**Prison Rape Elimination Act (PREA) Audit Report**  
**Adult Prisons & Jails**

☐ Interim  ☒ Final

**Date of Report**  
Click or tap here to enter text.

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### Auditor Information

<table>
<thead>
<tr>
<th>Name: Shane Dotson</th>
<th>Email: <a href="mailto:correctionalconsulting@gmail.com">correctionalconsulting@gmail.com</a></th>
</tr>
</thead>
<tbody>
<tr>
<td>Company Name: Correctional Consulting, LLC</td>
<td></td>
</tr>
<tr>
<td>Mailing Address: PO Box 362</td>
<td>City, State, Zip: Baxter Springs, KS 66713</td>
</tr>
<tr>
<td>Telephone: 4176233131</td>
<td>Date of Facility Visit: April 9th-12th. 2018</td>
</tr>
</tbody>
</table>

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### Agency Information

<table>
<thead>
<tr>
<th>Name of Agency: Broward County Sheriff’s Office</th>
<th>Governing Authority or Parent Agency (If Applicable): Broward County Government</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical Address: 555 SE 1st Ave</td>
<td>City, State, Zip: Ft. Lauderdale, FL 33301</td>
</tr>
<tr>
<td>Mailing Address: 555 SE 1st Ave</td>
<td>City, State, Zip: Ft. Lauderdale, FL 33301</td>
</tr>
<tr>
<td>Telephone: 954-831-5360</td>
<td>Is Agency accredited by any organization?  ☒ Yes  ☐ No</td>
</tr>
<tr>
<td>The Agency Is: ☐ Military  ☐ Private for Profit  ☐ Private not for Profit  ☐ Municipal  ☒ County  ☐ State  ☐ Federal</td>
<td></td>
</tr>
</tbody>
</table>

**Agency mission:** To provide the highest level of professional public safety services to our community.

**Agency Website with PREA Information:**  
https://www.sheriff.org/DOD/Pages/Home.aspx

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### Agency Chief Executive Officer

<table>
<thead>
<tr>
<th>Name: Colonel Gary Palmer</th>
<th>Title: Director</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email: <a href="mailto:gary_palmer@sheriff.org">gary_palmer@sheriff.org</a></td>
<td>Telephone: 954-831-5360</td>
</tr>
</tbody>
</table>

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### Agency-Wide PREA Coordinator

<table>
<thead>
<tr>
<th>Name: Robert Schlegel</th>
<th>Title: Captain</th>
</tr>
</thead>
<tbody>
<tr>
<td>Email: <a href="mailto:Robert_Schlegel@sheriff.org">Robert_Schlegel@sheriff.org</a></td>
<td>Telephone: 954-831-5360</td>
</tr>
</tbody>
</table>
PREA Coordinator Reports to:  
Lt. Colonel Reyes

Number of Compliance Managers who report to the PREA Coordinator  
6

Facility Information

Name of Facility:  Broward County Department of Detention

Physical Address:  555 SE 1st Ave Ft. Lauderdale, FL 33301

Mailing Address (if different than above):  Click or tap here to enter text.

Telephone Number:  954-831-5360

The Facility Is:  
☐ Military  ☑ County  ☐ Private for profit  ☐ Private not for profit  ☐ State  ☐ Federal  ☐ Prison

Facility Type:  ☑ Jail

Facility Mission:  The Broward Sheriff’s Office, Department of Detention promotes public safety through the management of a safe, sanitary, effective and efficient local detention system, establishes and maintains a humane and secure environment for staff and inmates, formulates and institutes strategies that deter crime, reduce recidivism, and, in partnership with public and private entities, provides services and programs to offenders that promote positive behavioral changes, improves their quality of life, and assists them in becoming productive members of the community.

Facility Website with PREA Information:  https://www.sheriff.org/DOD/Pages/Home.aspx

Warden/Superintendent

Name:  Gary Palmer  
Title:  Colonel

Email:  gary_palmer@sheriff.org  
Telephone:  954-831-5360

Facility PREA Compliance Manager

Name:  Robert Schlegel  
Title:  Captain

Email:  Robert_schlegel@sheriff.org  
Telephone:  854-831-5360

Facility Health Service Administrator

Name:  Yusimir Arencibia  
Title:  Inmate Health Care Manager

Email:  yusimir_arencibia@sheriff.org  
Telephone:  954-831-5905

Facility Characteristics

Designated Facility Capacity:  5144  
Current Population of Facility:  3661
| Number of inmates admitted to facility during the past 12 months | 34596 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more: | 7976 |
| Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more: | 34596 |
| Number of inmates on date of audit who were admitted to facility prior to August 20, 2012: | n/a |

### Age Range of Population:

| Youthful Inmates Under 18: | 15-17 |
| Adults: | 18-80 |

### Are youthful inmates housed separately from the adult population?  
☒ Yes  ☐ No  ☐ NA

| Number of youthful inmates housed at this facility during the past 12 months: | 248 |
| Average length of stay or time under supervision: | 40.17 |

### Facility security level/inmate custody levels:

| Minimum-Maximum |

| Number of staff currently employed by the facility who may have contact with inmates: | 1858 |
| Number of staff hired by the facility during the past 12 months who may have contact with inmates: | 291 |
| Number of contracts in the past 12 months for services with contractors who may have contact with inmates: | 736 |

### Physical Plant

| Number of Buildings: | 4 |
| Number of Single Cell Housing Units: | 407 |
| Number of Multiple Occupancy Cell Housing Units: | 1506 |
| Number of Open Bay/Dorm Housing Units: | 4 |
| Number of Segregation Cells (Administrative and Disciplinary): | 395 |

### Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):  
The facilities currently have 533 cameras deployed throughout the system to augment staff observation of inmates. The facility is currently upgrading and adding cameras to the facilities in order to have additional monitoring capabilities.

### Medical

| Type of Medical Facility: | 24/7 coverage |
| Forensic sexual assault medical exams are conducted at: | Nancy J. Cotterman Center |

### Other

| Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility: | 736 |
| Number of investigators the agency currently employs to investigate allegations of sexual abuse: | 2 |
Audit Findings

Audit Narrative

The auditor’s description of the audit methodology should include a detailed description of the following processes during the pre-onsite audit, onsite audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor’s process for the site review.

In February 01, 2018 Correctional Consulting, LLC was awarded a bid by Broward County Sheriff’s Office in Florida to provide the PREA audit services. In February 2018 communications began with the PREA Coordinator, Captain Robert Schlegel and Auditor Notices was sent out on February 20, 2018 via email both in Spanish and English. Captain Schlegel advised they had another language that was needed on the notices reference the population in the facilities. French Creole was added to the auditor notices. Captain Schlegel was advised to place the notices in housing units, common areas, booking area, visitation area, and staff breaks rooms. Pre-Audit questionnaire was sent via email and was requested to be filled out sent back at least three weeks before the audit date. Two letters were received by the auditor during the audit notice.

The facility was in the process of remodeling their North Broward location during the audit process.

The morning of April 9th, 2018 Correctional Consulting, LLC audit team consisting of Shane Dotson as lead auditor and Frederick G. Chinn as support staff arrived for the audit when approaching the lobby of the Paul Rein Facility of Broward County were large Zero-Tolerance signs in both English, Spanish and French Creole in green and orange with a white background which really stood out reference “Zero-Tolerance” to sexual abuse and harassment. This set the tone of the facilities of Broward County and they were very organized and prepared for the audit. We met with the several members of the sheriff’s office which included the following reference on-site audit phase;

Colonel Gary Palmer
Lieutenant Colonel James Reyes
Major Angela Neely – Administration
Major Paul Arndt – North Operations
Major Josefa Benjamin – South Operations
Captain Robert Schlegel – Investigations and Projects Unit
Captain Sherea Green – Main Jail
Captain Veronica Carroll – Central Intake
Captain George Rimel – North Broward Bureau
Captain Jose Acosta - Conté
Executive Lieutenant Karen Archibald – Central Intake
Executive Lieutenant Richard Aronofsky – Main Jail Administrative Lieutenant
Executive Lieutenant Telliferro Isaac – Main Jail Operational Lieutenant
Acting Executive Lieutenant Eddison Ricketts – Paul Rein
Executive Lieutenant Kenneth Cooper – North Broward Bureau
Executive Lieutenant Catherine Cummings – Conté Facility
Sergeant Gary Nelson – Investigations and Projects Unit
We conducted the facilities tour led by PREA Compliance Managers of each location of Broward County Sheriff’s Office. Our audit team had members of the sheriff’s office assigned to us to assist us during our audit process including supervisors to make interviews of staff, inmates and movement through the facilities much accessible. The staff went well and beyond their tour of duty due to we had very long days and nights during the audit process. I want to thank each one of them again in this report reference without them the audit wouldn’t have run as smoothly. I was able to observe the layout of each facility which included four. The facilities placement of cameras, signs announcing the audit, “Zero-Tolerance” signage in all cells, each phone had signage with the number how to report a sexual abuse in English, Spanish and Creole this information was also in the booking and receiving area of the facilities also. There were no “blind spots” in the facility and all areas were under video surveillance and the Master Control was able to monitor the surveillance system via their monitors. We were able to speak to both inmates and staff during our tour and asked impromptu questions of the staff and a few inmates; the inmates indicated that they have no concerns as it relates to sexual safety.

As we were speaking with random staff they were able to describe how they would report a sexual abuse or sexual assault in accordance to their policy and several advised of a PREA first responder check-list card that staff carries with them at all times. Staff also produced a little PREA Standard handbook that included a quick reference to the standards to help guide them if an incident arises. The handbook was at different locations of the facilities and it was given to volunteers and contractors for part of their training.

I counted over 1000 signs posted in the four facilities about the PREA audit and over 1200 signs of the “Zero-Torrance” throughout each of the four facilities during the facility tour we noticed the video visitation kiosk by Securus was in every housing unit which was available to all inmates that provided a PREA education video “What You Need to Know”. We also tried the number they had posted on their PREA signs located in the cells and booking PREA Hotline 954-831-3775 and it worked very well. We also tried a number that went to victim support services 954-761-RAPE (7273) it went to The Nancy J. Cotterman Center in Fort Lauderdale, FL and we were able to speak with a live person.

The auditors obtained staff and inmate rosters with which to select random staff and inmates to interview in two private non-recorded rooms. The staff was from different shifts, and rank as well as
specialized staff, a contractor, and volunteer staff. Female and male inmates were chosen at random from each unit during the site review and the course of the interviews they all were familiar how to report sexual abuse and sexual harassment. Numerous times during the interview process the inmates would make a reference to the PREA Hotline number for reporting. During the course of all the interviews I felt the inmates know how to report sexual abuse and sexual harassment in different ways, were educated on the “Zero-Tolerance” policy and were given access all information they would need to report, receive counseling and other services concerning sexual abuse. The inmate handbook was well written and the entire process concerning PREA has been outlined and contact information including names, addresses and phone numbers are provided.

During our course of interviews with staff it was evident that each of them had gone through PREA training and were well versed how to respond to a report of sexual abuse or sexual harassment. Each staff interviewed was very familiar with policy when it came to the reporting process, how to assist the victim, evidence protocol and scene security. During interviews the staff understood the proper dissemination of information on when they receive reports of sexual abuse or sexual harassment. The staff had been trained on how to conduct cross-gender pat down and searches of transgender and intersex inmates in a respectful and professional manner. As a part of their training they were trained how properly identify transgender and intersex inmates. The staff also knows to report any suspicion, knowledge, or information relating to sexual abuse or sexual harassment. The staff understands how to respond if an inmate reports to them privately about sexual abuse, sexual harassment, or retaliation. As part of their training they know how to properly handle evidence and protect the scene until the investigators and administration arrive. Overall, I feel the staff has been well trained and able to properly respond to a report of sexual abuse, sexual harassment or retaliation.

Interviews were conducted with specialized staff which included administrative staff and leadership as well as other specialized staff that perform specific PREA-relevant duties. Overall, the facility was clean and well maintained and staff was friendly and cooperative. The facility does have an intake/booking area and each inmate that enters the facility is screened for sexual victimization, given a brochure on the facility’s Zero Tolerance policy. We observed an intake of an arrestee during our audit and all PREA standards were met at booking. We were able to interview someone in the medical/mental health field and they acknowledged they understand their reporting responsibilities as it relates to sexual abuse and sexual harassment. They also provided information on the services that are provided if someone is a victim of sexual abuse or sexual harassment. The services provided are comprehensive and would be a valuable tool if needed. One of the key components to the services offered is having an advocate available during the SAFE/SANE exam and providing follow up care after the exam.

We were also able to interview HR staff concerning background checks and the facility does background checks on all new hires to make sure there are previous history of misconduct as it relates to inmate management. The agency being law enforcement entity has access to local, state and federal criminal history repositories to verify past criminal conduct. If the facility does promote they will use a background check for consideration for promoting.
The facility has an investigative staff which is utilized should the facility have a report of sexual abuse or sexual harassment. During our interview with the investigators we felt they were very knowledgably as it relates investigating sexual abuse or sexual harassment. The investigators have received specialized training in confinement settings. The investigators will investigate all reports of sexual abuse or sexual harassment and will use accepted practices as it relates to interviews, evidence collecting, report writing, and other investigative practices which would be beneficial to the investigation of the incident.

The investigative staff will provide the same services to an inmate victim as they would a victim in a non-incarcerated environment.

Reference the two letters I received after the PREA audit notice both inmates were released from custody one 03/20/2018 and the second 03/29/2018.

Broward County interviews conducted during the audit:

- Random staff 31
- Random inmates 57
- Juveniles 3
- Agency Head 1
- Warden 1
- PREA Coordinator 1
- PREA Compliance Managers 3
- Agency Contract Administrator 1
- Intermediate Facility Staff 6
- Retaliation Officer 1
- First Responder Staff 3
- Investigators 2
- Incident Review Team 1
- Risk Screening 1
- Staff Segregation Housing 1
- Mental Health 1
- Medical 1
- Non-Medical Staff Cross-Gender 1
- Contractor 1
- Human Resource 1
- Intake Officer 1
- Transgender Inmate 2
- Bisexual/Lesbian 1
- High Risk Victimization 2
- SAFE/SANE Staff 1
- LEP 5
- Reported Sexual Assaulted intake 2
- Disabled Inmates 4
- Blind, Deaf or hard of hearing 2
- Volunteers 2
During our complete audit of the facility we feel this agency as a whole is engaged and active in being compliant with the PREA Standards.

They were very involved in the audit process and had all the proper documentation to show compliance and adherence to all standards.

Facility Characteristics

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate, resident or detainee population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

The Broward County Sheriff’s Office consists of four facilities which make up the Department of Detention. The four facilities consist of the Main Jail/Central Booking, North Broward, Joseph Conte, and Paul Rein Facility. The Main Jail and N. Broward facilities are indirect supervision facilities while Joseph Conte and Paul Rein being direct supervision facilities. All four facilities have a rated capacity of 5,144 inmates and on the day of the audit the inmate population was 3,661. The facilities house minimum to maximum classification of inmates as well as youthful offenders including both male and female. Due to the design of the facilities they are able to isolate youthful offenders from sight and sound of adult offenders. The facilities also house pre-trial detainees as well as sentenced offenders.

The agency currently has 1,858 staff members who have contact with inmates. The agency employee’s security staff, medical/mental staff, aides, supervisory and command level staff members both sworn and civilian.

Within the four buildings the agency has 407 single cells, 1506 multiple occupancy cell housing units and 4 open bay/dorm housing units. The 4-open bay/dorm housing units are located at the N. Broward facility. The other housing units are dispersed at the other 3 facilities. Each facility has a recreation yard accessible to the inmate population.

The facilities offer numerous programs/services such as religious services, GED programs, classes for the youthful offenders, AA & NA are also available to the inmate population. The agency also provides 24/7 medical coverage for all four facilities. This coverage allows medical to be immediately involved with every PREA complaint.

The agency is currently in the process of bringing the SAFE/SANE exams to each facility. If an inmate would require a SAFE/SANE exam the facility currently transports the victim to the Nancy J. Cotterman Center for their exam. During the onsite, each facility was currently in the process of designating exam rooms at each of their facilities to have the exams done on site by The Nancy J. Cotterman Center.

The four facilities have approximately 533 cameras deployed and the agency is continuing to add additional cameras to augment staff in their PREA effort.
The food service is outsourced for all four facilities. The main jail has their own food service program with N. Broward, Conte and Rein being serviced by a central kitchen.

The Main Jail/Central Intake built in 1985 is the largest of the four facilities with 1542 beds. On the day of the audit the population was 1162. The main jail also houses the male youthful offenders as well as high risk male offenders. The food service is provided onsite, along with medical. All intakes are processed at the main jail and the inmate education for PREA is provided. All inmates processed receive an inmate handbook with also contains the PREA information and the “Zero Tolerance” Policy. All inmates who are processed receive a medical screening including victimization screening, go through classification where victimization/predator screening is also conducted. This coordinated effort allows for multiple screenings to assist with their PREA Effort. The facility layout consists of 169 single occupancy cells, 685 multiple occupancy cells.

The Joseph Conte facility built in 1999 is the second largest jail in the agency and it is a direct supervision facility. The facility has a rated bed capacity of 1328 and on the day of the audit the population was 1103. The food service is provided by the central kitchen and inmates have access to an outdoor recreation area. The facility layout consists of 336 Multiple Occupancy Cells. The facility also offers an intense 30-day substance abuse program along with educational programming.

The North Broward Facility was built in 1979 and has 1206 beds. On the day of the audit there were 771 inmates. The N. Broward facility currently houses male and female special needs inmates. The facility also houses female youthful offenders. The facility is an indirect supervision facility and food service is provided by the central kitchen and have access to outdoor recreation. The facility currently has 67 single occupancy cells, 233 multiple occupancy cells and 4 dormitories. The facility also has 24/7 medical coverage.

The Paul Rein facility opened in 2004 is currently rated for 1,068 beds. On the day of the audit the inmate population was 625 and is a direct supervision facility. The facility serves medium/maximum male and female inmates with 171 single cells and 252 multiple occupancy cells. The facility currently offers a substance abuse program as well as life skills training for their inmate population. The facility also has an OBGYN clinic onsite for its female inmates. The food service is provided by the central kitchen and the facility also has 24/7 medical coverage. The inmates also have access to an outdoor recreation area.

**Summary of Audit Findings**

_The summary should include the number of standards exceeded, number of standards met, and number of standards not met, along with a list of each of the standards in each category. If relevant, provide a summarized description of the corrective action plan, including deficiencies observed, recommendations made, actions taken by the agency, relevant timelines, and methods used by the auditor to reassess compliance._

*Auditor Note:* No standard should be found to be “Not Applicable” or “NA”. A compliance determination must be made for each standard.

**Number of Standards Exceeded:** 115.21, 115.51, 115.52, 115.82, 115.86
The culture of Broward County Jail's leadership was open and receptive to PREA compliance and the emphasis of sexual safety.

Number of Standards Not Met: None, Zero

Summary of Corrective Action (if any) None, Zero

PREVENTION PLANNING

Standard 115.11: Zero tolerance of sexual abuse and sexual harassment;
PREA coordinator

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)
- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the written policy outline the agency’s approach to preventing, detecting, and responding to sexual abuse and sexual harassment? ☒ Yes ☐ No

115.11 (b)
- Has the agency employed or designated an agency-wide PREA Coordinator? ☒ Yes ☐ No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? ☒ Yes ☐ No
- 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 ☐ No

115.11 (c)
- 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 ☐ No ☐ NA
- 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 ☐ No ☐ NA
Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility has a very well written policy mandating zero tolerance towards all forms of sexual abuse and sexual harassment. It outlines the agency's approach to preventing, detecting, and responding to such conduct. “Zero-Tolerance” signage is conspicuously posted throughout the facility for inmates, staff, and guest to see. They have a flyer and inmate handbook that is given to each inmate upon intake. Captain Robert Schlegel is the PREA Coordinator and he does have sufficient time to perform those duties. Each facility has an Executive Lieutenant who serves as the PREA Compliance Manage and they too have sufficient time to perform their duties. As we toured the facility and talked with inmates and staff everyone was very familiar with the “Zero-Tolerance” policy on sexual abuse and harassment and what the meaning of PREA. During private interviews with staff and inmates it was evident that they were aware of the policy as well.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity’s obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)  ☐ Yes  ☐ No  ☒ NA
- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility does not contract with any other entity for confinement of inmates. Not Applicable, but the facility would be in compliance and meet the standard.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- 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 inmates against sexual abuse? ☒ Yes ☐ No

- 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 inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility’s staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No
▪ Does the agency ensure that each facility’s staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration all components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No ☐ NA

▪ Does the agency ensure that each facility’s staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

▪ Does the agency ensure that each facility’s staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

115.13 (b)

▪ In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.) ☒ Yes ☐ No ☐ NA
115.13 (c)

- 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 ☐ No

- 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 ☐ No

- 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 ☐ No

115.13 (d)

- Has the facility/agency 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? ☒ Yes ☐ No

- Is this policy and practice implemented for night shifts as well as day shifts? ☒ Yes ☐ No

- Does the facility/agency 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 functions of the facility? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility has a comprehensive staffing plan. Based on the staffing plan the facility has the appropriate amount of staff to respond to sexual abuse and sexual harassment. As I reviewed the staffing plan it meets each requirement found in 115.13(a). In reviewing their policy there are proper provisions if there would be a deviation from the plan and it would be reviewed and documented. In January of 2018 the staffing plan we reviewed and to be complaint with the standard the facility has added 2 more offices to
specific locations in order to have proper staffing levels to meet the standard. Per policy, the staffing plan will be reviewed annually including deployment of monitoring technology to stay in compliance with the standard. The facility does have intermediate to higher level staff doing random unannounced rounds. I was able to view and inspect log sheets which showed the proper documentation of the unannounced rounds. The policy does prohibit any type of announced arounds are occurring. During the tour of the facilities I did ask staff and inmates if supervisors made unexpected rounds and they all acknowledged this is being done.

### Standard 115.14: Youthful inmates

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.14 (a)
- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA

#### 115.14 (b)
- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA

#### 115.14 (c)
- Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) ☒ Yes ☐ No ☐ NA

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility does currently house both male and female youthful offenders. The design of the facilities does allow the agency to house both male and female youthful offender in sight and sound separation from adult offenders. During the course of the private interviews did acknowledge the sight and sound separation from adult offenders.

If youthful offenders are moved the facility does keep direct contact with the youthful offender as they are being moved from one area of the facility to another.

The facility does avoid using isolation to comply with the standard.

As part of the youthful offenders programming is the access to education classes in the immediate area of their housing unit. They are allowed recreation or other activities to exercise large muscle groups and other programming as need.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

☐ 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 ☐ No

115.15 (b)

☒ Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☒ Yes ☐ No ☐ NA

☐ Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.) ☐ Yes ☐ No ☐ NA
115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? ☒ Yes ☐ No
- Does the facility document all cross-gender pat-down searches of female inmates? ☒ Yes ☐ No

115.15 (d)

- Does the facility implement a policy and practice that enables inmates 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 ☐ No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit? ☒ Yes ☐ No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate’s genital status? ☒ Yes ☐ No
- If an inmate’s genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? ☒ Yes ☐ No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The facility has a policy that prevents cross-gender viewing or searches unless it is an exigent circumstance. The facility had no documented cases of cross-gender searches or pat downs within the last 12 months. According to policy and procedure and private inmate interviews the facility allows inmate to shower, change clothes and perform bodily functions without being viewed by the opposite gender.

During my tour and private interviews with inmates and staff it is common practice for staff to announce they are entering a housing unit of the opposite gender. Also during my private interviews no one is searched or examined for the sole purpose of identifying genital status. All the staff has been trained and the training was verified in how to conduct cross-gender pat downs searches of transgender and intersex inmates in a respectful and professional manner.

Standard 115.16: Inmates with disabilities and inmates who are limited English proficient

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect,
and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes □ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes □ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if “other,” please explain in overall determination notes)? ☒ Yes □ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes □ No

- 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 □ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes □ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes □ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes □ No

**115.16 (b)**

- 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 inmates who are limited English proficient? ☒ Yes □ No

- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes □ No

**115.16 (c)**

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety, the performance of first-response duties under §115.64, or the investigation of the inmate’s allegations? ☒ Yes □ No
Auditor Overall Compliance Determination

☐  Exceeds Standard (Substantially exceeds requirement of standards)

☒  Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐  Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The facility has a comprehensive policy as it relates to inmates who have disabilities or are limited English proficient. The facility has information both in English, Spanish and French Creole for their “Zero-Tolerance” policy and procedures. They also have means to communicate with those who suffer from hearing loss or deafness. If an inmate suffers from low vision or blindness the information will be read directly to them by staff. The facility provides equal opportunity to those who suffer from disabilities to participate in all aspects of the agency’s “Zero Tolerance” policy.

The facility has a very well-organized classification program and the needs of the inmates are addressed depending on their disabilities or language barriers in their classification assessment. The facility does not allow inmate interpreters, readers or assistants to interpret for other inmates. If interpretation is needed they will use staff members, language assistance, or other qualified interpreters if needed. This information was validated in the private random interviews with staff.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes  ☐ No

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes  ☐ No
▪ Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

▪ Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? ☒ Yes ☐ No

▪ Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? ☒ Yes ☐ No

▪ Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? ☒ Yes ☐ No

115.17 (b)

▪ 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 inmates? ☒ Yes ☐ No

115.17 (c)

▪ Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? ☒ Yes ☐ No

▪ Before hiring new employees, who may have contact with inmates, does the agency: consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? ☒ Yes ☐ No

115.17 (d)

▪ Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? ☒ Yes ☐ No

115.17 (e)

▪ Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? ☒ Yes ☐ No

115.17 (f)
▪ Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No

▪ Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? ☒ Yes ☐ No

▪ Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? ☒ Yes ☐ No

115.17 (g)

▪ Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? ☒ Yes ☐ No

115.17 (h)

▪ 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 ☐ No ☐ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The facility currently runs background checks on anyone who might have contact with inmates including contractors or volunteers. I was able to review background checks and also during my interviews the information regarding past behavior is asked during the interview process. The facility has the proper policy and procedures in making sure any hiring’s or promotions that the individual has no prior incidents of sexual abuse or sexual harassment. Per agency policy they will conduct background checks a minimum of at least once every five years. If any employee, contractor, or volunteers omits any type of misconduct it is grounds for dismissal according to their policy. If any agency requests any information
regarding substantiated sexual abuse or sexual harassment they will disclose the information.

**Standard 115.18: Upgrades to facilities and technologies**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
  - ☐ Yes  ☒ No  ☐ NA

115.18 (b)

- 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 inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
  - ☒ Yes  ☐ No  ☐ NA

**Auditor Overall Compliance Determination**

- ☒ Exceeds Standard (*Substantially exceeds requirement of standards*)
- ☐ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ Does Not Meet Standard (*Requires Corrective Action*)

**Instructions for Overall Compliance Determination Narrative**

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During my tour of the facilities I observed camera’s throughout the facilities covering all areas where inmates and staff might be. There has been no substantial modifications recently to the facilities video monitoring system. I counted over 530 cameras throughout the facilities. In my interviews with both the department head and PREA Coordinator they both acknowledged video monitoring system PREA
was part of the decision process. The facility has not made a substantial expansion to the existing facility since August 20, 2012.

## RESPONSES PLANNING

### Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.21 (a)

- 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 ☐ No ☐ NA

#### 115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
  
  ☒ Yes ☐ No ☐ NA

- 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 ☐ No ☐ NA

#### 115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?
  
  ☒ Yes ☐ No

- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?
  
  ☒ Yes ☐ No

- 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 ☐ No
▪ Has the agency documented its efforts to provide SAFEs or SANEs? ☒ Yes    ☐ No  

115.21 (d)

▪ Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes    ☐ No

▪ 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    ☐ No

▪ Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes    ☐ No

115.21 (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    ☐ No

▪ As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? ☒ Yes    ☐ No

115.21 (f)

▪ 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/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) ☒ Yes    ☐ No    ☐ NA

115.21 (g)

▪ Auditor is not required to audit this provision.

115.21 (h)

▪ 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? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] ☒ Yes    ☐ No    ☐ NA

Auditor Overall Compliance Determination

☒   Exceeds Standard (Substantially exceeds requirement of standards)

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Does Not Meet Standard  *(Requires Corrective Action)*

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The facility currently has a policy and procedures in place as it relates to evidence and medical examinations. The facility currently investigates reports of sexual abuse and sexual harassments. During my private interview with the investigators they were very knowledgeable in the proper evidence protocol and the evidentiary process. The process the facility has in place does consider youthful offenders that meets federal standard. I was able to review the evidence protocol and it meets the qualification. In my interview with the investigators they use The Nancy J. Cotterman Center for their SANE/SAFE exams. I was able to do a phone interview with a SANE/SAFE staff member and she advised they are available 24/7 days a week to perform all exams.

As a part of the advocacy program utilized by the facility, they use The Nancy J. Cotterman Center. They currently have a signed MOU and this allows for a wide variety of services for victims. They offer victim advocate services, follow-up care beyond the abuse, and will provide services if the incident happened prior to their incarceration. The facility also has posted in English, Spanish and French Creole the 24 hour Hotline number to The Nancy J. Cotterman Center. The call is free and unrecorded. The number was validated by the auditor during our facility tour. As part of their comprehensive response plan the victim has multiple avenues that would allow someone to attend the exam with the victim.

All services are provided at no cost to the inmate.

The agency is currently in the final stages of setting up forensic exam rooms at each facility. Once this process is completed the Nancy J. Cotterman Center will be conducting SAFE/SANE exams on site which will expediate the timeliness of the exams.

### Standard 115.22: Policies to ensure referrals of allegations for investigations

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? ☒ Yes  ☐ No
Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? ☒ Yes ☐ No

115.22 (b)

Does the agency have a policy and practice 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 ☐ No

Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes ☐ No

Does the agency document all such referrals? ☒ Yes ☐ No

115.22 (c)

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 115.21(a).] ☒ Yes ☐ No ☐ NA

115.22 (d)

Auditor is not required to audit this provision.

115.22 (e)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

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During my interview with their investigation unit IPU (Investigations and Project Unit). They stated that all claims of sexual abuse or sexual harassment would be investigated. If the investigation reveals
is sufficient evidence for criminal prosecution it will be forwarded to the Prosecuting Attorney. The facility also has a way of third-party reporting on its website and PREA Hotline number. As of the date of the audit the facility had 120 reports of sexual abuse and harassment and investigated by their investigation unit and most was unsubstantiated. The Sheriff’s office does have statutory authority to investigate all reports of sexual abuse or sexual harassment. Auditors were able to review reports of allegations of sexual abuse and sexual harassment that were received to validate the referrals of sexual assault and sexual harassment complaints.

## TRAINING AND EDUCATION

### Standard 115.31: Employee training

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.31 (a)**

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on inmates’ right to be free from sexual abuse and sexual harassment ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? ☒ Yes ☐ No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? ☒ Yes ☐ No
• Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? ☒ Yes ☐ No

115.31 (b)

• Is such training tailored to the gender of the inmates at the employee’s facility? ☒ Yes ☐ No

• Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? ☒ Yes ☐ No

115.31 (c)

• Have all current employees who may have contact with inmates received such training? ☒ Yes ☐ No

• 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 ☐ No

• 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 ☐ No

115.31 (d)

• Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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During the course of my private interviews with staff they all were able to validate and verify training listed in 115.31(a). The training was also verified when I performed the facility tour and talked with staff.
about how they would respond if a sexual abuse or sexual harassment report was made to them. The training documents were reviewed and verified for the staff. The auditor sat through roll call training and received a copy of the objectives for the roll call and was very impressed with the information that gets to all staff members of the facilities.

### Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

<table>
<thead>
<tr>
<th>115.32 (a)</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures? ☒ Yes ☐ No</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>115.32 (b)</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Have all volunteers and contractors who have contact with inmates 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 inmates)? ☒ Yes ☐ No</td>
</tr>
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<thead>
<tr>
<th>115.32 (c)</th>
</tr>
</thead>
<tbody>
<tr>
<td>▪ Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? ☒ Yes ☐ No</td>
</tr>
</tbody>
</table>

## Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

### Instructions for Overall Compliance Determination Narrative

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All contractors and volunteers have been trained via a PREA trainer on their responsibilities. The level of training is based on their level of contact with the inmates. They are notified of the Zero-Tolerance policy regarding sexual abuse and sexual harassment and informed how to report any incidents. The training was documented and confirmed they understood the elements of these regulations. All training records are maintained by the facility.

During private interviews all volunteers were aware of PREA and their reporting duties.

### Standard 115.33: Inmate education

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

#### 115.33 (a)
- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes ☐ No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes ☐ No

#### 115.33 (b)
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? ☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? ☒ Yes ☐ No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? ☒ Yes ☐ No

#### 115.33 (c)
- Have all inmates received such education? ☒ Yes ☐ No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility? ☒ Yes ☐ No

#### 115.33 (d)
- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? ☒ Yes ☐ No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? ☒ Yes ☐ No

- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? ☒ Yes ☐ No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

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Inmates receive information upon entry to the facility via the inmate and detainee handbook, posters and one-on-one comprehensive education within 30 days and they sign a receipt of acknowledgment of understanding the facility’s “Zero-Torrance” in sexual assault and abuse. During a tour of the booking, fingerprint and releasing area where inmates are first received into the facility, posters are prominently displayed. Posters with this information are also available in every housing unit displayed on the wall. All inmates and detainees at the facility have received this education. The agency has a policy to assist
inmates with other physical or mental disabilities in their understanding of the PREA information. Inmate interviews reveal the information is being disseminated to the inmate/detainee population.

**Standard 115.34: Specialized training: Investigations**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

### 115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its 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 115.21(a).) ☒ Yes ☐ No ☐ NA

### 115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

- 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 115.21(a).] ☒ Yes ☐ No ☐ NA

- 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 115.21(a).] ☒ Yes ☐ No ☐ NA

- 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 115.21(a).] ☒ Yes ☐ No ☐ NA

### 115.34 (c)

- 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 115.21(a).] ☒ Yes ☐ No ☐ NA

### 115.34 (d)

- Auditor is not required to audit this provision.
Auditor Overall Compliance Determination

☐  Exceeds Standard *(Substantially exceeds requirement of standards)*

☒  Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐  Does Not Meet Standard *(Requires Corrective Action)*

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During my interviews with two investigators that is assigned to the IPU (Investigations and Project Unit). This unit investigates sexual abuse and sexual harassment. They shared their investigators training in the confinement setting of a jail. I was able to review their closed confinement sexual abuse training and it is PREA approved training. Since the agency has its own investigation division they are well equipped and trained in how to interview using Miranda and Garrity, collect evidence, rules of evidence and referral for prosecution. The investigators outlined their protocol for receiving the initial report through the investigative process and I was comfortable the agency can investigate the report without bias. The investigator addressed the victim in confinement would be treated no differently than a victim in the community.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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? ☒ Yes  ☐ No

- 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 preserve physical evidence of sexual abuse? ☒ Yes  ☐ No
• 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 victims of sexual abuse and sexual harassment? ☒ Yes ☐ No

• 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? ☒ Yes ☐ No

115.35 (b)

• 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.) ☒ Yes ☐ No ☐ NA

115.35 (c)

• 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? ☒ Yes ☐ No

115.35 (d)

• Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? ☒ Yes ☐ No

• Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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☐ Does Not Meet Standard (Requires Corrective Action)

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The facility has 24-hour medical which is employed through the county that also provides mental health services. Their policy covers how to detect sexual abuse and harassment, preservation of evidence,
effectively and professionally responding to victims of sexual abuse and harassment, and how and whom to report allegation or suspicions of sexual abuse and harassment. Forensic examinations are conducted at The Nancy J. Cotterman Center and are not at the facility. However, during the audit process the facility was in the process of setting up forensic exam rooms at each facility to allow Nancy J. Cotter Center to conduct SAFE/SANE exams at each facility. This will expedite the exam process for the victims. Records indicate all medical and mental health staff has been training in accordance with this policy. In addition to this specialized training, they have completed the generalized training required for other contractors not associated with the medical or mental health field. In the very near future the SAFE/SANE examinations will be on site at the facility by The Nancy J. Cotterman Center staff.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
  ☒ Yes ☐ No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
  ☒ Yes ☐ No

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? ☒ Yes ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? ☒ Yes ☐ No
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate’s criminal history is exclusively nonviolent? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener’s perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability? ☒ Yes ☐ No

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? ☒ Yes ☐ No

115.41 (e)

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No

In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? ☒ Yes ☐ No
115.41 (f)  
- Within a set time period not more than 30 days from the inmate’s arrival at the facility, does the facility reassess the inmate’s risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? ☒ Yes ☐ No

115.41 (g)  
- Does the facility reassess an inmate’s risk level when warranted due to a: Referral?  ☒ Yes ☐ No  
- Does the facility reassess an inmate’s risk level when warranted due to a: Request?  ☒ Yes ☐ No  
- Does the facility reassess an inmate’s risk level when warranted due to a: Incident of sexual abuse?  ☒ Yes ☐ No  
- Does the facility reassess an inmate’s risk level when warranted due to a: Receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness?  ☒ Yes ☐ No

115.41 (h)  
- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?  ☒ Yes ☐ No

115.41 (i)  
- 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 inmate’s detriment by staff or other inmates?  ☒ Yes ☐ No

Auditor Overall Compliance Determination

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With this being a large facility the classification unit is involved in the booking process and it is part of their standard procedure to screen every inmate for victimization. During my staff interviews the risk screening was validated that all inmates are screened upon intake. I reviewed the screening instrument that the facility uses and it meets the objective requirements for risk assessments. Most inmates are booked in to the facility within the hour of intake. In reviewing the screening instrument all the information included in 115.41(d) is included. The screening does include previous acts, convictions, or incarceration history for assessment. If additional information arises according to their policy the inmate will be screened once again. If an inmate refuses to answer or disclose required information they will not be disciplined according to policy and during my interviews this was confirmed. The facility dissemination of information gathered during the screening process will be sent to the appropriate staff as not to create an undue risk or exploitation of the inmate.

### Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

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<th>115.42 (a)</th>
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- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments? ☒ Yes ☐ No

- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments? ☒ Yes ☐ No

| 115.42 (b) |
Does the agency make individualized determinations about how to ensure the safety of each inmate? ☒ Yes ☐ No

115.42 (c)

When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate’s health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? ☒ Yes ☐ No

When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? ☒ Yes ☐ No

115.42 (d)

Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? ☒ Yes ☐ No

115.42 (e)

Are each transgender or intersex inmate’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No

115.42 (f)

Are transgender and intersex inmates given the opportunity to shower separately from other inmates? ☒ Yes ☐ No

115.42 (g)

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay,
bipolar, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? ☒ Yes ☐ No

Auditor Overall Compliance Determination

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During the interviews with staff relating to screening the classification officer will take the information received and make the appropriate decision on housing, bed, work, education, programming assignments and cell placement in order to keep potential victims separate from abusers. Each screening decision is solely based upon the inmate’s screening. The facility currently had 2 transgender or intersex inmates at the time of the audit. Their policy and training require staff to make a decision on a case-by-case basis. Transgender or intersex inmates are reviewed to determine where they can be housed to ensure their health and safety and whether their placement would present management or security problems. Transgender and intersex inmates shower separately from other inmates. There is no dedicated housing for lesbian, gay, bisexual, transgender, or intersex inmates. Re-assessments are conducted every 60 days by classifications.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? ☒ Yes ☐ No
If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?
☒ Yes ☐ No

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? ☒ Yes ☐ No
- Does such an assignment not ordinarily exceed a period of 30 days? ☒ Yes ☐ No

115.43 (d)

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility’s concern for the inmate’s safety? ☒ Yes ☐ No
- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)
In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? ☒ Yes □ No

Auditor Overall Compliance Determination

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During my interview with the PREA Coordinator and PREA Compliance Managers, the facility does not segregate based on the potential victimization. The facility will look and place them in an area which is safe and secure. If an inmate was placed in segregation they would have access to all opportunities the general population inmates do according to their policy. If they would be placed in segregation it would only be until reasonable housing could be arranged. The policy states segregation housing would be reviewed every 30 days if needed.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes □ No

- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes □ No
▪ Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)

▪ Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No

▪ Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No

▪ Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No

▪ Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? ☒ Yes ☐ No

115.51 (c)

▪ Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? ☒ Yes ☐ No

▪ Does staff promptly document any verbal reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

115.51 (d)

▪ Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No

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During my private interviews both with staff and inmates they were able to share multiple ways inmates could report including the following: writing, grievance process via the electronic kiosk or paper form, verbal report to staff, dialing the PREA Hotline from inmate phone system, Ombudsman's phone line, Internal Affairs, National Sexual Assault Hotline, speak with the PREA Coordinator or Compliance Manager, or family. During staff interviews if they received a verbal report they were required to immediately take appropriate action and report it to a supervisor. Most staff made mention of SOP 11.1 their PREA policy that is in effect at their facility. The PREA Coordinator made a quick reference binder and first responder cards for the staff to utilize if an incident occurred. The facility also provides information in their inmate handbooks, inmate flyers and signage for inmate reporting. The facility has a website and A PREA Hotline number for anyone to report sexual abuse or harassment. The Nancy J. Cotterman Rape Crisis Center is a local advocacy organization that allows for reporting directly to them as well. The organization provides a personal contact that allows for inmates to report sexual abuse or sexual harassment 24 hours a day 7 days a week.

**Standard 115.52: Exhaustion of administrative remedies**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.52 (a)**
- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate 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 ☐ No ☐ NA

**115.52 (b)**
- Does the agency permit inmates 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 ☐ No ☐ NA
- Does the agency always refrain from requiring an inmate 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 ☐ No ☐ NA

**115.52 (c)**
- Does the agency ensure that: An inmate 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 ☐ No ☐ NA
- 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 ☐ No ☐ NA

115.52 (d)

- 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 inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate 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 ☐ No ☐ NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, 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 ☐ No ☐ NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate’s decision? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance alleging an inmate 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 ☐ No ☐ NA
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 ☐ No ☐ NA

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 ☐ No ☐ NA

Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

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 ☐ No ☐ NA

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 ☐ No ☐ NA

115.52 (g)

If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility does have an inmate grievance procedure in place. The policy outlines the different methods and requirements for inmates to file grievances and is fully compliant to standard 115.52(b). The policy also addresses if the grievance is against a specific officer they can summit the grievance to any officer and the grievance will not be referred to the staff member who is named in the complaint. There are numerous methods for the inmate to summit sexual abuse or harassment grievances. The time lines outlined in section 115.52(d) is addressed properly in the policy and procedure. Third parties are permitted to assist inmates on allegations of sexual abuse, including other inmates, family members,
attorneys, and advocates. The facility policies were very well written and clearly reflect all requirements of this standard. At the time of the audit there were no documented emergency grievances.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

▪ Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

▪ 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 ☐ No

▪ Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? ☒ Yes ☐ No

115.53 (b)

▪ Does the facility inform inmates, 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 ☐ No

115.53 (c)

▪ Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? ☒ Yes ☐ No

▪ Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)
Instructions for Overall Compliance Determination Narrative

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The facility has an active MOU with The Nancy J. Cotterman Rape Crisis Center which is a local advocacy agency that specifically assist sexual abuse victims. All the information is listed in the inmates handbook how to contact The Nancy J. Cotterman Rape Crisis Center including address and free phone number (954) 761- RAPE (7273) met the reporting requirements were also listed on signs posted in the living area of the inmates. During my private interviews with the inmates they was able to tell me about dialing the number listed on the posters inside of cells from the inmate phone system went to The Nancy J. Cotterman Rape Crisis Center. During the facility tour I was able to make contact with the The Nancy J. Cotterman Rape Crisis Center via the inmate phone system by dialing (954) 761-7276 without any incident.

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**Standard 115.54: Third-party reporting**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? ☒ Yes ☐ No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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The facility has third-party reporting capabilities on their website (http://www.sheriff.org/DOD/Pages/Home.aspx) and PREA Hotline (954) 831-3775 the information posted throughout the facility, contained in inmate handbook and signs posted throughout the facility. All staff members are aware of their responsibility of mandated reporting if notified by a family member, friend, or interested party of an allegation of sexual abuse occurring in the Broward County Jail.

### OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

#### Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

**115.61 (a)**

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

**115.61 (b)**

- Apart from reporting to designated supervisors or officials, does staff always refrain 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 ☐ No

**115.61 (c)**

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes ☐ No

- Are medical and mental health practitioners required to inform inmates of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No

**115.61 (d)**
If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? ☒ Yes ☐ No

115.61 (e)

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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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During the course of random interviews and interviews with staff they are required to report any knowledge, suspicion, or information that relates to incidents of sexual abuse, sexual harassment, retaliation, or staff neglect. This is also reflected in their policy and procedures. According to policy and interviews with staff, the facility has a tight span of control on what information can be disseminated concerning reports of sexual abuse and sexual harassment. Any staff who would receive a report of sexual abuse or harassment must report immediately to a supervisor so the information can be passed on to the PREA team assigned to the facility.

During interviews with medical and mental health practitioners they are required to immediately report any claim of sexual abuse. As part of training for medical and mental health staff, they are required to inform the inmates of their duty to report. If the victim is under the age of 18 the agency will make the proper notification to those entities required by law.

All allegations no matter the avenue of reporting is directed to the two facility investigators for investigation.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)
When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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During the course of random interviews with staff, each was asked how they would respond to an inmate who is a substantial risk of imminent sexual abuse, staff will respond immediately. Each staff member responded during the interviews they would immediately respond, separate the victim and suspect and then make the proper notification so the risk can be investigated properly.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

☐ Upon receiving an allegation that an inmate 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 ☐ No

115.63 (b)

☐ Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)

☐ Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)
Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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According to policy and procedure the facility head or designee will notify another facility of any report of sexual abuse. In the interview with the head of the facility this information was confirmed. Once the notification is received, the information is then forward to the facility where the alleged abuse occurred. The notification is made as soon as possible but within 72 hours and the notification is also documented. Once the information is received it is investigated in accordance to the standards.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? ☒ Yes ☐ No

- Upon learning of an allegation that an inmate 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 ☐ No

- Upon learning of an allegation that an inmate 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 ☐ No
Upon learning of an allegation that an inmate 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 ☐ No

115.64 (b)

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 ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The facility has a well written policy, procedure and training in place for all staff who may be a first responder whether it is security or non-security staff. During the course of the random staff interviews as well as during the facility tour, each person asked, responded accordingly on how to respond to a report of sexual abuse. Each staff member interviewed knew to separate the victim and alleged abuser, not to allow them to take any action which could destroy physical evidence. The same protocol will be used for the alleged abuser so he/she cannot destroy any physical evidence as well. Each area of the facilities has a first responder guide for quick reference in the event of a sexual abuse that also outlines the appropriate response for first responders.

Once the report has been made and the victim and abuser has been separated the first responder(s) will preserve and protect the crime scene until the crime scene has been referred to the response team.

If the first responder is non-security staff the same procedure and protocol is used to protect evidence of the alleged victim.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.65 (a)

- 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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (*Substantially exceeds requirement of standards*)

☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

☐ Does Not Meet Standard (*Requires Corrective Action*)

Instructions for Overall Compliance Determination Narrative

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The facilities have a well written policy, procedure and plan which includes a flow chart for the coordinated response. As part of the coordinated response every report of sexual abuse or sexual harassment is immediately referred to medical for evaluation.

Standard 115.66: Preservation of ability to protect inmates from contact with abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- 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 inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? ☒ Yes ☐ No

115.66 (b)

- Auditor is not required to audit this provision.
Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The agency does participate in collective bargaining and during the interview with the agency head he stated they do have the authority to remove a staff member on the allegation of sexual abuse.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

▪ Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? ☒ Yes ☐ No

▪ Has the agency designated which staff members or departments are charged with monitoring retaliation? ☒ Yes ☐ No

115.67 (b)

▪ Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? ☒ Yes ☐ No

115.67 (c)

▪ 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 inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- 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 inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No

- 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 ☐ No

- 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 inmate disciplinary reports? ☒ Yes ☐ No

- 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 inmate housing changes? ☒ Yes ☐ No

- 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 inmate program changes? ☒ Yes ☐ No

- 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 ☐ No

- 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 ☐ No

- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks? ☒ Yes ☐ No

115.67 (e)

- 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 ☐ No

115.67 (f)

- Auditor is not required to audit this provision.
Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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The agency has a well written policy and procedure regarding protecting inmates and staff from retaliation. The agency has dedicated Executive Lieutenants at each facility who would monitor retaliation whether it was an inmate or staff member.

As part of the facilities protection measures they will employ multiple measures, such as housing changes or transfers, removal of alleged staff or inmate abuser from contact with the victim, emotional support for the staff or inmate who fear retaliation for reporting sexual abuse or harassment.

Except in instances where the report of sexual abuse is unfounded and for at least 90 days the facility will monitor the following: the treatment of residents or staff who report sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff, to see if there are changes in the treatment or conduct of the inmate, and if changes are noted the facility will act promptly to remedy the retaliation.

The facility will also monitor the inmates’ disciplinary reports, housing changes, program changes, negative performance reviews of staff, and staff reassignments. If the monitoring requires beyond the 90 days the facility will continue to monitor beyond the 90 days.

The monitoring also includes periodic status checks of the inmate. If any other individual who cooperates with an investigation the agency will take the appropriate steps to protect the individual from retaliation.

**Standard 115.68: Post-allegation protective custody**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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The facility does have a comprehensive policy and procedure on the use of involuntary segregation as it relates to the victim of an alleged sexual abuse. If there is no alternative means of separation from the abuser the facility will use involuntary segregation for no more than 24 hours. If they are placed in involuntary segregation, they will have access to all programs, privileges, education or work opportunities to the extent possible.

If involuntarily segregation is used it will be clearly documented.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- 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/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes  ☐ No  ☐ NA
▪ Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] ☒ Yes ☐ No ☐ NA

115.71 (b)
▪ Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? ☒ Yes ☐ No

115.71 (c)
▪ Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No

▪ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No

▪ Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)
▪ 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 ☐ No

115.71 (e)
▪ 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 inmate or staff? ☒ Yes ☐ No

▪ Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No

115.71 (f)
▪ Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? ☒ Yes ☐ No

▪ 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 ☐ No

115.71 (g)
- 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 ☐ No

### 115.71 (h)
- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

### 115.71 (i)
- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? ☒ Yes ☐ No

### 115.71 (j)
- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

### 115.71 (k)
- Auditor is not required to audit this provision.

### 115.71 (l)
- 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 115.21(a).) ☒ Yes ☐ No ☐ NA

**Auditor Overall Compliance Determination**

- ☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
- ☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
- ☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

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The facility has a comprehensive policy as it relates to investigate allegations of sexual abuse and sexual harassment. The agency has 2 full time investigators assigned to the PREA team. Both investigators were interviewed during the on-site audit. During the interview with the facility investigators they do investigate all reports of sexual abuse or sexual harassment promptly, thoroughly, and objectively. The investigators who were interviewed were well trained and had received training as it relates to investigating sexual abuse in a confinement setting. An investigation is initiated no matter where the source originates whether it if from an internal or external sources such as a third-party report.

The investigative process for an report of sexual abuse within the facility is not investigated any differently that a report from within the community. The investigative team will gather and preserve all evidence, including DNA, physical, and electronic monitoring data.

The investigation will also include interviewing victims, suspects, or witnesses. As part of the investigative process they will review and document all previous reports or complaints of sexual abuse. Once the investigation has sufficient evidence to support criminal prosecution the agency will forward the investigation to the States Attorney. The agency does have the legal authority to submit a criminal investigation for the filing of formal charges.

During the course of an investigation the credibility of an alleged victim, suspect, or witness is determined on an individual basis and the current status as an inmate or staff. The investigators stated during their interviews the victim, suspect or witness would be treated as anyone in the community would be treated.

The agency would never require an inmate who reports sexual abuse to submit to a polygraph examination or use a truth telling device as a condition to proceed with an investigation.

During the course of the investigation the investigators would look at numerous areas to find any staff actions or failures which might have led to the sexual abuse.

All investigations are documented in a written report which will include, all evidence collected, interviews performed, and any other pertinent information that was related to the investigation. All investigations are retained in accordance to the standards.

If during the investigation the alleged abuser or victim is no longer employed or under control of the facility the investigation will continue and proceed as any other investigation would.

With employing 2 full time PREA Investigators, the agency can respond and investigate complaints in a timely and efficient manner.

While the auditors were on-site for the audit they reviewed current and previous investigations. The reports were well written, properly investigated and all the proper documentation was in place to make a final determination of whether the complaint was unfounded, substantiated, or unsubstantiated.

**Standard 115.72: Evidentiary standard for administrative investigations**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

**115.72 (a)**
- 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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

During the interviews with both PREA Investigators they both stated they only use the preponderance of the evidence as the standard whether the complaint is substantiated.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- Following an investigation into an inmate’s allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? ☒ Yes ☐ No

115.73 (b)

- If the agency did not conduct the investigation into an inmate’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 inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) ☐ Yes ☐ No ☒ NA

115.73 (c)

- Following an inmate’s allegation that a staff member has committed sexual abuse against the inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate
has been released from custody, does the agency subsequently inform the inmate whenever:
The staff member is no longer posted within the inmate’s unit? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the
  inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate
  has been released from custody, does the agency subsequently inform the inmate whenever:
  The staff member is no longer employed at the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the
  inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate
  has been released from custody, does the agency subsequently inform the inmate whenever:
  The agency learns that the staff member has been indicted on a charge related to sexual abuse
  in the facility? ☒ Yes ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the
  inmate, unless the agency has determined that the allegation is unfounded, or unless the inmate
  has been released from custody, does the agency subsequently inform the inmate whenever:
  The agency learns that the staff member has been convicted on a charge related to sexual abuse
  within the facility? ☒ Yes ☐ No

115.73 (d)

- Following an inmate’s allegation that he or she has been sexually abused by another inmate,
  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 ☐ No

- Following an inmate’s allegation that he or she has been sexually abused by another inmate,
  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 within the facility?
  ☒ Yes ☐ No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? ☒ Yes ☐ No

115.73 (f)

- Auditor is not required to audit this provision.

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*

☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ **Does Not Meet Standard** *(Requires Corrective Action)*
Instructions for Overall Compliance Determination Narrative

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The agency has policy and procedures in place for reporting to inmates who have made a report of sexual abuse or sexual harassment whether the investigation was substantiated, unsubstantiated, or unfounded.

If an allegation is made against a staff member, unless it is unfounded, and the inmate is still in-custody the agency will notify the inmate if the staff member is no longer posted with the inmates’ unit, no longer employed at the facility, if the staff member has been indicted or convicted on a charge related to sexual abuse at the facility.

If the victim has been sexually abused by another inmate and the agency learns the alleged abuser has been indicted or convicted of sexual abuse the agency will notify the victim.

All notification will be properly documented. Upon file review the auditors were able to verify the agency does provide proper notification to the victim.

**DISCIPLINE**

**Standard 115.76: Disciplinary sanctions for staff**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? ☒ Yes ☐ No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? ☒ Yes ☐ No

115.76 (c)

- 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 ☐ No

115.76 (d)
▪ 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  ☐ No

▪ 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  ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency policy and procedures outlines if a staff member has violated the agency's sexual abuse or sexual harassment policy they are subject to disciplinary sanctions including termination. If the staff member engaged in sexual abuse termination is the presumptive disciplinary sanction.

If a staff member violates the agencies policy relating to sexual abuse or sexual harassment the sanctions will be based on the nature and circumstances of the act to include the staff members disciplinary history, and sanctions imposed for comparable offenses by other staff with similar histories.

If a staff member resigns or is terminated for violating the agencies sexual abuse or sexual harassment policy it will be reported to the relevant licensing body if the staff member holds a license. With the agency currently a law enforcement entity the information will already be known internally.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)
▪ Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No

▪ Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No

▪ Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No

115.77 (b)

▪ 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 inmates? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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The agency policy and procedure does prohibit any contractor or volunteer who engages in sexual abuse to have contact with any inmates. With the agency being a law enforcement entity, the report will be known. If the contractor of volunteer has a license the sexual abuse will be reported to the relevant licensing body.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

▪ Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? ☒ Yes ☐ No
115.78 (b)  
- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate’s disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? ☒ Yes ☐ No

115.78 (c)  
- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No

115.78 (d)  
- 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 require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

115.78 (e)  
- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? ☒ Yes ☐ No

115.78 (f)  
- 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 ☐ No

115.78 (g)  
- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.) ☐ Yes ☒ No ☐ NA

**Auditor Overall Compliance Determination**

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*
Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency policy and procedures allow for inmates who engage in sexual abuse of another inmate are subject to disciplinary sanctions. The sanctions are commensurate with the nature and circumstances of the abuse committed to include the inmate’s disciplinary history, and comparable offenses committed by other inmates.

If sanctions are imposed the inmate’s mental disability or mental illness will be considered to see if it contributed to the behavior.

The facility has a strong mental health program for their inmate population and is a useful resource should an inmate need therapy, counseling or intervention to correct or address underlying issues for abuse. The facility would consider requiring an offending inmate to participate in such interventions as a condition to access programming or other benefits.

If sexual contact is made with a staff member that is unwarranted and non-consensual the agency will discipline the inmate. According to policy if an inmate makes a sexual abuse report in good faith they agency will not consider this as filing a false report or lying.

If inmate on inmate is sexual activity is consensual the agency does not consider it sexual abuse but is prohibited within the facilities.

MEDICAL AND MENTAL CARE

Standard 115.81: Medical and mental health screenings; history of sexual abuse

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)
  ☐ Yes ☐ No ☒ NA

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure
that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) ☐ Yes ☐ No ☒ NA

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? ☒ Yes ☐ No

115.81 (d)

- 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 ☐ No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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The agency has a very proactive screening process in relationship to identifying prior sexual victimization whether it occurred in an institutional setting or community. The victimization screening is conducted my medical staff during the intake process. If during the intake process if prior victimization is discovered the inmate is offered follow-up care with medical or a mental health professional within 14 days.
If prior sexual victimization in an institutional setting is made known during the screening process, the information will be strictly limited to medical, mental health, and other necessary staff to develop treatment plans, housing assignments, work, education, and other necessities for the inmates or required by law.

During interviews with Medical and Mental Health staff, they acknowledged they do obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting for those under the age of 18.

**Standard 115.82: Access to emergency medical and mental health services**

**All Yes/No Questions Must Be Answered by the Auditor to Complete the Report**

115.82 (a)
- Do inmate 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 ☒ No ☐

115.82 (b)
- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?
  - Yes ☒ No ☐
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners?
  - Yes ☒ No ☐

115.82 (c)
- Are inmate 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 ☒ No ☐

115.82 (d)
- 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 ☒ No ☐

**Auditor Overall Compliance Determination**
- ☒ **Exceeds Standard** *(Substantially exceeds requirement of standards)*
- ☐ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*
☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

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The agency does offer timely, unimpeded access to emergency medical treatment and crisis intervention services. The facility provides 24/7 medical care and all inmates who report sexual abuse or sexual harassment are immediately referred to medical. The agency has a great working relationship with the Nancy J. Cotterman Center which also offers 24/7 access to crisis intervention services.

Should an inmate be a victim of sexual abuse the agency will offer timely information and timely access to emergency contraception and sexually transmitted infection prophylaxis, in accordance with the professionally accepted standard. All services are provided to the inmate free of charge.

Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)
- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? ☒ Yes ☐ No

115.83 (b)
- 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 ☐ No

115.83 (c)
- Does the facility provide such victims with medical and mental health services consistent with the community level of care? ☒ Yes ☐ No

115.83 (d)
- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) ☒ Yes ☐ No ☐ NA
115.83 (e)
- If pregnancy results from the conduct described in paragraph § 115.83(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.) ☒ Yes ☐ No ☐ NA

115.83 (f)
- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? ☒ Yes ☐ No

115.83 (g)
- 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 ☐ No

115.83 (h)
- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

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The facility does offer medical and mental health evaluations to all inmates who have been victimized by sexual abuse. This was validated during the interview with the facilities mental health care provider. If a victim has a treatment plan the plan will stay in place even if the inmate is transferred, placed in another facility, or transferred.
The quality of care offered to the victim including medical and mental health is consistent with the level of care within the community.

Should an inmate be the victim of vaginal penetration while incarcerated will be offered a pregnancy test free of charge. The victim will also be offered tests for sexually transmitted infections as medically appropriate. This too is free of charge.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- 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 ☐ No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? ☒ Yes ☐ No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? ☒ Yes ☐ No

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? ☒ Yes ☐ No

- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No

- 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 ☐ No

- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No

- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No
• Does the review team: Prepare a report of its findings, including but not necessarily limited to
determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for
improvement and submit such report to the facility head and PREA compliance manager?
☒ Yes ☐ No

115.86 (e)

• Does the facility implement the recommendations for improvement, or document its reasons for
not doing so? ☒ Yes ☐ No

Auditor Overall Compliance Determination

☒ Exceeds Standard (Substantially exceeds requirement of standards)

☐ Meets Standard (Substantial compliance; complies in all material ways with the
standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

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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 the standard. These recommendations must be included in the Final Report, accompanied by
information on specific corrective actions taken by the facility.

The facility has a very comprehensive policy and procedures for the incident reviews. The auditor had
the opportunity to observe one of the agencies monthly incident review meetings. The meeting
consisted of the PREA Coordinator, PREA Compliance Managers, Medical, Mental Health,
Classification, Food Service, Security, Commanders, Mid-Level Supervisors, PREA Investigators, and
other members of the assigned PREA Team.

The review team meets within 30 days of the conclusion of the investigation. During the observation of
the review teams meeting, the team looked at policy and procedure to see if any changes needed to be
made, was the incident motivated by race, ethnicity, gender identity, lesbian, gay, bisexual,
transgender, or intersex, status, or perceived status, gang affiliation, or other group dynamics.

The review team also reviewed the location of the compliant looking for physical barriers, staffing
levels, and placement of technology.

At the conclusion of the review meeting each person in attendance had the opportunity to respond, ask
questions, or make suggestions. Once the review process is completed the facility head receives a
report of the group’s findings if any were identified.
### Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

<table>
<thead>
<tr>
<th>115.87 (a)</th>
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<tbody>
<tr>
<td>▪ 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?</td>
<td>☒ Yes ☐ No</td>
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<tr>
<th>115.87 (b)</th>
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<tbody>
<tr>
<td>▪ Does the agency aggregate the incident-based sexual abuse data at least annually?</td>
<td>☒ Yes ☐ No</td>
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<tr>
<th>115.87 (c)</th>
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<tbody>
<tr>
<td>▪ 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?</td>
<td>☒ Yes ☐ No</td>
</tr>
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<tr>
<th>115.87 (d)</th>
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<tbody>
<tr>
<td>▪ 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?</td>
<td>☒ Yes ☐ No</td>
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</tbody>
</table>

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<tr>
<th>115.87 (e)</th>
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<tr>
<td>▪ Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)</td>
<td>☒ Yes ☐ No ☒ NA</td>
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<th>115.87 (f)</th>
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<tr>
<td>▪ 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.)</td>
<td>☐ Yes ☐ No ☒ NA</td>
</tr>
</tbody>
</table>

### Auditor Overall Compliance Determination

- ☐ Exceeds Standard (*Substantially exceeds requirement of standards*)
- ☒ Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- ☐ Does Not Meet Standard (*Requires Corrective Action*)

### Instructions for Overall Compliance Determination Narrative
The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

The agency does collect accurate data for every allegation for sexual abuse from all four of their facilities using a standardized instrument. The data is aggregated annually and reported. The data collected would be able to answer all questions from the Survey of Sexual Violence conducted by the Department of Justice.

The agency does maintain, review, and collect as needed all documents, including reports, investigation files, and sexual abuse incident reviews.

If the DOJ would request all data from the previous calendar year the agency would provide the data requested.

### Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

#### 115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? ☒ Yes ☐ No

#### 115.88 (b)

- Does the agency’s annual report include a comparison of the current year’s data and corrective actions with those from prior years and provide an assessment of the agency’s progress in addressing sexual abuse ☒ Yes ☐ No

#### 115.88 (c)
▪ 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 ☐ No

115.88 (d)

▪ 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 ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard *(Substantially exceeds requirement of standards)*

☒ Meets Standard *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*

☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

*The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.*

The agency does review all data collected in order to assess and improve the effectiveness of their sexual abuse prevention, detection and response policies, practices, and training, including by; identifying problem areas, taking corrective action on an ongoing basis, preparing an annual report of its findings and corrective action for each facticity.

The annual report published on the agency website does include comparative data from prior years. The annual report is approved by the agency head which was confirmed during the interview process.

The agency does redact any personal information prior to publishing the report.

**Standard 115.89: Data storage, publication, and destruction**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

▪ Does the agency ensure that data collected pursuant to § 115.87 are securely retained? ☒ Yes ☐ No
115.89 (b)  
- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? ☒ Yes ☐ No

115.89 (c)  
- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? ☒ Yes ☐ No

115.89 (d)  
- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

☐ **Exceeds Standard** *(Substantially exceeds requirement of standards)*  
☒ **Meets Standard** *(Substantial compliance; complies in all material ways with the standard for the relevant review period)*  
☐ **Does Not Meet Standard** *(Requires Corrective Action)*

**Instructions for Overall Compliance Determination Narrative**

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

All data collected is securely retained and the report is posted annually on the agency website and all personal identifiers are removed.

The data is securely retained for at least 10 years.

**AUDITING AND CORRECTIVE ACTION**

**Standard 115.401: Frequency and scope of audits**

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report
115.401 (a)

- During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A “no” response does not impact overall compliance with this standard.) ☐ Yes  ☒ No

115.401 (b)

- Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.) ☒ Yes  ☐ No

- 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.) ☐ Yes  ☐ No  ☒ 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.) ☐ Yes  ☐ No  ☒ NA

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility? ☒ Yes  ☐ No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? ☒ Yes  ☐ No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees? ☒ Yes  ☐ No

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)
☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)

☐ Does Not Meet Standard (Requires Corrective Action)

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

This was the agency’s first compliance audit and the auditing team was welcomed and allowed to have complete access to all four of the facilities. The agency gave the auditing team unlimited access to any reports, investigations or other information needed to check for compliance. We were given very suitable accommodations for all our private interviews with inmates.

The inmates were allowed to send confidential information to the auditors and the auditors received 2 letters of correspondence. Of the two letters received, one had information which did not pertain to or relate to PREA and the other letter received was addressed during the on-site audit.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

• The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility’s last audit report was published. 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 that there has never been a Final Audit Report issued.) ☒ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

☒ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
☐ Does Not Meet Standard *(Requires Corrective Action)*

Instructions for Overall Compliance Determination Narrative

The narrative below must include a comprehensive discussion of all 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 the standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

Once the final report is issues, the agency will post it on their website/
AUDITOR CERTIFICATION

I certify that:

☒ The contents of this report are accurate to the best of my knowledge.

☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Click here to enter text._______________________  July 5ᵗʰ, 2018  

Auditor Signature  ____________________________  Date  ____________________________

¹ See additional instructions here: https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6-a216-6f4bf7c7c110.