of Juvenile Justice PREA Manual (page 19):

Assessments shall be conducted using the "Intake & Quarterly Staffing Screening and Housing Assessment" objective screening instrument.

Screening instrument:

The auditor reviewed the screening instrument and observed it is objective. There is a set format of objective yes and no questions and the scoring leads to a determination of risk of sexual vulnerability and/or abusiveness of low, medium, or high.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.341 (c)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 20):

At a minimum, the agency shall attempt to ascertain information about:

1. Prior sexual victimization or abusiveness;
2. Any gender nonconforming appearance or manner or identification as lesbian, gay, bisexual, transgender, or intersex, and whether the resident may therefore be vulnerable to sexual abuse;
3. Current charges and offense history;
4. Age;
5. Level of emotional and cognitive development;
6. Physical size and stature;
7. Mental illness or mental disabilities;
8. Intellectual, physical, or developmental disabilities;
9. Youth's own perception of vulnerability; and
10. Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents.

Document review:

The auditor reviewed the Intake and Quarterly Staffing Screening and Housing Assessment form and determined that the risk screening instrument includes the criteria required by this provision for assessing risk of sexual victimization. The presence of each required risk factor was assessed as follows:

1. Prior sexual victimization or abusiveness: Assessed through Medical History ("Have you ever been a victim of a sexual assault?"), Question 6 ("Has this youth ever exhibited sexually aggressive behavior?"), and Question 8 (risk factors including prior victimization and prior sex offense).
2. Current charges and offense history: Assessed in Legal Information ("Adjudicated Offense(s)?").
3. Age: Assessed in Personal Information ("Age?").
4. Level of emotional and cognitive development: Assessed in Question 3 (Disabilities: Level of Cognitive Development).
5. Physical size and stature: Assessed in Question 1 ("Indicate this youth's physical stature [small, medium, large, muscular]").
6. Mental illness or mental disabilities: Assessed in Question 9 (observations of behaviors related to mental illness, such as jittery, crying, or bizarre behavior).
7. Intellectual or developmental disabilities: Assessed in Question 3 (Disabilities: Developmental).
8. Physical disabilities: Assessed in Question 3 (Disabilities: Physical).
9. Resident's own perception of vulnerability: Assessed in Question 4 ("Does this youth express concern for sexual abuse and/or sexual harassment?").
10. Other specific information indicating heightened risk: Assessed in Question 8 ("Are there risk factors which may increase the youth's potential for sexual victimization [other]?").

Additional criteria assessed by the instrument include LGBTI identification, gender non-conforming appearance or behavior, and the presence of a language barrier.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.341 (d)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 20):

The information shall be ascertained through conversations with the youth during the direct admission process; medical and mental health screenings; classification assessments; and by reviewing court records, case files, facility behavioral records, and other relevant documentation from the youth's files.

What was heard, as part of a systematic review of evidence:

Interview with staff responsible for risk screening:

The social services counselor stated the information is ascertained through conversations with the residents using the Intake and Quarterly Staffing Screening and Housing Assessment form.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.341 (e)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 20):

Each facility through procedures established in its Standard Operating Procedures (SOPs) shall implement appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the youth's detriment by staff or other youths.

What was heard, as part of a systematic review of evidence:

Interviews with the PREA coordinator:

The PREA coordinator reported that the agency has outlined who should have access to a resident's risk assessment within the facility in order to protect sensitive information from exploitation. Access is limited to the social services counselor/caseworker and their supervisor. Identified needs are incorporated into the resident's individualized case plan; however, the screening itself is not disseminated and remains secured within the resident's case file.

Interview with the PREA compliance manager:

The PREA compliance manager stated that the agency has outlined access to resident risk assessments in order to protect sensitive information from being exploited. They indicated that the youth risk assessment is maintained in the

	<p>confidential case file, with access limited to authorized personnel.</p> <p>Interview with the staff responsible for risk screening: The social services counselor stated that the agency has outlined access to resident risk assessments in order to protect sensitive information from exploitation. Risk screening results are emailed to the PREA compliance manager and the supervisor, while the original document is maintained in the resident’s file by administrative staff. These files are secured in a locked location, and access is controlled through a sign-out and return process during each shift.</p> <p>What was observed, as part of a systematic review of evidence: The auditor observed the files are secured in locked cabinets behind a locked door.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.342	Placement of residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice Intake and Quarterly Staffing Screening and Housing Assessment dated August 2024 4. Individualized Intervention Plans 5. Interview with superintendent 6. Interview with PREA coordinator 7. Interview with PREA compliance manager 8. Interview with staff responsible for risk screening 9. Interview with staff who supervise residents in isolation 10. Interview with medical staff 11. Interview with mental health staff 12. Interviews with residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse) 13. Site review <p>Evidence (corrective action):</p> <ol style="list-style-type: none"> 1. Corrective action statement regarding documentation of housing decisions (04/28/2026)

Reasoning and analysis (by provision):

115.342 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency/facility uses information from the risk screening required by §115.341 to inform housing, bed, work, education, and program assignments with the goal of keeping all residents safe and free from sexual abuse.

Louisiana Office of Juvenile Justice PREA Manual (page 22):

Facility Directors and Contract providers shall use all information initially obtained in and subsequently obtained to make housing, bed, program, education, and work assignments for youth with the goal of keeping all youth safe and free from sexual abuse. Youth shall be reevaluated by their assigned Case Manager during the “Monthly Assessment of IIP Progress” pursuant to YS Policy No. B.2.2, to determine if the housing area assignment continues to meet their needs.

Review of housing, bed, work, education, and program assignments decisions:

The Individual Intervention Plans document a resident’s risk of sexual victimization or risk of sexually abusing other residents. The plans are completed during the initial staffing, quarterly thereafter, and follow a resident throughout their confinement at the facility. The auditor reviewed 14 applicable examples and observed the plan includes programming, recreation, and education considerations.

Through corrective action, the PREA compliance manager provided a statement on April 28, 2026, indicating that, moving forward, case managers will explicitly document how risk screening information informs final housing decisions for all youth, to demonstrate that each placement is a deliberate effort to ensure safety from sexual abuse.

What was heard, as part of a systematic review of evidence:

Interview with PREA compliance manager:

The PREA compliance manager stated that information obtained from risk screening during intake is used to inform staffing decisions to ensure resident safety. During the intake process, social services staff share screening results during multidisciplinary staffing with medical, mental health, education, and security supervisors to determine appropriate housing and placement recommendations for youth.

Interview with staff responsible for risk screening:

The social services counselor stated that information obtained from risk screening during intake is incorporated into the resident’s individualized plan, including considerations for housing and programming, to ensure residents are kept safe and free from sexual abuse and sexual harassment.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

See 115.342 (a) Review of housing, bed, work, education, and program

assignments decision.

Reasoning and analysis (by provision):

115.342 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility has a policy that residents at risk of sexual victimization may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged. The facility policy requires that residents at risk of sexual victimization who are placed in isolation have access to legally required educational programming, special education services, and daily large-muscle exercise.

In the past 12 months, no residents at risk of sexual victimization were placed in isolation. Accordingly, no such residents were denied daily access to large muscle exercise, legally required education, or special education services, and there was no applicable average length of time for protective isolation.

Louisiana Office of Juvenile Justice PREA Manual (page 22):

Youth may be isolated from others only as a last resort when less restrictive measures are inadequate to keep all youth safe, and then only until an alternative means of keeping all youth safe can be arranged, pursuant to YS Policy No. B.2.8.

During any period of isolation youth shall not be denied daily large-muscle exercise and any legally required educational programming or special education services. Youth shall receive daily visits from a medical or mental health care clinician. Youth shall also have access to other programs and work opportunities to the extent possible.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated that isolation is not used to protect residents who are alleged to have suffered sexual abuse. Instead, separation measures would be used when necessary to ensure resident safety. They indicated that residents would only be isolated from others as a last resort, when less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of maintaining safety can be arranged.

Interview with medical staff:

The health services administrator stated that isolation would not be used for a resident who alleged sexual abuse. Instead, the resident would be placed in a safe area to ensure protection and access to appropriate services.

Interview with mental health staff:

The mental health coordinator stated that isolation would only be used for residents who perpetrated sexual abuse when necessary to ensure the safety of other residents. They further indicated that residents placed in isolation would receive visits from medical or mental health care clinicians. These visits would occur daily.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (c) N/A

Reasoning and analysis (by provision):

115.342 (d) N/A

Reasoning and analysis (by provision):

115.342 (e) N/A

Reasoning and analysis (by provision):

115.342 (f) N/A

Reasoning and analysis (by provision):

115.342 (g) N/A

Reasoning and analysis (by provision):

115.342 (h)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

From a review of case files of residents at risk of sexual victimization who were held in isolation in the past 12 months, the number of case files that include BOTH:

A statement of the basis for facility's concern for the resident's safety, and

The reason or reasons why alternative means of separation cannot be arranged: N/A

No residents at risk of sexual victimization were held in isolation in the past 12 months.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.342 (i)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

If a resident at risk of sexual victimization is held in isolation, the facility affords each such resident a review every 30 days to determine whether there is a continuing need for separation from the general population.

No residents at risk of sexual victimization were held in isolation in the past 12 months. Swanson Center for Youth at Monroe has not used isolation for residents at risk of sexual victimization.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.351	Resident reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <hr/> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice Youth Safety Guide pamphlet 4. Louisiana Office of Juvenile Justice Youth PREA Orientation 5. "Break the Silence" poster 6. "No Means No" poster 7. Administrative Remedy Procedure (ARP) Form 8. Interview with PREA compliance manager 9. Interviews with random sample of staff 10. Interviews with random sample of residents 11. Interviews with residents who reported a sexual abuse 12. Systems tests 13. Site review <p>Evidence (corrective action):</p> <ol style="list-style-type: none"> 1. Magnolia dorm corrected signage (03/31/2026) 2. Investigative Services Youth Telephone Check (04/08/2026) <p>Reasoning and analysis (by provision): 115.351 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has established procedures allowing for multiple internal ways for residents to report privately to agency officials about: Sexual abuse or sexual harassment; Retaliation by other residents or staff for reporting sexual abuse and sexual harassment; AND Staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 23): There shall be multiple internal methods provided for youth to privately report sexual abuse and sexual harassment, retaliation by other youths or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.</p> <p>Document review: The Louisiana Office of Juvenile Justice Youth Safety Guide pamphlet includes the following internal reporting methods:</p>

- Office of Juvenile Justice Investigative Services Hotline at 1-800-626-1430
- Tell a staff member

The “Break the Silence” poster includes the following internal reporting method:

- Office of Juvenile Justice Investigative Services Hotline at 1-800-626-1430

The “No Means No” poster includes the following internal reporting methods:

- Call Investigative Services - Dial 1 then 1 then 999 OR 1-(800) 626-1430
- Call the Family Liaison - Dial 1 then 800 OR 1- (800) 594-3941
- Report to any staff, volunteer, contractor, or medical or mental health staff.
- Submit a grievance or a sick call slip.
- Report to the PREA coordinator or PREA compliance manager.
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on your behalf by calling 1-(800) 626-1430.
- You also can submit a report on someone’s behalf, or someone at the facility can report for you using the ways listed here.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff stated that residents can privately report sexual abuse or sexual harassment, retaliation by other residents or staff, or staff neglect or violation of responsibilities by calling the PREA hotline, contacting Investigative Services, and/or using the ARP process.

Interviews with 21 random residents:

Residents stated they would report sexual abuse or sexual harassment involving themselves or another resident by telling staff, using the ARP process, calling the PREA hotline or other reporting hotline, and reporting to the facility director.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed that PREA signage is readable, accessible, consistent, and posted throughout the facility. In the living units, signage is placed adjacent to the telephones. The signage is provided in both English and Spanish, with the exception of Magnolia Dorm, which was corrected through corrective action on March 31, 2026. See document review.

Systems test:

The auditor tested internal reporting by submitting a test grievance into a locked grievance box and received a response the same day. The auditor also contacted Investigative Services and received a same-day email response confirming that the test report had been received.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The agency provided a photograph of the corrected signage in Magnolia Dorm on March 31, 2026.

Reasoning and analysis (by provision):

115.351 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency provides at least one way for residents to report abuse or harassment to a public or private entity or office that is not part of the agency.

Louisiana Office of Juvenile Justice PREA Manual (page 23):

Youth shall be provided at least one method to report abuse or harassment to a public or private entity or office that is not part of OJJ and that is able to receive and immediately forward youth reports of sexual abuse and sexual harassment to Agency officials, allowing the youth to remain anonymous upon request. This shall be accomplished by calling the third party outside reporting source found posted throughout the facility.

Document review:

The Louisiana Office of Juvenile Justice Youth Safety Guide pamphlet includes the following external reporting method:

- Tell a family member

The "Break the Silence" poster includes the following external reporting method:

- Louisiana Ombudsman at 1-(833) 462-0927

The "No Means No" poster includes the following external reporting method:

- Call Louisiana Ombudsman- Dial 1 then 1 then 4444 OR 1-(833) 462-0927 (Outside Reporting Agency)

What was heard, as part of a systematic review of evidence:

Interview with PREA compliance manager:

The PREA compliance manager identified the Louisiana Ombudsman Hotline as a way residents can report sexual abuse or sexual harassment to a public or private entity that is not part of the agency.

Interviews with 21 random residents:

See 115.351 (a).

What was observed as part of a systematic review of evidence:

Site review:

See 115.351 (a).

The auditor observed signage is readable and accessible, consistent, and placed throughout the facility. The signage is provided in English and Spanish. See document review.

Systems test:

The auditor successfully tested external reporting by calling the Louisiana Ombudsman. The Ombudsman's office forwarded the report to the PREA Coordinator the same day.

During the onsite phase of the audit, some resident telephones were not working properly. The agency repaired the telephones and provided Investigative Services Youth Telephone Checks, dated April 8, 2026, indicating that the telephones were working properly.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

Telephones were repaired as of April 8, 2026.

Reasoning and analysis (by provision):

115.351 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports. The PAQ did not identify the timeframe within which staff are required to document verbal reports.

Louisiana Office of Juvenile Justice PREA Manual (page 23):

Staff shall accept reports made verbally, in writing, anonymously, and from third parties and shall promptly document any verbal reports.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff confirmed that reports of sexual abuse or sexual harassment may be made verbally, in writing, anonymously, and by third parties. Most staff interviewed stated they would immediately document verbal reports and report the allegation to their direct supervisor and Investigative Services.

Interviews with 16 random residents:

Residents interviewed acknowledged they could report verbally or in writing and stated that if they wished to report anonymously, a relative or friend could make a report on their behalf.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.351 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The facility provides residents with access to tools to make written reports of sexual abuse or sexual harassment, retaliation by other residents or staff for reporting sexual abuse and sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

Louisiana Office of Juvenile Justice PREA Manual (page 23):
the facility shall provide youth with access to tools necessary to make a written report.

What was heard, as part of a systematic review of evidence:

Interview with PREA compliance manager:
The PREA compliance manager stated that residents may report sexual abuse, sexual harassment, retaliation by other residents or staff, and staff neglect or violations of responsibilities by informing staff, placing a free call to Investigative Services, contacting family members, or contacting an outside reporting agency.

What was observed as part of a systematic review of evidence:

Site review:
The auditor observed the availability of writing utensils, grievance forms, and locked grievance boxes.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.351 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency has established procedures for staff to privately report sexual abuse and sexual harassment of residents. The PAQ did not indicate how staff are informed of these procedures.

Louisiana Office of Juvenile Justice PREA Manual (page 24):
Staff shall be able to privately report sexual abuse and sexual harassment of youth by calling the IS Hotline at 1- 800-626-1430, and reporting an allegation directly to IS.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:
Staff interviews confirmed they were knowledgeable they could privately report sexual abuse and sexual harassment of residents. Most staff identified the Investigation Services Hotline or submitting a grievance.

What was observed as part of a systematic review of evidence:

Site review:

	<p>The “No Means No” poster provides reporting options for staff, including contacting the PREA Coordinator or PREA Compliance Manager, or calling the agency’s Investigation Services internal hotline.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.352	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Administrative Remedy Procedure (ARP): How to Complain About Your Problem Administrative Remedy Procedure (ARP) booklet 4. “No Means No” poster 5. Administrative Remedy Procedure (ARP) form 6. Interviews with residents who reported a sexual abuse <p>Reasoning and analysis (by provision): 115.352 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has an administrative procedure for dealing with resident grievances regarding sexual abuse.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 24): Pursuant to YS Policy No. B.5.3, the Administrative Remedy Procedure (ARP) shall not contain a time limit on when a youth may submit a grievance regarding an allegation of sexual abuse. The Agency may apply otherwise-applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse. A youth shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The provisions of subparagraphs (1) and (2) do not restrict the Agency’s ability to defend against a lawsuit filed by a youth on the ground that the applicable statute of limitations has expired.</p> <p>Review of Administrative Remedy Procedure (ARP): How to Complain About Your Problem booklet: The auditor reviewed the booklet and observed that it contains relevant information</p>

regarding the ARP process. The booklet is available in both English and Spanish.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Agency policy or procedure allows a resident to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. Agency policy does not require a resident to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse.

Louisiana Office of Juvenile Justice PREA Manual (page 24):
Pursuant to YS Policy No. B.5.3, the Administrative Remedy Procedure (ARP) shall not contain a time limit on when a youth may submit a grievance regarding an allegation of sexual abuse. The Agency may apply otherwise-applicable time limits on any portion of a grievance that does not allege an incident of sexual abuse. A youth shall not be required to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse. The provisions of subparagraphs (1) and (2) do not restrict the Agency's ability to defend against a lawsuit filed by a youth on the ground that the applicable statute of limitations has expired.

Review of Administrative Remedy Procedure (ARP): How to Complain About Your Problem booklet:
See 115.352 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency's policy and procedure allow a resident to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint.

Louisiana Office of Juvenile Justice PREA Manual (page 24):
The Agency shall ensure that a youth who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint, and such grievance is not referred to a staff member who is the subject of the complaint.

Review of Administrative Remedy Procedure (ARP): How to Complain About Your Problem booklet:
See 115.352 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- The agency has policy and procedures that require that a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance.
- The total time between the discovery of the grievance and the disposition cannot exceed 25 days.
- In the past 12 months, one grievance alleging sexual abuse was filed.

Louisiana Office of Juvenile Justice PREA Manual (pages 24-25):

A final Agency decision on the merits of any portion of a grievance alleging sexual abuse be issued within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time used by the youth in preparing any administrative appeal. Pursuant to B.5.3, the ARP may provide for a request for an extension of time by the Facility Director to respond in Step One with the approval of the Deputy Secretary if the normal time period for response is insufficient to make an appropriate decision. The Facility Director shall notify the youth in writing of any such extension and provide a date by which a decision will be made. At any level of the administrative process, including the final level, if the youth does not receive a response within the time allotted for reply, including any properly noticed extension, the youth may consider the absence of a response to be a denial at that level.

Review of grievances that alleged sexual abuse and final decisions:

The auditor reviewed one grievance that alleged sexual abuse.

What was heard, as part of a systematic review of evidence:

Interviews with residents who reported a sexual abuse:

There were three residents who reported sexual abuse present during the onsite phase of the audit. The interviewed residents reported that they were notified in writing about the facility's decision regarding their reports. One resident stated that they did not know how long after the report the written decision was provided, and another resident reported receiving the written decision approximately 30 days after making the report. There was no indication from the resident interviews that the decision took longer than 90 days.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy and procedure permits third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse, and to file such requests on behalf of residents.

- Agency policy and procedure require that if the resident declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the resident's decision to decline.
- Agency policy allows parents or legal guardians of residents to file a grievance alleging sexual abuse, including appeals, on behalf of such resident, regardless of whether or not the resident agrees to having the grievance filed on their behalf.
- In the past 12 months, there were no grievances alleging sexual abuse in which a resident declined third-party assistance and documentation of the resident's decision to decline was required.

Louisiana Office of Juvenile Justice PREA Manual (page 25):

Third parties, including fellow youth, staff members, family members, attorneys, and outside advocates, shall be permitted to assist youth in filing requests for an ARP relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of youths. If a third party, other than a parent or legal guardian, files such a request on behalf of a youth, the ARP may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf and may also require the alleged victim to personally pursue any subsequent steps in the ARP. If the youth declines to have the request processed on his or her behalf, the Agency shall document the youth's decision. If an attorney files an ARP on behalf of the youth, a letter of representation shall be required. A parent or legal guardian of a juvenile shall be allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile. Such a grievance shall not be conditioned upon the juvenile agreeing to have the request filed on his or her behalf.

Review of third-party reports and declination of third-party assistance:

There were no third-party reports.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed that PREA signage is consistent and includes information for reporting sexual abuse and sexual harassment through the grievance process. The posters are provided in English and Spanish, are printed in a large font, and were

not obscured by graffiti or damaged. In the housing units, the 'No Means No' posters are posted adjacent to the telephones.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (f)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency has a policy and established procedures for filing an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse. Agency policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours.

- In the past 12 months, no emergency grievances alleging a substantial risk of imminent sexual abuse were filed.

The agency's policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within 5 days.

- In the past 12 months, no grievances alleging a substantial risk of imminent sexual abuse were filed that reached a final decision within five days.

Louisiana Office of Juvenile Justice PREA Manual (page 25):

The ARP shall contain procedures for the filing of an emergency grievance alleging that a youth is subject to a substantial risk of imminent sexual abuse. After receiving an emergency grievance alleging a youth is subject to a substantial risk of imminent sexual abuse, the Agency shall require the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) be immediately forwarded to the appropriate Regional Director for immediate corrective action, an initial response within 48 hours, and a final Agency decision within five (5) calendar days. The initial response and final Agency decision shall document the Agency's findings as to whether the youth is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Review of emergency grievances filed:

There were no emergency grievances filed.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.352 (g)

What was read, as part of a systematic review of evidence:

	<p>Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:</p> <ul style="list-style-type: none"> • The agency has a written policy that limits its ability to discipline a resident for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the resident filed the grievance in bad faith. • In the past 12 months there were no resident grievances alleging sexual abuse that resulted in disciplinary action by the agency against the resident for having filed the grievance in bad faith. <p>Louisiana Office of Juvenile Justice PREA Manual (page 39): For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.353	Resident access to outside confidential support services and legal representation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Memorandum of agreement between Swanson Center for Youth at Monroe and the Wellspring Alliance for Families dated January 16, 2025 4. Systems Test: emotional support service through the Wellspring Alliance for Families 5. “No Means No” poster 6. Interview with superintendent 7. Interview with PREA compliance manager 8. Interviews with random sample of residents 9. Interviews with residents who reported a sexual abuse <p>Evidence (Corrective Action):</p> <ol style="list-style-type: none"> 1. Investigative Services Youth Telephone Checks (04/8/2026) 2. Staff Training Attendance Roster (03/26/2026)

Findings (by provision):

115.353 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility provides residents access to outside victim advocates for emotional support services related to sexual abuse by:

- Giving residents (by providing, posting, or otherwise making accessible) mailing addresses and telephone numbers (including toll-free hotline numbers where available) of local, State, or national victim advocacy or rape crisis organizations.
- Enabling reasonable communication between residents and these organizations, in as confidential a manner as possible.

Louisiana Office of Juvenile Justice PREA Manual (page 26):

Each facility shall provide youth with access to outside victim advocates for emotional support services related to sexual abuse, by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll free hotline numbers where available, of local, state, or national victim advocacy or rape crisis organizations. The facility shall enable reasonable communication between youths and these organizations and agencies, in as confidential a manner as possible.

Document review:

The “No Means No” poster (English and Spanish) includes a telephone number and mailing address for the Wellspring Alliance for Families.

What was heard, as part of a systematic review of evidence:

Interviews with 21 random residents:

Eight of the residents interviewed (38%) stated they were knowledgeable of services available outside of the facility for dealing with sexual abuse if they ever need it.

Interviews with residents who reported a sexual abuse:

There were three residents who reported sexual abuse present during the onsite phase of the audit. The residents provided mixed responses regarding access to outside services. One resident reported receiving information for Wellspring, indicated that the number was free to call, stated that services could be accessed by phone from the living unit, and reported that communication could occur confidentially. Two residents reported that they were not provided mailing addresses or telephone numbers for outside services.

This lack of knowledge of outside victim advocates for emotional support services related to sexual abuse was addressed through corrective action.

What was observed as part of a systematic review of evidence:

Site review:

The auditor observed that information for the child advocacy center is included on

the “No Means No” poster. The posters are located in each living unit adjacent to telephones and in other areas throughout the facility.

Systems test:

The auditor successfully called the Wellspring Alliance for Families using a facility telephone; however, some resident telephones were not working properly. The agency repaired the telephones and provided Investigative Services Youth Telephone Checks, dated April 8, 2026, indicating that the telephones were working properly.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

- **Telephones were repaired as of April 8, 2026.**
- **Facility staff were provided refresher training on March 25, 2026, regarding the intake process, including discussion of the services provided by the Wellspring Alliance for Families. The facility provided a training attendance roster as documented evidence.**

Reasoning and analysis (by provision):

115.353 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The facility informs residents, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs residents, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

Louisiana Office of Juvenile Justice PREA Manual (page 26):

The facility shall inform youths, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws.

Document review:

The “No Means No” poster (English and Spanish) included information about the extent to which such communications will be monitored and related mandatory reporting requirements.

What was heard, as part of a systematic review of evidence:

Interviews with 16 random residents:

See 115.353 (a).

Interviews with residents who reported a sexual abuse:

See 115.353 (a). The residents reported that they understood that individuals they spoke with about the incident may be required to report certain information to

others, such as law enforcement.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.353 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency or facility maintains memoranda of understanding (MOUs) or other agreements with community service providers that are able to provide residents with emotional support services related to sexual abuse. The agency or facility maintains copies of those agreements.

Louisiana Office of Juvenile Justice PREA Manual (page 26):

The Agency shall maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide youths with confidential emotional support services related to sexual abuse. The Agency shall maintain copies of agreements or documentation showing attempts to enter into such agreements.

Document review:

The auditor reviewed the memorandum of agreement between Swanson Center for Youth at Monroe and the Wellspring Alliance for Families dated January 16, 2025, and that emotional support services related to sexual abuse will continue to be provided by Wellspring.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.353 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility provides residents with reasonable and confidential access to their attorneys or other legal representation. The facility provides residents with reasonable access to parents or legal guardians.

Louisiana Office of Juvenile Justice PREA Manual (page 26):

The facility shall also provide youth with reasonable and confidential access to their attorneys or other legal representative and reasonable access to parents or legal guardians.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated that the facility provides residents with reasonable and confidential access to attorneys or other legal representation through assistance

from social services with telephone calls and visits. They further stated that residents are provided reasonable access to parents or legal guardians through telephone calls and special visits.

Interview with PREA compliance manager:

The PREA compliance manager stated that, in accordance with YS Policy C.2.11 and the PREA Manual, the facility provides residents with reasonable and confidential access to attorneys and other legal representation. They indicated that meetings with attorneys or legal representatives are held confidentially. They further stated that residents are provided access to parents or legal guardians through telephone calls and visitation.

Interviews with 21 random residents:

All 21 residents interviewed (100%) stated that the facility allows them to see or talk with a lawyer and that they are able to speak with that person privately. All 21 residents interviewed (100%) also stated that the facility allows them to see or talk with their parents or another approved individual.

Interviews with residents who reported a sexual abuse:

See 115.353 (a). The residents reported that they did not request to speak with an attorney or other legal representative; therefore, access to legal counsel was not applicable.

They also reported that they did not request to speak with their parents or anyone else following the report; therefore, access to those contacts was not applicable.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.354	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none">1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 20253. Third-party reporting instructions published at https://ojj.la.gov/page/prea4. "No Means No" Poster5. Systems test of third-party reporting <p>Reasoning and analysis (by provision):</p>

	<p>115.354 (a)</p> <p>What was read, as part of a systematic review of evidence:</p> <p>Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency or facility provides a method to receive third-party reports of resident sexual abuse or sexual harassment.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 16): Third parties shall have the ability to file reports of sexual abuse and sexual harassment. Policies containing information on the methods by which a third party can report sexual abuse and sexual harassment on behalf of a youth shall be available on the Office of Juvenile Justice (OJJ) website at http://www.ojj.la.gov/.</p> <p>What was observed as part of a systematic review of evidence:</p> <p>Site review: Third-party reporting information is published on the Louisiana Office of Juvenile Justice website. The website includes the following instructions, “All reports of sexual abuse or sexual harassment will be investigated and addressed. Youth, employees, and third parties can report incidents of sexual abuse or sexual harassment in verbal or written formats. All parties can file a report with the Office of Juvenile Justice by calling the Investigative Services hotline at 1-800-626-1430. Reporters can remain anonymous or provide contact information in the event more information is needed.”</p> <p>Additionally, the auditor observed that the “No Means No” poster includes third-party reporting information. The poster is provided in both English and Spanish and is posted throughout the facility, including adjacent to resident telephones.</p> <p>Systems test: The auditor previously tested the third-party reporting mechanism on October 8, 2025, by calling the Investigative Services hotline. The auditor received an email response the following day confirming that the report had been received.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.361	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025

3. Interview with superintendent
4. Interview with PREA compliance manager
5. Interviews with a random sample of staff
6. Interviews with medical and mental health staff

Reasoning and analysis (by provision):

115.361 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency requires all staff to report immediately and according to agency policy:

- Any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency.
- Any retaliation against residents or staff who reported such an incident.
- Any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Louisiana Office of Juvenile Justice PREA Manual (pages 27-28):

All staff shall report immediately any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is a part of the Agency pursuant to YS Policy No. C.4.3. Staff receiving reports of sexual assault or sexual harassment shall immediately contact his/her supervisor/manager and in the case of a contract program, the supervising PPO/J. Staff may also use the IS Hotline by calling 1-800-626-1430 to report the incident. Staff shall report retaliation against youth or staff who reported such an incident of sexual abuse or sexual harassment; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff stated they are required to report any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency; retaliation against residents or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency requires all staff to comply with any applicable mandatory child abuse

reporting laws.

Louisiana Office of Juvenile Justice PREA Manual (page 28):

All staff shall comply with mandatory child abuse reporting laws pursuant to YS Policy No. C.4.3, and Federal and State Law. Failure of staff to report sexual abuse and sexual harassment and/or comply with Mandatory Reporting provisions above shall result in disciplinary action.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

All 12 staff stated they are aware of Louisiana laws related to mandatory reporting of sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Apart from reporting to designated supervisors or officials and designated State or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Louisiana Office of Juvenile Justice PREA Manual (page 28):

Except for reporting to supervisors, Facility Directors, Central Office management, and designated State or local services agencies as provided for in YS Policy No. C.4.3, staff are prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, to make treatment, investigation, and other security and management decisions.

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff:

Staff interviewed stated policy prohibits them from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (d)

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The health services administrator reported that, at the initiation of services, residents are informed of the limitations of confidentiality and the duty to report.

They further stated that any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment is reported immediately to the PZT and the facility director, with completion of an Abuse/Neglect Incident (ANI) report and notification to the PREA Compliance Manager. They confirmed having become aware of such incidents and reported that all incidents were reported in accordance with policy.

The mental health coordinator reported that, at the initiation of services, residents are informed of the limitations of confidentiality and the duty to report. This disclosure is conducted at the beginning of intake. They further stated that they are required to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment immediately upon learning of it to Office of Juvenile Justice (OJJ) supervisors. They indicated that they have not become aware of such incidents; therefore, reporting was not applicable.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (e)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 29):

If the alleged victim is under the guardianship of the child welfare system, the report shall be made to the alleged victim's caseworker instead of the parents or legal guardians. The Facility Director shall also report the allegation to the appropriate juvenile judge, the juvenile's attorney, or other legal representative of record within 14 days of receiving the allegation.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director reported that, upon receiving an allegation of sexual abuse, the facility reports the allegation to the PREA compliance manager, Investigative Services (IS), and the Youth Facilities Director, in accordance with §115.361. They further stated that social services staff are responsible for notifying the resident's parents or legal guardians.

If the victim is under the guardianship of the child welfare system, the allegation is reported to the victim's caseworker in lieu of the parents or legal guardians. They indicated that all such notifications are made immediately upon learning of the allegation.

Additionally, when a juvenile court retains jurisdiction over the victim, the facility reports the allegation to the juvenile's attorney or other legal representative of record, and these notifications are also made immediately.

Interview with PREA compliance manager:

The PREA compliance manager reported that, upon receiving an allegation of sexual abuse, the facility notifies the appropriate agency office and the alleged victim's parents or legal guardians, unless there is official documentation indicating that

such notification should not be made.

If the victim is under the guardianship of the child welfare system, the allegation is reported to the victim's caseworker in lieu of the parents or legal guardians. They stated that these notifications are made immediately upon learning of the allegation.

Additionally, when a juvenile court retains jurisdiction over the victim, the facility reports the allegation to the juvenile's attorney or other legal representative of record, and these notifications are also made immediately.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.361 (f)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 27):

Upon receiving any allegation of sexual abuse or sexual harassment, including third-party and anonymous complaints, the Facility Director/Regional Manager shall promptly report the allegation to the appropriate Regional Director, PREA Compliance Manager and the Director of IS. If the sexual abuse or sexual harassment occurs in a secure facility, the Facility Director shall also notify the Regional Manager from the youth's region of origin. The Facility Director shall also notify the assigned Probation and Parole Officer, the alleged victim's parents, or legal guardians, unless the facility has official documentation showing the parents or legal guardians should not be notified. Pursuant to YS Policy No. C.2.6 and facility SOPs, secure care facility staff shall initiate a UOR [refer to YS Policy No. C.2.6 (b)], and notify a facility IS Investigator, or if unavailable a Central Office supervisory investigator. Law enforcement is to be notified as appropriate and in accordance with local procedures.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are reported directly to designated facility investigators.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.362	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Interview with agency head
4. Interview with superintendent
5. Interview with random sample of staff

Reasoning and analysis (by provision):

115.362 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

When the agency or facility learns that a resident is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the resident (i.e., it takes some action to assess and implement appropriate protective measures without unreasonable delay).

In the past 12 months there were no incidents where the agency or facility determined that a resident was subject to substantial risk of imminent sexual abuse.

Louisiana Office of Juvenile Justice PREA Manual (page 29):

Immediate action shall be taken to protect a youth when the Agency learns that a youth is subject to a substantial risk of imminent sexual abuse. Upon receiving staff reports of sexual abuse or sexual harassment, the supervisor/manager or supervising PPO/J shall immediately notify the Facility Director/Regional Manager and initiate action to reduce or eliminate immediate harm to the victim or reporter, and damage to any potential crime scenes and evidence.

What was heard, as part of a systematic review of evidence:

Interview with agency head:

The deputy secretary stated that when staff learn a resident is subject to a substantial risk of imminent sexual abuse, the facility would immediately remove the resident from harm and provide counseling as needed.

Interview with superintendent:

The facility director reported that when a resident is identified as being at substantial risk of imminent sexual abuse, the facility takes immediate protective action by removing the resident from the situation, conducting a conversation to gather information about the concern, and ensuring the resident feels safe. They further stated that staff are expected to respond immediately to protect residents at substantial risk of imminent sexual abuse.

Interviews with 12 random staff:

All 12 staff interviewed stated that if a resident were determined to be at substantial risk of imminent sexual abuse, the facility would take immediate protective action, in accordance with §115.362.

	<p>Staff reported that such measures could include separating the resident from the potential threat, immediately notifying a supervisor, maintaining close or constant observation, and relocating the resident to a safe environment, including housing changes when necessary.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.363	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Interview with agency head 4. Interview with director <p>Reasoning and analysis (by provision): 115.363 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has a policy requiring that, upon receiving an allegation that a resident was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency’s policy also requires that the head of the facility notify the appropriate investigative agency.</p> <p>In the past 12 months, the facility received no allegations that a resident was abused while confined at another facility.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 29): Upon receiving an allegation that a youth was sexually abused while confined at another YS secure care facility or another Agency facility, the Facility Director who received the allegation shall notify the Facility Director or appropriate office of the Agency where the alleged abuse occurred and shall also notify the appropriate Regional Director and IS office located on the facility grounds, and Central Office IS where appropriate.</p> <p>Documentation of allegations that a resident was abused while confined at another facility:</p>

There were no allegations that a resident was abused while confined at another facility.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency policy requires that the facility head provides such notification as soon as possible, but no later than 72 hours after receiving the allegation.

Louisiana Office of Juvenile Justice PREA Manual (page 29): Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation and the notification documented.

Documentation of allegations that a resident was abused while confined at another facility:
See 115.363 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency or facility documents that it has provided such notification within 72 hours of receiving the allegation.

Louisiana Office of Juvenile Justice PREA Manual (page 29): Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation and the notification documented.

Documentation of allegations that a resident was abused while confined at another facility:
See 115.363 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.363 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency/facility policy requires that allegations received from other facilities/

	<p>agencies are investigated in accordance with the PREA standards. The facility head or agency office that receives such notification shall ensure that the allegation is investigated in accordance with these standards.</p> <p>In the past 12 months, no allegations of sexual abuse were received from other facilities.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 29): The Facility Director/ IS investigator who receives such notification shall ensure that the allegation is investigated in accordance with PREA standards.</p> <p>Documentation of allegations that a resident was abused while confined at another facility: See 115.363 (a).</p> <p>What was heard, as part of a systematic review of evidence:</p> <p>Interview with agency head: The deputy secretary stated that allegations of sexual abuse or sexual harassment referred from another agency or from a facility within the agency would be directed to the statewide PREA coordinator and Investigative Services as the designated points of contact. They further stated that upon receipt of such an allegation, the agency would notify investigative services and the head of the facility where the alleged abuse occurred. They reported that they were not aware of any recent examples of such allegations being referred from another facility or agency.</p> <p>Interview with superintendent: The facility director confirmed that when the facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred within the facility, the allegation is referred to Investigative Services (IS) for investigation. They indicated that there were no examples of another facility or agency reporting such allegations during the audit period.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.364	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025

3. Investigation reports
4. Interviews with security staff and non-security staff first responders
5. Interviews with a random sample of staff
6. Interviews with residents who reported a sexual abuse

Reasoning and analysis (by provision):

115.364 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report separate the alleged victim and abuser. The policy requires that, upon learning of an allegation that a resident was sexually abused, the first security staff member to respond to the report preserve and protect any crime scene until appropriate steps can be taken to collect any evidence. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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. The policy requires that, if the abuse occurred within a time period that still allows for the collection of physical evidence, the first security staff member to respond to the report 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.

In the past 12 months, there were 18 allegations that a resident was sexually abused. In all 18 instances, the first security staff member to respond separated the alleged victim and abuser. Staff were notified within a time period that allowed for the collection of physical evidence in all 18 allegations. In each of these cases, the first responding staff member preserved and protected the crime scene until appropriate steps could be taken to collect evidence. Additionally, in all 18 instances, staff requested that the alleged victim not take any actions that could destroy physical evidence and ensured that the alleged abuser did not take any actions that could compromise evidence, in accordance with §115.364.

Louisiana Office of Juvenile Justice PREA Manual (page 30):

Upon learning of an allegation that a youth was sexually abused, the first staff member to respond to the report shall be required to:

1. Separate the alleged victim and alleged 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 not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating.

Review of response to allegations:

The auditor reviewed two unfounded allegations of staff-on-resident sexual abuse, as well as two unfounded, five unsubstantiated, and one substantiated allegations of resident-on-resident sexual abuse, and examined the steps taken and evidence collected in each case.

What was heard, as part of a systematic review of evidence:

Interviews with security staff and non-security staff first responders:

Staff stated they are knowledgeable of their first responder duties if they are the first person to be alerted that a resident has allegedly been the victim of sexual abuse.

Interviews with residents who reported a sexual abuse:

Three residents who reported sexual abuse were interviewed during the onsite phase of the audit.

The first resident reported that staff responded immediately, as staff were already present in the area at the time of the incident. The resident indicated that they reported the incident directly to staff, and staff reported the incident to a counselor.

The second resident reported that staff responded within approximately 10 minutes after the incident. The resident indicated that they notified staff by providing a written note. Once staff became aware of the incident, a staff member responded within approximately 10 minutes and removed the resident from the area, relocating them to another dorm.

The third resident reported that staff responded instantly, as the incident was witnessed by staff. Upon becoming aware of the incident, staff immediately separated the individuals involved.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.364 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency policy requires that if the first staff responder is not a security staff member, that responder shall be required to:

- Request that the alleged victim not take any actions that could destroy physical evidence.
- Notify security staff.

Of the allegations of sexual abuse reported in the past 12 months, non-security staff were the first responders in two instances. In both cases, the non-security staff members requested that the alleged victims not take any actions that could destroy physical evidence and notified security staff.

Louisiana Office of Juvenile Justice PREA Manual (page 30):

If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.

Review of response to allegations:

See 115.364 (a).

What was heard, as part of a systematic review of evidence:

Interviews with 12 random staff and security staff and non-security staff first responders:

Staff stated they are knowledgeable of their first responder duties if they are the first person to be alerted that a resident has allegedly been the victim of sexual abuse. All staff are mandated reporters and would therefore follow the same policy requirements as security staff if they are a first responder.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.365	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Swanson Center for Youth at Monroe Sexual Abuse Protocol 4. Interview with superintendent <p>Reasoning and analysis (by provision): 115.365 (a) What was read, as part of a systematic review of evidence:</p>

	<p>Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 30): The Agency, in concert with the YS secure care facilities, shall develop a written facility plan referred to as the “OJJ PREA Coordinated Response to Sexual Abuse Incidents” to coordinate actions taken in response to an incident of sexual abuse among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Coordinated Response Plan for Sexual Abuse Allegations: The auditor reviewed the Sexual Abuse Protocol and observed that it coordinates the actions taken in response to an incident of sexual abuse among first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>What was heard, as part of a systematic review of evidence: Interview with superintendent: The facility director stated that, in response to an incident of sexual abuse, the facility follows its coordinated response plan, which provides direction for coordinating actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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<p>115.366</p>	<p>Preservation of ability to protect residents from contact with abusers</p>
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Interview with agency head <p>Reasoning and analysis (by provision): 115.366 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:</p>

<p>The agency, facility, or any other governmental entity responsible for collective bargaining on the agency’s behalf has not entered into a collective bargaining agreement since the last PREA audit.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 30): No collective bargaining agreement or other agreement can be entered into that would limit the Agency’s ability to remove alleged staff sexual abusers from contact with youth pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>What was heard, as part of a systematic review of evidence: Interview with agency head: The deputy secretary confirmed the Louisiana Office of Juvenile Justice does not have a collective bargaining agreement that limits the agency’s ability to remove alleged staff sexual abusers from contact with residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.366 (b) What was read, as part of a systematic review of evidence: Louisiana Office of Juvenile Justice PREA Manual (page 31): Nothing shall restrict the entering into or renewal of agreements that govern:</p> <ol style="list-style-type: none"> 1. The conduct of the disciplinary process, as long as such agreements are not inconsistent with the provisions of this policy regarding evidentiary standards for administrative proceeding. 2. Whether a no-contact assignment that is imposed pending the outcome of an investigation shall be expunged from or retained in the staff member’s personnel file following a determination that the allegation of sexual abuse is not substantiated. <p>What was heard, as part of a systematic review of evidence: Interview with agency head: See 115.366 (a).</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.367	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Protections Against Retaliation Form for Reporters of Sexual Abuse
4. Investigative reports
5. Interview with agency head designee
6. Interview with superintendent
7. Interview with designated staff member charged with monitoring retaliation
8. Interviews with residents who reported a sexual abuse

Reasoning and analysis (by provision):

115.367 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

- The agency has a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff.
- The agency designates the social services with monitoring for possible retaliation.

Louisiana Office of Juvenile Justice PREA Manual (page 31):

Youth and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations shall be protected from retaliation by other youth or staff.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (b)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 31):

Multiple protection measures shall be employed, such as housing changes or transfers for youth victims or abusers, removal of alleged staff or youth abusers from contact with victims, and emotional support services for youth or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.

Documentation of any protective measures taken:

The auditor reviewed 19 examples of the Protections Against Retaliation Form for Reporters of Sexual Abuse and observed that the form is used to document

retaliation monitoring. The auditor further observed that protective measures taken in response to allegations included housing changes or transfers, removal of alleged abusers, and the provision of emotional support services.

What was heard, as part of a systematic review of evidence:

Interviews with agency head:

The deputy secretary confirmed that the agency protects residents and staff from retaliation following allegations of sexual abuse or sexual harassment by moving youth to a safe area and reassigning staff to a different area as needed to ensure safety.

Interview with superintendent:

The facility director stated that, for allegations of sexual abuse or sexual harassment, measures taken to protect residents and staff from retaliation include housing changes or transfers, removal of alleged abusers, and the provision of emotional support services. They also indicated that efforts are made to ensure residents feel safe and comfortable in their housing placement.

Interview with designated staff member charged with monitoring retaliation:

The PREA compliance manager stated that their role in preventing retaliation includes overseeing case managers and recommending protective measures such as housing changes or transfers, removal of alleged abusers, and the provision of emotional support services. They further indicated that these same measures are implemented to protect residents and staff from retaliation. Additionally, they reported that they initiate contact with residents who have reported sexual abuse on a weekly basis for a period of 90 days.

Interviews with residents who reported a sexual abuse:

Three residents who reported sexual abuse were interviewed during the onsite phase of the audit. When asked whether they felt protected against possible retaliation from staff or other youth as a result of reporting, all three residents indicated that they did feel adequately protected.

What was observed as part of a systematic review of evidence:

Site review:

There were no residents in isolation (for risk of sexual victimization/who allege to have suffered sexual abuse) or residents who reported a sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency and/or facility monitors the conduct or treatment of residents or staff who reported sexual abuse and of residents who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation

by residents or staff.

The facility monitors the conduct and treatment of residents and staff for a period of 90 days following a report of sexual abuse or sexual harassment. The facility acts promptly to remedy any retaliation and continues monitoring beyond 90 days when initial monitoring indicates a continuing need. In the past 12 months, the facility reported no incidents of retaliation.

Louisiana Office of Juvenile Justice PREA Manual (pages 31-32):
for at least 90 days following a report of sexual abuse, the Agency shall monitor the conduct or treatment of youth or staff who reported the sexual abuse, and of youth who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by youth or staff and shall act promptly to remedy any such retaliation. Monitoring by IS shall include:

1. Review of UORs;
2. Youth violation reports;
3. Housing or Program changes of relevant youth;
4. Negative performance reviews or reassignments of pertinent staff;
5. Periodic status checks of youth; and
6. Follow up discussions with youth reports and victims of sexual assault, staff reporters, housing unit and treatment staff.

Monitoring shall be documented in the IS case file by completing the Protection Against Retaliation Form for the appropriate staff/youth for each PREA related incident, pursuant to established procedures in YS Policy No. A.1.4, Investigative Services Handbook. The Agency shall continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need.

Documentation of monitoring efforts:

The auditor reviewed 19 examples of the Protections Against Retaliation Form for Reporters of Sexual Abuse and observed the form is designed for periodic status checks for 90 days or longer.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated that when retaliation is suspected, the facility takes corrective action, including initiating an investigation, providing additional training, and redirecting staff behavior.

Interview with designated staff member charged with monitoring retaliation:

The PREA compliance manager stated that, in order to detect possible retaliation, they look for indicators such as residents being punished, neglected, or treated differently. Monitoring includes reviewing resident disciplinary reports, housing and program changes, staff performance reviews or reassignments, conducting periodic status checks, and maintaining ongoing conversations with residents.

They further stated that the conduct and treatment of residents and staff who report

sexual abuse, or who were reported to have suffered sexual abuse, are monitored for a period of 90 days. If concerns of potential retaliation persist, monitoring may be extended for an additional 90 days.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (d)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 31):
Monitoring by IS shall include periodic status checks of youth.

Documentation of monitoring in case of residents:
See 115.367 (c).

What was heard, as part of a systematic review of evidence:

Interview with designated staff member charged with monitoring retaliation:
The PREA compliance manager stated that monitoring also includes periodic status checks with residents and staff.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.367 (e)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 31):
If any other individual who cooperates with an investigation expresses a fear of retaliation, the Agency shall take appropriate measures to protect that individual against retaliation.

Documentation of protective measures taken:
See 115.367 (b).

What was heard, as part of a systematic review of evidence:

Interviews with agency head:
The deputy secretary stated that residents and staff are protected from retaliation related to sexual abuse or sexual harassment allegations through the grievance process, housing changes or transfers, removal of alleged abusers, and the provision of emotional support services.

Interview with superintendent:
See 115.367 (b) and 115.367 (c).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

	<p>Reasoning and analysis (by provision): 115.367 (f) N/A</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.368	Post-allegation protective custody
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Interview with superintendent 4. Interviews with residents in isolation (for risk of sexual victimization) <p>Reasoning and analysis (by provision): 115.368 (a): What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility has a policy that residents who allege to have suffered sexual abuse may only be placed in isolation as a last resort if less restrictive measures are inadequate to keep them and other residents safe, and only until an alternative means of keeping all residents safe can be arranged.</p> <p>No residents who alleged to have suffered sexual abuse who were placed in isolation in the past 12 months.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 32): Any use of segregated housing to protect a youth who is alleged to have suffered sexual abuse shall be subject to the requirements of §115.342.</p> <p>What was heard, as part of a systematic review of evidence: Interview with superintendent: The facility director stated that isolation is not used to protect residents who are alleged to have suffered sexual abuse; instead, separation measures are implemented when necessary. The further stated that residents would only be isolated as a last resort when less restrictive measures are inadequate to ensure safety, and only until an alternative means of keeping all residents safe can be arranged.</p> <p>Interviews with residents in isolation (for risk of sexual victimization):</p>

	<p>There were no residents in isolation during the onsite phase of the audit.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.371	Criminal and administrative agency investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Staff Confirmation of Receipt of PREA 4. National Institute of Corrections Certificate for PREA: Investigating Sexual Abuse in a Confinement Setting 5. Investigation reports 6. Interview with superintendent 7. Interview with PREA coordinator 8. Interview with investigative staff 9. Interviews with residents who reported a sexual abuse <p>Findings (By Provision): 115.371 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency/facility has a policy related to criminal and administrative agency investigations.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 32): IS conducted investigations into allegations of sexual abuse and sexual harassment shall be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports pursuant to YS Policy No. A.1.4.</p> <p>What was heard, as part of a systematic review of evidence: Interview with investigative staff: The investigator confirmed that investigations into allegations of sexual abuse and sexual harassment may be initiated immediately upon receipt of an allegation. The investigator further stated that anonymous and third-party reports of sexual abuse and sexual harassment are investigated in the same manner as all other allegations.</p>

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (b)

What was read, as part of a systematic review of evidence:

Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations involving juvenile victims pursuant to § 115.334.

Louisiana Office of Juvenile Justice PREA Manual (pages 32-33):

Where sexual abuse is alleged, the Agency shall use investigators who have received special training in sexual abuse investigations involving juvenile victims.

Review of training records/logs of investigative staff:

See 115.334 (b).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that they received training specific to conducting sexual abuse and sexual harassment investigations in confinement settings. They further stated that they completed the training required by §115.331, as well as the specialized training required for investigators. The investigator reported that this specialized training included techniques for interviewing juvenile victims of sexual abuse, the proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence necessary to substantiate a case for administrative action or referral for prosecution.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (c)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 33):

Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator.

Review of investigative reports:

The auditor reviewed 18 completed investigative reports with findings. These included two unfounded and five unsubstantiated allegations, as well as one substantiated allegation, of resident-on-resident sexual abuse; eight unsubstantiated allegations of resident-on-resident sexual harassment; and two unfounded allegations of staff-on-resident sexual abuse.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that the first steps in initiating an investigation would be to ensure all members of the sexual assault response team are notified of the allegation and that the involved parties are separated and examined by medical staff. The investigator stated these actions are typically taken immediately upon receipt of the allegation. The investigator further explained that the investigation process includes determining whether video evidence is available to compare with the allegation, reviewing relevant medical reports, interviewing the victim or complainant, identifying and interviewing witnesses, interviewing the subject or suspect, and reaching an investigative outcome. The investigator stated that direct evidence gathered may include clothing, possible DNA evidence, video footage, and interviews, while circumstantial evidence may include prior sexual abuse complaints, recent behavior reports, indirect witness statements, and recorded telephone conversations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency does not terminate an investigation solely because the source of the allegation recants the allegation.

Louisiana Office of Juvenile Justice PREA Manual (page 33):

The Agency shall not terminate an investigation solely because the source of the allegation recants the allegation.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator confirmed an investigation would not be terminated solely because the source of the allegation recants the allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (e)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 33):

When the quality of evidence appears to support criminal prosecution, the Agency shall conduct compelled interviews, only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution as appropriate.

Investigation reports:
See 115.371 (c).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that when evidence suggests a prosecutable crime may have occurred, they would consult with investigative services supervisory staff, who would then obtain input from the agency's legal department before any compelled interviews are conducted.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (f)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 33):

The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as youth or staff. A youth who alleges sexual abuse shall not be compelled to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator confirmed that under no circumstances would an investigator require a resident who alleges sexual abuse to submit to a polygraph examination or truth telling device as a condition for proceeding with an investigation.

Interviews with residents who reported a sexual abuse:

There were three residents, present during the onsite phase of the audit, who reported a sexual abuse allegation. The residents stated that the facility did not require a polygraph examination concerning what happened.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (g)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 33):

Administrative investigations shall include an effort to determine whether staff actions or failures to act contributed to the abuse; and shall be documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that during an administrative investigation, staff actions or failures to act would be assessed through review of video evidence, documentation, and testimonial evidence to determine whether any policies or rules were violated. The investigator further stated that administrative investigations are documented in written reports that include the allegation, persons involved, video review, medical and mental health reports, interviews, case histories, findings, and any confirmed rule violations.

Investigation reports:

See 115.371 (c). The auditor observed that the investigations are documented in written reports that include a discussion of all evidence.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (h)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 33):

Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible.

Criminal investigation reports:

The auditor found there were no criminal investigation reports to review during the audit period.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that criminal investigations are documented in written reports. The investigator further stated that such reports include victim and suspect information, the allegation, summaries of written and verbal reports, medical reports, descriptions of any video evidence, summaries of interviews, and investigative findings.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (i)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Substantiated allegations of conduct that appear to be criminal are referred for prosecution.

There were no substantiated allegations of conduct appearing to be criminal that were referred for prosecution since the last PREA audit.

Louisiana Office of Juvenile Justice PREA Manual (page 33):
substantiated allegations of conduct that appears to be criminal shall be referred for prosecution.

Review of cases referred for prosecution:
See 115.371 (h).

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The investigator stated that cases are referred for prosecution when there are substantiated allegations that possibly or clearly involve criminal conduct.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (j)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency retains all written reports pertaining to the administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

Louisiana Office of Juvenile Justice PREA Manual (pages 33-34):

The Agency shall retain all written reports referenced in subparagraphs 8 and 9 of this section for as long as the alleged abuser is incarcerated or employed by the Agency, plus five (5) years, unless the abuse was committed by a youth and applicable law requires a shorter period of retention.

Investigation reports:

See 115.371 (c).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (k)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 34):

The departure of the alleged abuser or victim from the employment or control of the facility or agency shall not provide a basis for terminating an investigation.

What was heard, as part of a systematic review of evidence:

Interview with investigative staff:

The Investigator confirmed investigators continue to conduct investigations when a staff member alleged to have committed sexual abuse or sexual harassment terminates employment prior to a completed investigation into his/her conduct.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.371 (m)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 34):

When local law enforcement investigates sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.

What was heard, as part of a systematic review of evidence:

Interviews with superintendent and PREA coordinator:

The PREA coordinator stated that when an outside agency investigates allegations of sexual abuse, the agency remains informed of the progress of the investigation through ongoing communication with investigators. They stated that local law enforcement and OJJ field investigators conduct investigations in non-secure group home settings, and the Office of Juvenile Justice (OJJ) field investigator maintains contact with local law enforcement via email and phone. Upon completion of the investigation, the facility PREA compliance manager, OJJ field investigator, or PREA coordinator requests the final police report from local law enforcement.

Interviews with superintendent:

The facility director stated that when an outside agency investigates allegations of sexual abuse, Investigative Services (IS) maintains contact with the investigating agency and provides updates to the facility director to ensure the facility remains informed of the progress of the investigation.

Interview with PREA compliance manager:

The PREA compliance manager stated that the OJJ does not ordinarily utilize outside agencies to investigate allegations of sexual abuse. However, if an outside agency were involved, the facility would request updates to remain informed of the progress of the investigation.

Interview with investigative staff:

The investigator stated that when an outside agency investigates an incident of sexual abuse at the facility, staff would cooperate fully and provide any information requested to support the investigation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.372	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Interview with investigative staff <p>Reasoning and analysis (by provision): 115.372 (a): What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency imposes a standard of a preponderance of the evidence or a lower standard of proof when determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 34): In determining whether allegations of sexual abuse or sexual harassment are substantiated, IS shall not use a standard higher than a preponderance of the evidence.</p> <p>What was heard, as part of a systematic review of evidence: Interview with investigative staff: The investigator stated that the standard of evidence required to substantiate allegations of sexual abuse or sexual harassment in administrative investigations is a preponderance of the evidence.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.373	Reporting to residents
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Provision of Information to Youth - Sexual Abuse form 4. Interview with superintendent 5. Interview with investigative staff

6. Interviews with residents who reported a sexual abuse

Reasoning and analysis (by provision):

115.373 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency has a policy requiring that any resident who makes an allegation that he or he suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency.

In the past 12 months, the agency/facility completed 18 criminal and/or administrative investigations of alleged resident sexual abuse. Of those completed investigations, 18 residents were notified verbally or in writing of the results.

Louisiana Office of Juvenile Justice PREA Manual (page 34):

Following an investigation into a youth's allegation of sexual abuse in a secure facility, IS shall inform the youth as to whether the allegation has been substantiated, unsubstantiated or unfounded. IS shall generate a "Youth Letter" through the Central Registry Database and distribute the letter to the appropriate Program Manager of the youth's assigned facility. The Program Manager or designee shall ensure that the youth receives a copy of the "Youth Letter" and that a copy of the letter with the youth's signature is placed in the youth's file. The assigned investigator shall place a copy of the "Youth Letter" in the investigative case file, along with receipts that this distribution took place.

Review of resident outcome notifications:

The auditor reviewed eighteen applicable examples of the Provision of Information to Youth - Sexual Abuse form and observed the forms informs residents as to whether an allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated the facility notifies a resident who makes an allegation of sexual abuse, that the allegation has been determined to be substantiated, unsubstantiated, or unfounded.

Interview with investigative staff:

The investigator stated they are aware that when a resident makes an allegation of sexual abuse, the resident must be informed as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.373 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity in order to inform the resident of the outcome of the investigation.

There were no investigations of alleged resident sexual abuse completed by an outside agency during the past 12 months.

Louisiana Office of Juvenile Justice PREA Manual (page 34):

If the Agency did not conduct the investigation, it shall request the relevant information from the investigative Agency in order to inform the youth.

Review of resident outcome notifications:

See 115.373 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.373 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Following a resident's allegation that a staff member has committed sexual abuse against the resident, the agency/facility subsequently informs the resident (unless the agency/facility has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the resident's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility.

There have been no substantiated or unsubstantiated complaints (i.e., not unfounded) of sexual abuse committed by a staff member against a resident in the past 12 months.

Louisiana Office of Juvenile Justice PREA Manual (page 34):

Following a youth's allegation that a staff member has sexually abused the youth, IS shall inform the youth (except where IS has found the allegation to be unfounded) whenever:

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

Review of resident outcome notifications:

The auditor reviewed the Provision of Information to Youth – Sexual Abuse form and observed that the form includes the required standard provisions.

What was heard, as part of a systematic review of evidence:

Interviews with residents who reported a sexual abuse:

Three residents present during the onsite phase of the audit reported a sexual abuse allegation. Each of the residents stated that the person involved in the allegation was another resident.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.373 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Following a resident's allegation that he or she has been sexually abused by another resident in an agency facility, the agency subsequently informs the alleged victim whenever:

- The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Louisiana Office of Juvenile Justice PREA Manual (page 35):

Following a youth's allegation that he or she has been sexually abused by another youth, IS shall inform the alleged victim whenever:

1. The Agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or
2. The Agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility.

Review of resident outcome notifications:

The auditor reviewed the Provision of Information to Youth – Sexual Abuse form and observed that the form includes the required standard provisions. Examples documented include juveniles being moved to a different unit or housing area.

What was heard, as part of a systematic review of evidence:

	<p>Interviews with residents who reported a sexual abuse: When asked the applicable follow-up questions under §115.373, the residents reported that they were informed when the other resident had been charged and found guilty of the offense. All three residents also indicated that they feel safe in the facility.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.373 (e) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency has a policy that all notifications to residents described under this standard are documented.</p> <p>In the past 12 months, seven notifications to residents were made pursuant to this standard, and all seven notifications were documented.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 35): All such notifications or attempted notifications shall be documented.</p> <p>Review of resident outcome notifications: See 115.373 (a).</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.373 (f) N/A</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.376	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)

2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025

Reasoning and analysis (by provision):

115.376 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

Louisiana Office of Juvenile Justice PREA Manual (page 37):
Staff shall be subject to disciplinary sanctions up to and including termination for violating Agency sexual abuse or sexual harassment policies pursuant to YS Policy No. A.2.1.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.376 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

In the past 12 months, no staff from the facility were found to have violated agency sexual abuse or sexual harassment policies.

Louisiana Office of Juvenile Justice PREA Manual (page 37):
Termination shall be the presumptive disciplinary sanction for staff who has engaged in sexual abuse.

Review of records of terminations, resignations or other sanctions for violation of sexual abuse or harassment policies:
There were no terminations, resignations or other sanctions for violation of sexual abuse or harassment policies.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.376 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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.

In the past 12 months, no staff from the facility were disciplined short of termination for violating agency sexual abuse or sexual harassment policies.

Louisiana Office of Juvenile Justice PREA Manual (page 37):
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.

Review of records of disciplinary sanctions taken against staff for violations of the agency sexual abuse or sexual harassment policies in the past 12 months:
See 115.376 (b).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.376 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
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.

In the past 12 months, no staff from the facility were reported to law enforcement or licensing boards following termination, or resignation prior to termination, for violating agency sexual abuse or sexual harassment policies.

Louisiana Office of Juvenile Justice PREA Manual (page 37):
All terminations for violations of Agency sexual abuse or sexual harassment policies, or resignations by staff who resigned to avoid termination in accordance with Civil Service Rules, shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.377	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Interview with superintendent

Reasoning and analysis (by provision):

115.377 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. Agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with residents.

In the past 12 months, no contractors or volunteers have been reported to law enforcement agencies and relevant licensing bodies for engaging in sexual abuse of residents.

Louisiana Office of Juvenile Justice PREA Manual (page 38):

Any contractor or volunteer who engages in sexual abuse at a minimum shall be prohibited from contact with youths and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.377 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility takes appropriate remedial measures and considers whether to prohibit further contact with residents in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer.

Louisiana Office of Juvenile Justice PREA Manual (page 38):

The facility shall take appropriate remedial measures and shall consider whether to prohibit further contact with youths, in the case of any other violation of Agency sexual abuse or sexual harassment policies by a contractor or volunteer.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated that in cases of any violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, the facility takes remedial

measures and prohibits further contact with residents. They further stated that the contractor or volunteer would be escorted out of the facility pending the conclusion of the investigation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.378 Interventions and disciplinary sanctions for residents

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Interview with superintendent
4. Interview with medical and mental health staff

Reasoning and analysis (by provision):

115.378 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the resident engaged in resident-on-resident sexual abuse. Residents are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for resident-on-resident sexual abuse.

In the past 12 months, there were no administrative findings of resident-on-resident sexual abuse and no criminal findings of guilt for resident-on-resident sexual abuse at the facility.

Louisiana Office of Juvenile Justice PREA Manual (page 38):

Pursuant to YS Policy No. B.5.1, a youth may be subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative finding that the youth engaged in youth-on-youth sexual abuse, or following a criminal finding of guilt for youth-on-youth sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (b)**What was read, as part of a systematic review of evidence:**

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, the facility policy requires that residents in isolation have daily access to large muscle exercise, legally required educational programming, and special education services. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation receive daily visits from a medical or mental health care clinician. In the event a disciplinary sanction for resident-on resident sexual abuse results in the isolation of a resident, residents in isolation have access to other programs and work opportunities to the extent possible.

In the past 12 months, no residents were placed in isolation as a disciplinary sanction for resident-on-resident sexual abuse. Therefore, there were no residents denied daily access to large muscle exercise, legally required educational programming, special education services, or other programs and work opportunities for this reason.

Louisiana Office of Juvenile Justice PREA Manual (page 38):

Any disciplinary sanctions shall be commensurate with the nature and circumstances of the abuse committed, the youth's disciplinary history, and the sanctions imposed for comparable offenses by other youth with similar histories.

In the event a disciplinary sanction results in the placement of a youth in the Behavior Intervention (BI) Unit, the youth shall not be denied daily large-muscle exercise or access to any legally required educational programming or special education services. Youth in BI shall receive daily visits from a medical or mental health care clinician. Youths shall also have access to other programs and work opportunities to the extent possible. BI paperwork must be completed as per YS Policy B.2.21.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated that residents are subject to therapy following an administrative or criminal finding that they engaged in resident-on-resident sexual abuse. They further stated that sanctions are proportionate to the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for similar offenses by other residents with similar histories. They confirmed that mental disability or mental illness is considered when determining sanctions and that isolation is not used as a disciplinary sanction.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):**115.378 (c)****What was read, as part of a systematic review of evidence:**

Louisiana Office of Juvenile Justice PREA Manual (page 38):
The disciplinary process shall consider whether a youth's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

See 115.378 (b).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. If the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending resident to participate in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives. Access to general programming or education is not conditional on participation in such interventions.

Louisiana Office of Juvenile Justice PREA Manual (page 38):

The facility shall consider whether to offer the offending youth participation in such therapy, counseling or other interventions designed to address and correct underlying reasons or motivations for the abuse. Participation in such interventions may be required as a condition of access to any rewards-based behavior management system or other behavior-based incentives, but not as a condition to access to general programming or education.

What was heard, as part of a systematic review of evidence:

Interview with mental health staff:

The mental health coordinator stated that the facility offers therapy, counseling, and other intervention services designed to address and correct the underlying reasons or motivations for sexual abuse and considers whether to offer these services to an offending resident, in accordance with §115.378.

They further stated that participation in such services is not required as a condition of access to any rewards-based behavior management system, programming, or education.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency disciplines residents for sexual contact with staff only upon finding that the staff member did not consent to such contact.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

The Agency may discipline a youth for sexual contact with staff only upon a finding that the staff member did not consent to such contact.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (f)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

For the purpose of disciplinary action, a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.378 (g)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency prohibits all sexual activity between residents. The agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

All sexual activity between youths is prohibited. The Agency may, at its discretion, discipline youths for such activity. However, such activity shall not be deemed to constitute sexual abuse if it determines that the activity is not coerced.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.381	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice Intake and Quarterly Staffing Screening and Housing Assessment dated August 2024 4. Documented follow-up meetings 5. Interview with staff responsible for risk screening 6. Interviews with medical and mental health staff 7. Interviews with residents who disclose sexual victimization at risk screening <p>Evidence (corrective action):</p> <ol style="list-style-type: none"> 1. Corrective action statement (05/04/2026) 2. Mental health referrals for residents who previously did not receive follow-up meetings (04/28/2026) <p>Reasoning and analysis (by provision): 115.381 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: All residents at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.341 are offered a follow-up meeting with a medical or mental health practitioner. The follow-up meeting was offered within 14 days of the intake screening. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. In the past 12 months, the percent of residents who disclosed prior victimization during screening who were offered a follow up meeting with a medical or mental health practitioner: 2%</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 39): If the screening indicates that a youth has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, staff shall ensure that the youth is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the direct admission screening. The youth would be seen immediately by the appropriate medical/mental health staff.</p> <p>Document review: There were seven residents identified on the roster provided on the first day of the audit who had disclosed prior sexual victimization during risk screening. No documented evidence of follow-up meetings was provided for review.</p>

Through corrective action, the PREA Compliance Manager provided a corrective action statement on May 4, 2026, regarding Standard §115.381(a)-(b). The statement confirmed that, effective immediately, any youth identified during intake as having a history of prior sexual victimization or previous perpetration of sexual abuse must be referred to mental health services immediately.

The statement further required that referrals meeting this criterion be provided to the Treatment Director and PREA Compliance Manager, and that documentation be completed before the end of the shift during which the intake occurred. Intake monitoring was implemented for the period beginning March 26, 2026, through May 4, 2026, to ensure compliance with the 14-day follow-up requirement.

Additionally, seven residents who had not previously received follow-up meetings received mental health referrals. The auditor reviewed the referrals and noted that they were completed on April 28, 2026.

Lastly, there was one applicable follow-up meeting that occurred during the corrective action period. The auditor reviewed the Louisiana Office of Juvenile Justice Intake and Quarterly Staffing Screening and Housing Assessment form, along with documentation of the follow-up meeting, and observed that the meeting was conducted in accordance with the standard's 14-day requirement.

What was heard, as part of a systematic review of evidence:

Interview with staff responsible for risk screening:

The mental health coordinator stated if a screening indicates that a resident has experienced prior sexual victimization, whether in an institutional setting or in the community, they are offered a follow-up meeting with a medical/and or mental health practitioner within 14 days.

Interviews with residents who disclose sexual victimization at risk screening:

Three residents who disclosed prior sexual victimization during risk screening were interviewed. One resident stated that they received a follow-up meeting with a mental health practitioner within 14 days of intake. One resident stated that they were not offered a follow-up meeting. The other resident stated that they had not been a victim of sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

See 115.381 (a) Document review.

Reasoning and analysis (by provision):

115.381 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

All residents who have previously perpetrated sexual abuse, as indicated during the screening pursuant to § 115.341, are offered a follow-up meeting with a mental health practitioner. The follow-up meeting was offered within 14 days of the intake

screening. Mental health staff maintain secondary materials (e.g., form, log) documenting compliance with the above required services. In the past 12 months, the percent of residents of residents who previously perpetrated sexual abuse, as indicated during screening, who were offered a follow up meeting with a mental health practitioner: 0%

Louisiana Office of Juvenile Justice PREA Manual (page 39):

If the screening indicates that a youth has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, staff shall ensure that the youth is offered a follow-up meeting with a mental health practitioner within 14 days of the direct admission screening.

Document review:

See 115.381 (a) Document review.

There were six residents identified on the roster provided on the first day of the audit who had previously perpetrated sexual abuse. No documented evidence of follow-up meetings was provided for review.

There was one applicable follow-up meeting that occurred during the corrective action period. The auditor reviewed the Louisiana Office of Juvenile Justice Intake and Quarterly Staffing Screening and Housing Assessment form, along with documentation of the follow-up meeting, and observed that the meeting was conducted in accordance with the standard's 14-day requirement.

What was heard, as part of a systematic review of evidence:

Interview with staff responsible for risk screening:

The mental health coordinator stated if a screening indicates that a resident has previously perpetrated sexual abuse, whether in an institutional setting, or in the community, they are offered a follow-up meeting with a medical/and or mental health practitioner within 14 days.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

See 115.381 (b) Document review.

Reasoning and analysis (by provision):

115.381 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Information related to sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

Any information related to sexual victimization or abusiveness that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security

and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.381 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

Medical and mental health practitioners shall obtain an informed consent from youth before reporting information about prior sexual victimization that did not occur in an institutional setting unless the youth is under the age of 18.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff:

The health services administrator stated that informed consent is not required prior to reporting prior sexual victimization that did not occur in an institutional setting, as residents are in the custody of the Office of Juvenile Justice and staff are mandated reporters. They further stated that informed consent is required for residents age 18 and older.

Interview with mental health staff:

The mental health coordinator reported that informed consent is obtained from residents prior to reporting prior sexual victimization that did not occur in an institutional setting, in accordance with §115.381. For residents under the age of 18, informed consent is not required when the reported victimization occurred within the facility. For residents age 18 and older, the requirement is not applicable when the victimization occurred outside of the facility.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.382	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025

1. Memorandum of agreement between Louisiana Office of Juvenile Justice and the Wellspring Alliance for Families dated January 16, 2025
2. Medical Provider Progress Notes
3. Mental health notes
4. Mental Health Special Needs Progress Notes
5. Interviews with medical and mental health staff
6. Interviews with residents who reported a sexual abuse
7. Interviews with security staff and non-security staff first responders
8. Site review

Reasoning and analysis (by provision):

115.382 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis.

Louisiana Office of Juvenile Justice PREA Manual (page 40):

Youth who are victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment.

Document review:

The auditor reviewed the memorandum of agreement between Louisiana Office of Juvenile Justice and the Wellspring Alliance for Families dated January 16, 2025, and observed that the organization provides crisis intervention services.

Review of medical/mental health secondary materials describing access to services:

The auditor reviewed Medical Provider Progress Notes, mental health notes, and Mental Health Special Needs Progress Notes and noted that all youth were referred to mental health services and had access to emergency medical treatment and crisis intervention services.

What was heard, as part of a systematic review of evidence:

Interview with medical staff:

The health services administrator stated that resident victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. "Timely" was defined as services being provided as soon as the abuse is learned of. The nature and scope of services are determined based on

professional judgment and, when appropriate, include referral to a hospital in accordance with policy. They further indicated that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

Interview with mental health staff:

The mental health coordinator stated that resident victims of sexual abuse receive timely and unimpeded access to emergency medical treatment and crisis intervention services. "Timely" was defined as services being provided as soon as the abuse is reported. The nature and scope of these services are determined based on professional judgment. They further stated that victims of sexual abuse are offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis.

Interviews with residents who reported a sexual abuse:

Three residents present during the onsite phase of the audit had previously reported sexual abuse. All three residents stated that they had the opportunity to see medical or mental health staff in a timely manner after reporting the abuse. The residents indicated that services were provided immediately or on the same day.

Community outreach:

The auditor contacted the Wellspring Alliance for Families and confirmed victim advocates would be available to provide emotional support services to a victim of sexual abuse.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.382 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim pursuant to § 115.362 and shall immediately notify the appropriate medical and mental health practitioners.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

If no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, staff first responders shall take preliminary steps to protect the victim pursuant to Section VIII above and shall immediately notify the appropriate medical and mental health practitioners.

Review of documentation demonstrating immediate notification of appropriate medical and mental health practitioners:

See 115.382 (a).

What was heard, as part of a systematic review of evidence:

Interviews with security staff and non-security staff first responders:
Staff first responders stated they would protect the victim and notify the appropriate medical and mental health practitioners.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.382 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Resident victims of sexual abuse while incarcerated are offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Louisiana Office of Juvenile Justice PREA Manual (page 39):

Youth victims of sexual abuse while incarcerated shall be offered timely information about, and timely access to, emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff:

The health services administrator stated victims of sexual abuse would be offered timely information about access to emergency contraception and sexually transmitted infection prophylaxis offsite.

Interviews with residents who reported a sexual abuse:

Three youth were interviewed regarding this provision. All three indicated that they info about, information about or offered treatment following the incident, including information related to sexually transmitted infection prevention

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.382 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

	<p>Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 40): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.383	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana law, Act No. 229 4. Medical Provider Progress Notes 5. Mental health notes 6. Mental Health Special Needs Progress Notes 7. Interviews with medical and mental health staff 8. Interviews with residents who reported a sexual abuse <p>Reasoning and analysis (by provision): 115.383 (a)</p> <p>What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility offers medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 40): The facility shall offer medical and mental health evaluation and, as appropriate, treatment to all youth who have been victimized by sexual abuse regardless of where it occurred (any prison, jail, lockup, or juvenile facility).</p> <p>What was observed as part of a systematic review of evidence:</p>

Site review:

Services would be available through Wellspring Alliance for Families, Ochsner LSU Health, or St. Francis Medical Center.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (b)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 40):

The evaluation and treatment of such victims shall include, as appropriate, follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to or placement in other facilities, or their release from custody.

Review of medical records:

The auditor reviewed Medical Provider Progress Notes, mental health notes, and Mental Health Special Needs Progress Notes and observed that residents were provided with medical and mental health services.

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The health services administrator stated that the evaluation and treatment of residents who have been victimized includes following the recommendations outlined in hospital emergency room notes and providing outside services when needed.

The mental health coordinator stated that the evaluation and treatment of residents who have been victimized includes trauma-focused counseling provided either at the facility or through referral to Wellspring Alliance for Families, as well as notification of the psychologist.

Interviews with residents who reported a sexual abuse:

Three residents who reported sexual abuse were present during the onsite phase of the audit. When asked whether a medical or mental health doctor or nurse discussed other services available to them, the residents indicated that such information was not required to be provided by medical staff.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (c)

What was read, as part of a systematic review of evidence:

Louisiana Office of Juvenile Justice PREA Manual (page 40):

The facility shall provide such victims with medical and mental health services

consistent with the community level of care.

Review of medical records:

See 115.383 (b).

What was heard, as part of a systematic review of evidence:

Interviews with medical and mental health staff:

The health services administrator and mental health coordinator both stated medical and mental health services are consistent with the community level of care.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.383 (d) N/A

Swanson Center for Youth at Monroe is an all-male facility.

115.383 (e) N/A

Swanson Center for Youth at Monroe is an all-male facility.

Reasoning and analysis (by provision):

115.383 (f)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Resident victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

Louisiana Office of Juvenile Justice PREA Manual (page 41):

Youth victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Review of medical records:

See 115.383 (b). The auditor did not observe any allegations that required testing for sexually transmitted infections.

What was heard, as part of a systematic review of evidence:

Interviews with medical staff:

The nurse stated victims of sexual abuse shall be offered tests for sexually transmitted infections as medically appropriate.

Interviews with residents who reported a sexual abuse:

See 115.383 (b).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (g)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Treatment services are provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Louisiana Office of Juvenile Justice PREA Manual (page 41): Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Louisiana law, Act No. 229 provides that any medical treatment services provided to a resident will be at no cost to him or his family.

What was heard, as part of a systematic review of evidence:

Interviews with residents who reported a sexual abuse:
See 115.383 (b).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.383 (h)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The facility attempts to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offers treatment when deemed appropriate by mental health practitioners.

Louisiana Office of Juvenile Justice PREA Manual (page 41): The facility shall attempt to conduct a mental health evaluation of all known youth-on-youth abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners.

Review of mental health records:

See 115.383 (a). There was one substantiated allegation of resident-on-resident sexual abuse. The auditor observed that the offending resident was evaluated by mental health services.

What was heard, as part of a systematic review of evidence:

Interview with mental health staff:

The mental health coordinator stated that the facility conducts a mental health evaluation of all known resident-on-resident abusers and offers treatment when appropriate.

They further indicated that evaluations are conducted during intake if there is a known history of abuse. If the abuse occurs within the facility, the evaluation is conducted after the allegation is learned.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

115.386 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. PREA Sexual Abuse Critical Incident Review Form
4. Interview with superintendent
5. Interview with PREA compliance manager
6. Interview with incident review team

Evidence (corrective action):

1. Corrective action statement (04/13/2026)

Reasoning and analysis (by provision):

115.386 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility conducts a sexual abuse incident review at the conclusion of every sexual abuse criminal or administrative investigation unless the allegation has been determined to be unfounded.

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only “unfounded” incidents, was 13.

Louisiana Office of Juvenile Justice PREA Manual (page 41):

The facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded pursuant to YS Policy No. A.1.4.

Review of completed criminal or administrative investigations of sexual abuse:
The auditor reviewed 14 PREA Sexual Abuse Critical Incident Review Forms and observed the form is used to document incident reviews at the conclusion of criminal or administrative sexual abuse investigations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.386 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility ordinarily conducts a sexual abuse incident review within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility that were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents: 2

Louisiana Office of Juvenile Justice PREA Manual (page 41):

Such review shall occur within 30 days of the conclusion of the investigation.

Review of completed criminal or administrative investigations of sexual abuse:

The auditor reviewed 14 completed PREA Sexual Abuse Critical Incident Review Forms and observed that five were completed within 30 days of the conclusion of the investigation. However, nine reviews were not completed within the required timeframe; this was addressed through corrective action.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is completed.

The PREA Coordinator provided a statement on April 14, 2026, confirming that sexual abuse incident reviews will be conducted within 30 days of the conclusion of the criminal or administrative sexual abuse investigation.

Reasoning and analysis (by provision):

115.386 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

Louisiana Office of Juvenile Justice PREA Manual (page 42):

The review team shall include the Youth Facilities Director - Statewide or their designee, PREA Compliance Manager, and upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners.

Documentation of review team minutes or reports:

The auditor reviewed 14 Sexual Abuse Incident Review forms and observed that the facility conducts sexual abuse incident reviews using a multidisciplinary team

approach.

What was heard, as part of a systematic review of evidence:

Interview with superintendent:

The facility director stated the facility has a sexual abuse incident review team; the team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.386 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1)-(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA compliance manager.

Louisiana Office of Juvenile Justice PREA Manual (page 42):

The review team shall:

1. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect or respond to sexual abuse;
2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; LGBTIQ identification, status, or perceived status; gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility;
3. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
4. Assess the adequacy of staffing levels in that area during different shifts;
5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and

IS shall prepare the Sexual Abuse Critical Incident Review Form, including but not necessarily limited to determinations made pursuant to subparagraphs (4)(a)-(4)(e) of this section, and any recommendations for improvement. IS shall complete Sections A and B of the Incident Review Form and submit the completed form to the Facility Director, PREA Compliance Manager, and PREA Coordinator within 24 hours of the incident review.

Documentation of review team minutes or reports:

The auditor reviewed the Sexual Abuse Incident Review form and observed the form includes the standard provision requirements.

What was heard, as part of a systematic review of evidence:

Interview with superintendent/incident review team:
The facility director stated that information from sexual abuse incident reviews is used to make any corrections needed, including identifying policy, training, or practice issues that may require change. They further stated that the review team considers whether incidents or allegations were motivated by race, ethnicity, gang affiliation, or other group dynamics. The review team examines the area where the incident allegedly occurred to assess whether physical barriers may have enabled abuse, assesses the adequacy of staffing levels during different shifts, and evaluates whether monitoring technology should be deployed or enhanced to supplement staff supervision.

Interview with PREA Compliance Manager:
The PREA compliance manager stated that when the facility conducts a sexual abuse incident review, a report is prepared documenting the team's findings, including required determinations and any recommendations for improvement. They stated they are part of the incident review team and reported that no trends had been identified. They further stated that corrective action is taken as needed based on the review's findings and recommendations.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action not required.

Reasoning and analysis (by provision):

115.386 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The facility implements the recommendations for improvement or documents its reasons for not doing so.

Louisiana Office of Juvenile Justice PREA Manual (page 42):
The Facility Director and PREA Compliance Manager shall review the recommendations in the Sexual Abuse Critical Incident Review Form within 10 days of the incident review. The facility shall implement any recommendations for improvement, or shall document its reasons for not doing so in Section C of the Sexual Abuse Critical Incident Review Form. After reviewing the recommendations and making the appropriate notations in Section C, the Facility Director or designee and PREA Compliance Manager must sign the form and the PREA Compliance Manager must then forward the completed form to the PREA Coordinator and maintain a copy at the facility.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Evidence relied upon in making the compliance determinations:

1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)
2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025
3. Survey of Sexual Victimization Substantiated Incident Form (Juvenile)
4. Louisiana Office of Juvenile Justice 2025 Annual PREA Report

Reasoning and analysis (by provision):

115.387 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization conducted by the Department of Justice.

Louisiana Office of Juvenile Justice PREA Manual (page 43):

The Agency shall collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

Review of incident-based data collection:

The auditor reviewed the Survey of Sexual Victimization Substantiated Incident Form (Juvenile) for verification the agency uses a standardized instrument and set of definitions.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency aggregates the incident-based sexual abuse data at least annually.

Louisiana Office of Juvenile Justice PREA Manual (page 43):

The Agency shall aggregate the incident-based sexual abuse data at least annually.

Review of incident-based data collection:

The auditor reviewed aggregated data from 2015 - 2025.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Victimization (SSV) conducted by the Department of Justice.

Louisiana Office of Juvenile Justice PREA Manual (page 43):
The incident-based data collected shall include the data necessary to answer all questions from the most recent version of the "Survey of Sexual Violence" conducted by the U.S. DOJ.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (d)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
The agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Louisiana Office of Juvenile Justice PREA Manual (page 43):
The Agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Review of incident-based documents:
The auditor reviewed incident-based documents including investigative reports for allegations of sexual abuse and sexual harassment, unusual occurrence reports, and sexual abuse incident reviews team meeting reports for the 12 month audit period.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.387 (e)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:
Louisiana Office of Juvenile Justice does contract for the confinement of its residents.

	<p>Louisiana Office of Juvenile Justice PREA Manual (page 43): The Agency shall collect data which can be utilized to reduce the risk of sexual abuse and sexual harassment occurring within its secure care and contract facilities.</p> <p>Review of incident-based and aggregated data from private facilities: The auditor reviewed the Louisiana Office of Juvenile Justice 2024 Annual PREA Report and observed the report includes incident-based and aggregated data from private facilities.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.387 (f) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The Department of Justice (DOJ) requested data from the previous calendar year.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 43): Upon request, all such data from the previous calendar year shall be provided to the U.S. DOJ no later than June 30th.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.388	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025 3. Louisiana Office of Juvenile Justice 2025 Annual PREA Report 4. Interview with agency head 5. Interview with PREA coordinator 6. Interview with PREA compliance manager <p>Reasoning and analysis (by provision): 115.388 (a) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:</p>

The agency reviews data collected and aggregated pursuant to §115.387 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, and training, including:

1. Identifying problem areas;
2. Taking corrective action on an ongoing basis; and
3. Preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole.

Louisiana Office of Juvenile Justice PREA Manual (page 44):

The Agency shall review data collected and aggregated in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including: identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as the Agency as a whole.

Review of documentation of corrective action plans:

The auditor reviewed the Louisiana Office of Juvenile Justice 2025 Annual PREA Report

and observed the report includes identified problem areas and corrective actions taken during the year.

What was heard, as part of a systematic review of evidence:

Interview with agency head:

The deputy secretary stated that incident-based sexual abuse data is used to identify problem areas and inform adjustments to staffing, training, and operational practices. They stated that corrective actions are taken on an ongoing basis to improve the effectiveness of sexual abuse prevention, detection, and response.

Interview with PREA coordinator:

The PREA coordinator reported that the agency reviews data collected and aggregated pursuant to §115.387 to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies and training. This review occurs during monthly meetings with department heads, the facility director, and the PREA compliance manager, during which prevention, detection, response efforts, training needs, and areas of noncompliance are discussed.

They further stated that data collected pursuant to §115.387 are securely retained in locked file cabinets and within the Investigative Services database and PREA database. Requests for information from outside sources must be submitted through the Office of Juvenile Justice legal department, and identifying information is redacted prior to release.

Additionally, they confirmed that the agency takes corrective action on an ongoing basis based on this data. They reported that the agency prepares an annual report of its findings and corrective actions for each facility and the agency as a whole. Data are collected monthly from each secure and non-secure facility, compiled

annually, and used to produce the PREA Annual Report, which is subsequently published on the agency's website.

Interview with PREA compliance manager:

The PREA compliance manager reported that facility-level data plays a critical role in the agency's review process. They stated that data collected from the facility is used to identify problem areas and to improve the effectiveness of sexual abuse prevention, detection, and response policies and training.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.388 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The annual report includes a comparison of the current year's data and corrective actions with those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

Louisiana Office of Juvenile Justice PREA Manual (page 44):

Such report shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the Agency's progress in addressing sexual abuse.

Review of annual reports:

The auditor reviewed the Louisiana Office of Juvenile Justice 2025 Annual PREA Report

and observed the report provides an assessment of the agency's progress in addressing sexual abuse and a comparison of the current year's data and corrective actions with those from prior years.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.388 (c)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency makes its annual report readily available to the public at least annually through its website. The annual reports are approved by the agency head.

Louisiana Office of Juvenile Justice PREA Manual (page 44):

The Agency may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility but must indicate the nature of the material redacted.

	<p>Agency website review: The auditor reviewed the agency’s website at https://ojj.la.gov/page/resources-reports and observed the annual reports are published. The reports are approved by the Deputy Secretary.</p> <p>What was heard, as part of a systematic review of evidence: Interviews with agency head: The deputy secretary stated that they will approve annual reports prepared pursuant to §115.388 and noted that they are new to the position.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.388 (d) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: When the agency redacts material from an annual report for publication the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The agency indicates the nature of material redacted.</p> <p>Review of published annual reports: The auditor reviewed the Louisiana Office of Juvenile Justice 2025 Annual PREA Report and observed no personal identifying information.</p> <p>What was heard, as part of a systematic review of evidence: Interviews with PREA coordinator: The PREA coordinator stated that materials typically redacted from the annual report include personally identifiable information.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.389	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Louisiana Office of Juvenile Justice PREA Manual, 7th edition, dated 2025

3. Louisiana Office of Juvenile Justice 2025 Annual PREA Report

4. Interview with PREA coordinator

Reasoning and analysis (by provision):

115.389 (a)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

The agency ensures that incident-based and aggregate data are securely retained.

Louisiana Office of Juvenile Justice PREA Manual (page 45):

The Agency shall ensure that data collected pursuant to Section XIII.B of this Section are securely retained in the PREA Database with limited staff access.

What was heard, as part of a systematic review of evidence:

Interview with PREA coordinator:

The PREA Coordinator confirmed the agency ensures that data collected pursuant to § 115.387 are securely retained. All data collected is placed in locked file cabinets and/or in the Investigative Services Data Base and PREA Database. Any request by outside sources for information must be made through the Louisiana Office of Juvenile Justice legal department and identifying information redacted prior to release.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.389 (b)

What was read, as part of a systematic review of evidence:

Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated:

Agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public, at least annually, through its website.

Louisiana Office of Juvenile Justice PREA Manual (page 45):

After removal of personal identifiers, the Agency shall 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 OJJ website.

Website review:

The auditor reviewed the agency's website at <https://ojj.la.gov/page/resources-reports> and observed the 2017 - 2025 Louisiana Office of Juvenile Justice Annual PREA Reports are published.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

	<p>Reasoning and analysis (by provision): 115.389 (c) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: Before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 45): After removal of personal identifiers, the Agency shall 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 OJJ website.</p> <p>Review of publicly available sexual abuse data: The auditor reviewed the 22017 - 2025 Louisiana Office of Juvenile Justice Annual PREA Reports and observed the reports do not include personal identifiers.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.389 (d) What was read, as part of a systematic review of evidence: Swanson Center for Youth at Monroe Pre-Audit Questionnaire indicated: The agency maintains sexual abuse data sexual abuse data collected pursuant to §115.387 for at least 10 years after the date of initial collection, unless Federal, State, or local law requires otherwise.</p> <p>Louisiana Office of Juvenile Justice PREA Manual (page 45): The Agency shall maintain sexual abuse data collected pursuant to Section XIII.B of this Section for at least ten (10) years after the date of its initial collection unless Federal, State, or local law requires otherwise.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities)

2. Interviews
3. Research
4. Policy Review
5. Document Review
6. Observations during onsite review of facility

Reasoning and analysis (by provision):

115.401 (a)

During the three-year period beginning on August 20, 2013, and during each subsequent three-year period, Louisiana Office of Juvenile Justice has ensured that every facility operated by the agency, or by a private organization on its behalf, has been audited at least once.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.401 (b)

See 115.401 (a).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.401 (h)

The auditor was given access to, and the ability to observe, all areas of the Swanson Center for Youth at Monroe.

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.401 (i)

The auditor was permitted to request and receive copies of all relevant documents (including electronically stored information).

Finding:

Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.

Reasoning and analysis (by provision):

115.401 (m)

The auditor was permitted to conduct private interviews with residents at the facility.

Finding:

	<p>Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p> <p>Reasoning and analysis (by provision): 115.401 (n): The auditor sent an audit notice to the facility six weeks prior to the on-site audit. The facility confirmed the audit notice was posted by emailing pictures of the posted audit notices. The audit notice contained contact information for the auditor. The residents were permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel. No confidential information or correspondence was received.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Evidence relied upon in making the compliance determinations:</p> <ol style="list-style-type: none"> 1. Swanson Center for Youth at Monroe PREA Audit: Pre-Audit Questionnaire (Juvenile Facilities) 2. Website Review 3. Document Review <p>Reasoning and analysis (by provision): 115.403 (f): What was observed as part of a systematic review of evidence: The auditor reviewed the Louisiana Office of Juvenile Justice PREA Reports and Resources. Final PREA Audit Reports are published on the agency’s website at https://ojj.la.gov/page/resources-reports.</p> <p>Finding: Based on this analysis, the facility is substantially compliant with this provision and corrective action is not required.</p>

Appendix: Provision Findings		
115.311 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.311 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	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
115.311 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.312 (a)	Contracting with other entities for the confinement of residents	
	If this agency is public and it contracts for the confinement of its residents with private agencies or other entities including other government agencies, has the agency included the entity's obligation to adopt and 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 residents.)	yes
115.312 (b)	Contracting with other entities for the confinement of residents	

	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 residents OR the response to 115.312(a)-1 is "NO".)	yes
115.313 (a)	Supervision and monitoring	
	Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has implemented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect residents against sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Generally accepted juvenile detention and correctional/secure residential practices?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any judicial findings of inadequacy?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any findings of inadequacy from Federal investigative agencies?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate	yes

	staffing levels and determining the need for video monitoring: Any findings of inadequacy from internal or external oversight bodies?	
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: All components of the facility's physical plant (including "blind-spots" or areas where staff or residents may be isolated)?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The composition of the resident population?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: The number and placement of supervisory staff?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Institution programs occurring on a particular shift?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any applicable State or local laws, regulations, or standards?	yes
	Does the agency ensure that each facility's staffing plan takes into consideration the 11 criteria below in calculating adequate staffing levels and determining the need for video monitoring: Any other relevant factors?	yes
115.313 (b)	Supervision and monitoring	
	Does the agency comply with the staffing plan except during limited and discrete exigent circumstances?	yes
	In circumstances where the staffing plan is not complied with, does the facility fully document all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.313 (c)	Supervision and monitoring	
	Does the facility maintain staff ratios of a minimum of 1:8 during resident waking hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes

	Does the facility maintain staff ratios of a minimum of 1:16 during resident sleeping hours, except during limited and discrete exigent circumstances? (N/A only until October 1, 2017.)	yes
	Does the facility fully document any limited and discrete exigent circumstances during which the facility did not maintain staff ratios? (N/A only until October 1, 2017.)	yes
	Does the facility ensure only security staff are included when calculating these ratios? (N/A only until October 1, 2017.)	yes
	Is the facility obligated by law, regulation, or judicial consent decree to maintain the staffing ratios set forth in this paragraph?	yes
115.313 (d)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: Prevailing staffing patterns?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.313 (e)	Supervision and monitoring	
	Has the facility implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? (N/A for non-secure facilities)	yes
	Is this policy and practice implemented for night shifts as well as day shifts? (N/A for non-secure facilities)	yes
	Does the facility have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational	yes

	functions of the facility? (N/A for non-secure facilities)	
115.315 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.315 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches in non-exigent circumstances?	yes
115.315 (c)	Limits to cross-gender viewing and searches	
	Does the facility document and justify all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches?	yes
115.315 (d)	Limits to cross-gender viewing and searches	
	Does the facility implement policies and procedures that enable residents to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering a resident housing unit?	yes
	In facilities (such as group homes) that do not contain discrete housing units, does the facility require staff of the opposite gender to announce their presence when entering an area where residents are likely to be showering, performing bodily functions, or changing clothing? (N/A for facilities with discrete housing units)	na
115.315 (e)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na

115.315 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.316 (a)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take appropriate steps to ensure that residents 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, including: Residents who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that residents 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, including: Residents who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that residents 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, including: Residents who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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, including: Residents who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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, including: Residents who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that residents 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, including: Other? (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective	yes

	communication with residents who are deaf or hard of hearing?	
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have intellectual disabilities?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with residents with disabilities including residents who: Who are blind or have low vision?	yes
115.316 (b)	Residents with disabilities and residents who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to residents who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.316 (c)	Residents with disabilities and residents who are limited English proficient	
	Does the agency always refrain from relying on resident interpreters, resident readers, or other types of resident assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the resident's safety, the performance of first-response duties under §115.364, or the investigation of the resident's allegations?	yes
115.317 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents who: Has engaged in sexual	yes

	abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the bullet immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with residents 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 residents 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 residents who: Has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.317 (b)	Hiring and promotion decisions	
	Does the agency consider 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 residents?	yes
115.317 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with residents, does the agency: Perform a criminal background records check?	yes
	Before hiring new employees who may have contact with residents, does the agency: Consult any child abuse registry	yes

	maintained by the State or locality in which the employee would work?	
	Before hiring new employees who may have contact with residents, 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
115.317 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with residents?	yes
	Does the agency consult applicable child abuse registries before enlisting the services of any contractor who may have contact with residents?	yes
115.317 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with residents or have in place a system for otherwise capturing such information for current employees?	yes
115.317 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with residents 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 residents 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
115.317 (g)	Hiring and promotion decisions	

	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.317 (h)	Hiring and promotion decisions	
	Unless prohibited by law, 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
115.318 (a)	Upgrades to facilities and technologies	
	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 residents 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
115.318 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect residents 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.)	yes
115.321 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.321	Evidence protocol and forensic medical examinations	

(b)		
	Is this protocol developmentally appropriate for youth? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.321 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all residents who experience sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.321 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member?	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.321	Evidence protocol and forensic medical examinations	

(e)		
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.321 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency is responsible for investigating allegations of sexual abuse.)	yes
115.321 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (Check N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.321(d) above.)	yes
115.322 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.322 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes

	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.322 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.321(a))	yes
115.331 (a)	Employee training	
	Does the agency train all employees who may have contact with residents on: Its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with residents on: Residents' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with residents on: The right of residents and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: The dynamics of sexual abuse and sexual harassment in juvenile facilities?	yes
	Does the agency train all employees who may have contact with residents on: The common reactions of juvenile victims of sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with residents on: How to detect and respond to signs of threatened and actual sexual abuse and how to distinguish between consensual sexual contact and sexual abuse between residents?	yes
	Does the agency train all employees who may have contact with residents on: How to avoid inappropriate relationships with residents?	yes

	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the agency train all employees who may have contact with residents on: How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
	Does the agency train all employees who may have contact with residents on: Relevant laws regarding the applicable age of consent?	yes
115.331 (b)	Employee training	
	Is such training tailored to the unique needs and attributes of residents of juvenile facilities?	yes
	Is such training tailored to the gender of the residents at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male residents to a facility that houses only female residents, or vice versa?	yes
115.331 (c)	Employee training	
	Have all current employees who may have contact with residents received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.331 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.332 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who	yes

	have contact with residents have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	
115.332 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with residents been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with residents)?	yes
115.332 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.333 (a)	Resident education	
	During intake, do residents receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do residents receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
	Is this information presented in an age-appropriate fashion?	yes
115.333 (b)	Resident education	
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 10 days of intake, does the agency provide age-appropriate comprehensive education to residents either in person or through	yes

	video regarding: Agency policies and procedures for responding to such incidents?	
115.333 (c)	Resident education	
	Have all residents received such education?	yes
	Do residents receive education upon transfer to a different facility to the extent that the policies and procedures of the resident's new facility differ from those of the previous facility?	yes
115.333 (d)	Resident education	
	Does the agency provide resident education in formats accessible to all residents including those who: Are limited English proficient?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are deaf?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are visually impaired?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Are otherwise disabled?	yes
	Does the agency provide resident education in formats accessible to all residents including those who: Have limited reading skills?	yes
115.333 (e)	Resident education	
	Does the agency maintain documentation of resident participation in these education sessions?	yes
115.333 (f)	Resident education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to residents through posters, resident handbooks, or other written formats?	yes
115.334 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.331, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its	yes

	investigators have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	
115.334 (b)	Specialized training: Investigations	
	Does this specialized training include: Techniques for interviewing juvenile sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: Sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
	Does this specialized training include: The criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.334 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.335 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and	yes

	mental health care practitioners who work regularly in its facilities have been trained in: How to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How to respond effectively and professionally to juvenile victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in: How and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.335 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.335 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.331? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Do medical and mental health care practitioners contracted by	yes

	and volunteering for the agency also receive training mandated for contractors and volunteers by §115.332? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	
115.341 (a)	Obtaining information from residents	
	Within 72 hours of the resident's arrival at the facility, does the agency obtain and use information about each resident's personal history and behavior to reduce risk of sexual abuse by or upon a resident?	yes
	Does the agency also obtain this information periodically throughout a resident's confinement?	yes
115.341 (b)	Obtaining information from residents	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.341 (c)	Obtaining information from residents	
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Prior sexual victimization or abusiveness?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Current charges and offense history?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Age?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Level of emotional and cognitive development?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical size and stature?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Mental illness or mental disabilities?	yes

	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Intellectual or developmental disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Physical disabilities?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: The resident's own perception of vulnerability?	yes
	During these PREA screening assessments, at a minimum, does the agency attempt to ascertain information about: Any other specific information about individual residents that may indicate heightened needs for supervision, additional safety precautions, or separation from certain other residents?	yes
115.341 (d)	Obtaining information from residents	
	Is this information ascertained: Through conversations with the resident during the intake process and medical mental health screenings?	yes
	Is this information ascertained: During classification assessments?	yes
	Is this information ascertained: By reviewing court records, case files, facility behavioral records, and other relevant documentation from the resident's files?	yes
115.341 (e)	Obtaining information from residents	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the resident's detriment by staff or other residents?	yes
115.342 (a)	Placement of residents	
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Housing Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Bed assignments?	yes

	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Work Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Education Assignments?	yes
	Does the agency use all of the information obtained pursuant to § 115.341 and subsequently, with the goal of keeping all residents safe and free from sexual abuse, to make: Program Assignments?	yes
115.342 (b)	Placement of residents	
	Are residents isolated from others only as a last resort when less restrictive measures are inadequate to keep them and other residents safe, and then only until an alternative means of keeping all residents safe can be arranged?	yes
	During any period of isolation, does the agency always refrain from denying residents daily large-muscle exercise?	yes
	During any period of isolation, does the agency always refrain from denying residents any legally required educational programming or special education services?	yes
	Do residents in isolation receive daily visits from a medical or mental health care clinician?	yes
	Do residents also have access to other programs and work opportunities to the extent possible?	yes
115.342 (c)	Placement of residents	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na

115.342 (d)	Placement of residents	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.342 (e)	Placement of residents	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.342 (f)	Placement of residents	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.342 (g)	Placement of residents	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.342 (h)	Placement of residents	
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The basis for the facility's concern for the resident's safety? (N/A for h and i if facility doesn't use isolation?)	na
	If a resident is isolated pursuant to paragraph (b) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? (N/A for h and i if facility doesn't use isolation?)	na
115.342 (i)	Placement of residents	
	In the case of each resident who is isolated as a last resort when less restrictive measures are inadequate to keep them and other residents safe, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.351	Resident reporting	

(a)		
	Does the agency provide multiple internal ways for residents to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: 2. Retaliation by other residents or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for residents to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.351 (b)	Resident reporting	
	Does the agency also provide at least one way for residents to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward resident reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the resident to remain anonymous upon request?	yes
	Are residents detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security to report sexual abuse or harassment?	yes
115.351 (c)	Resident reporting	
	Do staff members accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Do staff members promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.351 (d)	Resident reporting	
	Does the facility provide residents with access to tools necessary to make a written report?	yes
115.351 (e)	Resident reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of residents?	yes
115.352 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address resident grievances regarding sexual abuse. This does not mean the agency is exempt simply because a resident does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.352 (b)	Exhaustion of administrative remedies	
	Does the agency permit residents to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an resident to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.352 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: A resident who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.352 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency 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 does not include time consumed by residents in preparing any administrative appeal.) (N/A if agency is exempt from this	yes

	standard.)	
	If the agency determines that the 90 day timeframe is insufficient to make an appropriate decision and claims an extension of time (the maximum allowable extension of time to respond is 70 days per 115.352(d)(3)) , does the agency notify the resident in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the resident does not receive a response within the time allotted for reply, including any properly noticed extension, may a resident consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.352 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow residents, staff members, family members, attorneys, and outside advocates, permitted to assist residents in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of residents? (If a third party, other than a parent or legal guardian, files such a request on behalf of a resident, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the resident declines to have the request processed on his or her behalf, does the agency document the resident’s decision? (N/A if agency is exempt from this standard.)	yes
	Is a parent or legal guardian of a juvenile allowed to file a grievance regarding allegations of sexual abuse, including appeals, on behalf of such juvenile? (N/A if agency is exempt from this standard.)	yes
	If a parent or legal guardian of a juvenile files a grievance (or an appeal) on behalf of a juvenile regarding allegations of sexual abuse, is it the case that those grievances are not conditioned upon the juvenile agreeing to have the request filed on his or her behalf? (N/A if agency is exempt from this standard.)	yes
115.352	Exhaustion of administrative remedies	

(f)		
	Has the agency established procedures for the filing of an emergency grievance alleging that a resident is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging a resident is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the resident is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.352 (g)	Exhaustion of administrative remedies	
	If the agency disciplines a resident for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the resident filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.353 (a)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with access to outside victim advocates for emotional support services related to sexual abuse by providing, posting, or otherwise making accessible mailing addresses and telephone numbers, including toll-free hotline	yes

	numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies?	yes
	Does the facility enable reasonable communication between residents and these organizations and agencies, in as confidential a manner as possible?	yes
115.353 (b)	Resident access to outside confidential support services and legal representation	
	Does the facility inform residents, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.353 (c)	Resident access to outside confidential support services and legal representation	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide residents with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.353 (d)	Resident access to outside confidential support services and legal representation	
	Does the facility provide residents with reasonable and confidential access to their attorneys or other legal representation?	yes
	Does the facility provide residents with reasonable access to parents or legal guardians?	yes
115.354 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of a resident?	yes

115.361 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding retaliation against residents or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.361 (b)	Staff and agency reporting duties	
	Does the agency require all staff to comply with any applicable mandatory child abuse reporting laws?	yes
115.361 (c)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials and designated State or local services agencies, are staff prohibited from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.361 (d)	Staff and agency reporting duties	
	Are medical and mental health practitioners required to report sexual abuse to designated supervisors and officials pursuant to paragraph (a) of this section as well as to the designated State or local services agency where required by mandatory reporting laws?	yes
	Are medical and mental health practitioners required to inform residents of their duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.361 (e)	Staff and agency reporting duties	
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the appropriate office?	yes
	Upon receiving any allegation of sexual abuse, does the facility head or his or her designee promptly report the allegation to the alleged victim's parents or legal guardians unless the facility has official documentation showing the parents or legal guardians should not be notified?	yes
	If the alleged victim is under the guardianship of the child welfare system, does the facility head or his or her designee promptly report the allegation to the alleged victim's caseworker instead of the parents or legal guardians? (N/A if the alleged victim is not under the guardianship of the child welfare system.)	yes
	If a juvenile court retains jurisdiction over the alleged victim, does the facility head or designee also report the allegation to the juvenile's attorney or other legal representative of record within 14 days of receiving the allegation?	yes
115.361 (f)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.362 (a)	Agency protection duties	
	When the agency learns that a resident is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the resident?	yes
115.363 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that a resident was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
	Does the head of the facility that received the allegation also notify the appropriate investigative agency?	yes

115.363 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.363 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.363 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.364 (a)	Staff first responder duties	
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: 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, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that a resident was sexually abused, is the first security staff member to respond to the report required to: 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, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.364 (b)	Staff first responder duties	

	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.365 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.366 (a)	Preservation of ability to protect residents from contact with abusers	
	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 limits the agency's ability to remove alleged staff sexual abusers from contact with any residents pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.367 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all residents and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other residents or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.367 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures for residents or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations, such as housing changes or transfers for resident victims or abusers, removal of alleged staff or resident abusers from contact with victims, and emotional support services?	yes
115.367 (c)	Agency protection against retaliation	

	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by residents or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Any resident disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Resident program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor: Reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.367 (d)	Agency protection against retaliation	

	In the case of residents, does such monitoring also include periodic status checks?	yes
115.367 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.368 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect a resident who is alleged to have suffered sexual abuse subject to the requirements of § 115.342?	yes
115.371 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency does not conduct any form of administrative or criminal investigations of sexual abuse or harassment. See 115.321(a).)	yes
115.371 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations involving juvenile victims as required by 115.334?	yes
115.371 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.371 (d)	Criminal and administrative agency investigations	
	Does the agency always refrain from terminating an investigation solely because the source of the allegation recants the allegation?	yes
115.371 (e)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.371 (f)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as resident or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring a resident who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.371 (g)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.371 (h)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.371 (i)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be	yes

	criminal referred for prosecution?	
115.371 (j)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.371(g) and (h) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years unless the abuse was committed by a juvenile resident and applicable law requires a shorter period of retention?	yes
115.371 (k)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation?	yes
115.371 (m)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.321(a).)	yes
115.372 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.373 (a)	Reporting to residents	
	Following an investigation into a resident's allegation of sexual abuse suffered in the facility, does the agency inform the resident as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.373 (b)	Reporting to residents	
	If the agency did not conduct the investigation into a resident's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the resident? (N/A if the agency/facility is	yes

	responsible for conducting administrative and criminal investigations.)	
115.373 (c)	Reporting to residents	
	Following a resident’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the resident’s unit?	yes
	Following a resident’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following a resident’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following a resident’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.373 (d)	Reporting to residents	
	Following a resident’s allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following a resident’s allegation that he or she has been sexually abused by another resident, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse	yes

	within the facility?	
115.373 (e)	Reporting to residents	
	Does the agency document all such notifications or attempted notifications?	yes
115.376 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.376 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.376 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) 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?	yes
115.376 (d)	Disciplinary sanctions for staff	
	Are 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, reported to: Law enforcement agencies, unless the activity was clearly not criminal?	yes
	Are 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, reported to: Relevant licensing bodies?	yes
115.377 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with residents?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.377 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with residents?	yes
115.378 (a)	Interventions and disciplinary sanctions for residents	
	Following an administrative finding that a resident engaged in resident-on-resident sexual abuse, or following a criminal finding of guilt for resident-on-resident sexual abuse, may residents be subject to disciplinary sanctions only pursuant to a formal disciplinary process?	yes
115.378 (b)	Interventions and disciplinary sanctions for residents	
	Are disciplinary sanctions commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history, and the sanctions imposed for comparable offenses by other residents with similar histories?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied daily large-muscle exercise?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident is not denied access to any legally required educational programming or special education services?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the agency ensure the resident receives daily visits from a medical or mental health care clinician?	yes
	In the event a disciplinary sanction results in the isolation of a resident, does the resident also have access to other programs and work opportunities to the extent possible?	yes
115.378	Interventions and disciplinary sanctions for residents	

(c)		
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether a resident's mental disabilities or mental illness contributed to his or her behavior?	yes
115.378 (d)	Interventions and disciplinary sanctions for residents	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to offer the offending resident participation in such interventions?	yes
	If the agency requires participation in such interventions as a condition of access to any rewards-based behavior management system or other behavior-based incentives, does it always refrain from requiring such participation as a condition to accessing general programming or education?	yes
115.378 (e)	Interventions and disciplinary sanctions for residents	
	Does the agency discipline a resident for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.378 (f)	Interventions and disciplinary sanctions for residents	
	For the purpose of disciplinary action, does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.378 (g)	Interventions and disciplinary sanctions for residents	
	Does the agency always refrain from considering non-coercive sexual activity between residents to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between residents.)	yes
115.381 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that	yes

	the resident is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening?	
115.381 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.341 indicates that a resident has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the resident is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening?	yes
115.381 (c)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.381 (d)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from residents before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the resident is under the age of 18?	yes
115.382 (a)	Access to emergency medical and mental health services	
	Do resident victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.382 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do staff first responders take preliminary steps to protect the victim pursuant to § 115.362?	yes
	Do staff first responders immediately notify the appropriate	yes

	medical and mental health practitioners?	
115.382 (c)	Access to emergency medical and mental health services	
	Are resident victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.382 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all residents who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.383 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.383 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.383 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.)	na
115.383 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph §	na

	115.383(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)	
115.383 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are resident victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.383 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.383 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility attempt to conduct a mental health evaluation of all known resident-on-resident abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners?	yes
115.386 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.386 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.386 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.386 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or	yes

	investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.386(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.386 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.387 (a)	Data collection	
	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
115.387 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.387 (c)	Data collection	
	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

115.387 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.387 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its residents? (N/A if agency does not contract for the confinement of its residents.)	yes
115.387 (f)	Data collection	
	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
115.388 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.387 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 § 115.387 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 § 115.387 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
115.388 (b)	Data review for corrective action	
	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	yes

	addressing sexual abuse?	
115.388 (c)	Data review for corrective action	
	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
115.388 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted 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?	yes
115.389 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.387 are securely retained?	yes
115.389 (b)	Data storage, publication, and destruction	
	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
115.389 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.389 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.387 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	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?	yes

	(Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	
115.401 (b)	Frequency and scope of audits	
	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 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.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates, residents, and detainees permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or	yes

	<p>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.)</p>	
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