## **PREA Facility Audit Report: Final**

Name of Facility: Marion Correctional Institution

Facility Type: Prison / Jail

**Date Interim Report Submitted:** NA **Date Final Report Submitted:** 12/01/2022

| Auditor Certification   |                                     |
|---|-------------------------------------|
| 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.   |                                     |
| I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template. |                                     |
| Auditor Full Name as Signed: Lynni OHaver   | Date of<br>Signature:<br>12/01/2022 |

| AUDITOR INFORMATION              |                        |  |
|----------------------------------|------------------------|--|
| Auditor name:                    | O'Haver, Lynni         |  |
| Email:                           | scarlettohara1@mac.com |  |
| Start Date of On-<br>Site Audit: | 10/17/2022             |  |
| End Date of On-Site<br>Audit:    | 10/19/2022             |  |

| FACILITY INFORMATION       |   |  |
|----------------------------|---|--|
| Facility name:             | Marion Correctional Institution                     |  |
| Facility physical address: | 3269 Northwest 105th Street, Ocala, Florida - 34482 |  |
| Facility mailing address:  | p.o box 158, lowell, Florida - 32663                |  |

| Primary Contact   |                                   |  |
|-------------------|-----------------------------------|--|
| Name:             | Frank P. Freihofer                |  |
| Email Address:    | frank.freihofer@fdc.myflorida.com |  |
| Telephone Number: | 13862345490                       |  |

| Warden/Jail Administrator/Sheriff/Director |                                  |  |
|--|----------------------------------|--|
| Name:                                      | Shannon Varnes                   |  |
| Email Address:                             | shannon.varnes@fdc.myflorida.com |  |
| Telephone Number:                          | 3523688401                       |  |

| Facility PREA Compliance Manager |                                     |  |
|----------------------------------|-------------------------------------|--|
| Name:                            | Frank Freihofer                     |  |
| Email Address:                   | frank.freihofer@fdc.myflorida.com   |  |
| Telephone Number:                | O: 352-368-8434                     |  |
| Name:                            | Fawn BonhamWalker                   |  |
| Email Address:                   | fawn.bonhamwalker@fdc.myflorida.com |  |
| Telephone Number:                | O: 352-368-8486                     |  |

| Facility Health Service Administrator On-site |                            |  |
|---|----------------------------|--|
| Name:   | Carrie Daffron             |  |
| Email Address:                                | cdaffron@TeamCenturion.com |  |
| Telephone Number:                             | 3528406421                 |  |

| Facility Characteristics  |                    |  |
|---|--------------------|--|
| racinity characteristics  |                    |  |
| Designed facility capacity:   | 1509               |  |
| Current population of facility:   | 1662               |  |
| Average daily population for the past 12 months:  | 1369               |  |
| Has the facility been over capacity at any point in the past 12 months?                                     | Yes                |  |
| Which population(s) does the facility hold?   | Males              |  |
| Age range of population:  | 48.32              |  |
| Facility security levels/inmate custody levels:   | Community to Close |  |
| Does the facility hold youthful inmates?  | No                 |  |
| Number of staff currently employed at the facility who may have contact with inmates:                       | 342                |  |
| Number of individual contractors who have contact with inmates, currently authorized to enter the facility: | 76                 |  |
| Number of volunteers who have contact with inmates, currently authorized to enter the facility:             | 115                |  |

| AGENCY INFORMATION                                    |  |  |
|---|--|--|
| Name of agency:                                       | Florida Department of Corrections                  |  |
| Governing authority or parent agency (if applicable): |  |  |
| Physical Address:                                     | 501 S Calhoun Street, Tallahassee, Florida - 32399 |  |
| Mailing Address:                                      |  |  |
| Telephone number:                                     | 8504885021   |  |

| Agency Chief Executive Officer Information: |                               |  |
|---|-------------------------------|--|
| Name:                                       | Ricky Dixon                   |  |
| Email Address:                              | Ricky.Dixon@FDC.myFlorida.com |  |
| Telephone Number:                           | (850) 488-5021                |  |

| Agency-Wide PREA Coordinator Information |                          |                |                                 |
|--|--------------------------|----------------|---------------------------------|
| Name:                                    | Judy Cardinez-<br>Harris | Email Address: | Judy.Cardinez@fdc.myflorida.com |

#### **SUMMARY OF AUDIT FINDINGS**

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

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

| Number of standards exceeded: |  |  |
|-------------------------------|--|--|
| 2                             | <ul> <li>115.13 - Supervision and monitoring</li> <li>115.33 - Inmate education</li> </ul> |  |
| Number of standards met:      |  |  |
| 43                            |  |  |
| Number of standards not met:  |  |  |
| 0                             |  |  |

## POST-AUDIT REPORTING INFORMATION GENERAL AUDIT INFORMATION **On-site Audit Dates** 1. Start date of the onsite portion of the 2022-10-17 audit: 2. End date of the onsite portion of the 2022-10-19 audit: Outreach 10. Did you attempt to communicate ( Yes with community-based organization(s) or victim advocates who provide O No services to this facility and/or who may have insight into relevant conditions in the facility? a. Identify the community-based Creative Services Inc., Ocala-Marion County organization(s) or victim advocates with Sexual Assault & Domestic Violence Center whom you communicated: Gulf Coast Children's Advocacy Center AUDITED FACILITY INFORMATION 1794 14. Designated facility capacity: 15. Average daily population for the past 1369 12 months: 16. Number of inmate/resident/detainee 12 housing units: O Yes 17. Does the facility ever hold youthful inmates or youthful/juvenile detainees? $\bigcirc$ No Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

| One of the Onsite Portion of the   | Audit |
|--|-------|
| 36. Enter the total number of inmates/ residents/detainees in the facility as of the first day of onsite portion of the audit:   | 1372  |
| 38. Enter the total number of inmates/<br>residents/detainees with a physical<br>disability in the facility as of the first<br>day of the onsite portion of the audit:   | 51    |
| 39. Enter the total number of inmates/ residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit: | 89    |
| 40. Enter the total number of inmates/ residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:  | 78    |
| 41. Enter the total number of inmates/ residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:   | 12    |
| 42. Enter the total number of inmates/ residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:  | 60    |

| 43. Enter the total number of inmates/ residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:  | 33                |
|---|-------------------|
| 44. Enter the total number of inmates/<br>residents/detainees who identify as<br>transgender or intersex in the facility as<br>of the first day of the onsite portion of<br>the audit:  | 4                 |
| 45. Enter the total number of inmates/<br>residents/detainees who reported sexual<br>abuse in the facility as of the first day of<br>the onsite portion of the audit:   | 12                |
| 46. Enter the total number of inmates/ residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:   | 9                 |
| 47. Enter the total number of inmates/ residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:                                    | 0                 |
| 48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations): | No text provided. |
| Staff, Volunteers, and Contracto<br>Day One of the Onsite Portion of  |                   |
| 49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:   | 282               |

| 50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:                         | 92                                       |
|---|--|
| 51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:                        | 124                                      |
| 52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit: | No text provided.                        |
| INTERVIEWS  |  |
| Inmate/Resident/Detainee Interviews   |  |
| Random Inmate/Resident/Detainee Interviews  |  |
| 53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:  | 77                                       |
| 54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)   | ■ Age                                    |
|   | Race                                     |
|   | Ethnicity (e.g., Hispanic, Non-Hispanic) |
|   | Length of time in the facility           |
|   | Housing assignment                       |
|   | Gender                                   |
|   | Other                                    |
|   |  |

| 55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?  | The Auditor was provided with the facility inmate roster for selection of a random representation of inmates. The facility roster includes the inmates age, gender, race, ethnicity, date received at facility, tentative release date, program assignments, work assignments, classification level, security level, and housing assignment. This allowed the Auditor to accurately select a random representation of inmates for the random interview process.  The total number of inmates interviewed (77) include Formal interviews and Informal interviews. Formal - 29, Informal - 48. |
|---|--|
| 56. Were you able to conduct the minimum number of random inmate/ resident/detainee interviews?   |  |
| 57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | No text provided.  |
| Targeted Inmate/Resident/Detainee Interviews  |  |
| 58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:  | 15   |

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

| 60. Enter the total number of interviews conducted with inmates/residents/ detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:  | 1 |
|--|---|
| 61. Enter the total number of interviews conducted with inmates/residents/ detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol: | 1 |
| 62. Enter the total number of interviews conducted with inmates/residents/ detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:  | 1 |
| 63. Enter the total number of interviews conducted with inmates/residents/ detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:   | 1 |
| 64. Enter the total number of interviews conducted with inmates/residents/ detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:  | 1 |
| 65. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:  | 2 |

| 66. Enter the total number of interviews conducted with inmates/residents/ detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:  | 3   |
|--|---|
| 67. Enter the total number of interviews conducted with inmates/residents/ detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:  | 4   |
| 68. Enter the total number of interviews conducted with inmates/residents/ detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:   | 3   |
| 69. Enter the total number of interviews conducted with inmates/residents/ detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol: | 0   |
| a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/ detainees in this category:   | Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.  The inmates/residents/detainees in this targeted category declined to be interviewed. |
| b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).   | The facility provided documentation the inmate was transferred to another FDC facility.   |

| 70. Provide any additional comments     | No text provided. |
|---|-------------------|
| regarding selecting or interviewing     |                   |
| targeted inmates/residents/detainees    |                   |
| (e.g., any populations you oversampled, |                   |
| barriers to completing interviews):     |                   |
|   |                   |

## Staff, Volunteer, and Contractor Interviews

| Random Staff Interviews   |  |
|---|--|
| 71. Enter the total number of RANDOM STAFF who were interviewed:  | 14   |
| 72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)  | <ul> <li>Length of tenure in the facility</li> <li>Shift assignment</li> <li>Work assignment</li> <li>Rank (or equivalent)</li> <li>Other (e.g., gender, race, ethnicity, languages spoken)</li> <li>None</li> </ul> |
| 73. Were you able to conduct the minimum number of RANDOM STAFF interviews?   |  |
| 74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation): | No text provided.  |

#### Specialized Staff, Volunteers, and Contractor Interviews

Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.

| 75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors): | 23  |
|--|---|
| 76. Were you able to interview the Agency Head?  |   |
| 77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?                                |   |
| 78. Were you able to interview the PREA Coordinator?   |   |
| 79. Were you able to interview the PREA Compliance Manager?  | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)</li> </ul> |

80. Select which SPECIALIZED STAFF Agency contract administrator roles were interviewed as part of this audit from the list below: (select all that Intermediate or higher-level facility staff apply) responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment Line staff who supervise youthful inmates (if applicable) Education and program staff who work with youthful inmates (if applicable) Medical staff Mental health staff Non-medical staff involved in cross-gender strip or visual searches Administrative (human resources) staff Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff Investigative staff responsible for conducting administrative investigations Investigative staff responsible for conducting criminal investigations Staff who perform screening for risk of victimization and abusiveness Staff who supervise inmates in segregated housing/residents in isolation Staff on the sexual abuse incident review team Designated staff member charged with monitoring retaliation First responders, both security and nonsecurity staff

|   | Intake staff               |
|---|----------------------------|
|   | Other                      |
|   |                            |
| 81. Did you interview VOLUNTEERS who may have contact with inmates/                         | Yes                        |
| residents/detainees in this facility?   | ○ No                       |
| a. Enter the total number of VOLUNTEERS who were interviewed:                               | 2                          |
| b. Select which specialized VOLUNTEER   | Education/programming      |
| role(s) were interviewed as part of this audit from the list below: (select all that        | ☐ Medical/dental           |
| apply)  | Mental health/counseling   |
|   | Religious                  |
|   | Other                      |
|   |                            |
| 82. Did you interview CONTRACTORS who may have contact with inmates/                        | ● Yes                      |
| residents/detainees in this facility?   | ○ No                       |
| a. Enter the total number of CONTRACTORS who were interviewed:                              | 2                          |
| b. Select which specialized CONTRACTOR  | Security/detention         |
| role(s) were interviewed as part of this audit from the list below: (select all that apply) |                            |
|   | Education/programming      |
|   | ☐ Medical/dental           |
|   | Food service               |
|   | ☐ Maintenance/construction |
|   | Other                      |
|   |                            |

83. Provide any additional comments regarding selecting or interviewing specialized staff.

No text provided.

# SITE REVIEW AND DOCUMENTATION SAMPLING

#### **Site Review**

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

| 84. Did you have access to all areas of the facility?   | ● Yes                              |
|---|------------------------------------|
|   | ○ No                               |
| Was the site review an active, in the following:  | quiring process that included      |
| 85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, crossgender viewing and searches)?                                       | <ul><li>✓ Yes</li><li>No</li></ul> |
| 86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)? | <ul><li>Yes</li><li>No</li></ul>   |

| 87. Informal conversations with inmates/<br>residents/detainees during the site<br>review (encouraged, not required)?  | Yes No  |
|--|---|
| 88. Informal conversations with staff during the site review (encouraged, not required)?   | <ul><li>Yes</li><li>No</li></ul>  |
| 89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).                                 | No text provided.   |
| <b>Documentation Sampling</b>  |   |
| Where there is a collection of records to review-s<br>records; background check records; supervisory<br>processing records; inmate education records; m<br>self-select for review a representative sample of | rounds logs; risk screening and intake edical files; and investigative files-auditors must  |
| 90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?                                       |   |
| 91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).                            | The Auditor requested and reviewed the following documentation - Offender Education, Risk Assessments, Risk Reassessments, Offender PREA Education (initial receipt).  156 Housing Logs - for review of Unannounced Rounds and Opposite Gender Rounds documentation. Grievances involving SA, PREA hotline reports / documentation. Investigative files of SA & SH. |

# SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

## Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

|   | # of<br>sexual<br>abuse<br>allegations | # of criminal investigations | # of administrative investigations |   |
|---|--|------------------------------|------------------------------------|---|
| Inmate-<br>on-<br>inmate<br>sexual<br>abuse | 7                                      | 0                            | 6                                  | 1 |
| Staff-<br>on-<br>inmate<br>sexual<br>abuse  | 5                                      | 0                            | 5                                  | 0 |
| Total                                       | 12                                     | 0                            | 11                                 | 1 |

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

|  | # of sexual<br>harassment<br>allegations | # of criminal investigations | # of<br>administrative<br>investigations | # of allegations<br>that had both<br>criminal and<br>administrative<br>investigations |
|--|--|------------------------------|--|---|
| Inmate-on-<br>inmate<br>sexual<br>harassment | 0  | 0                            | 0  | 0   |
| Staff-on-<br>inmate<br>sexual<br>harassment  | 2  | 0                            | 2  | 0   |
| Total  | 2  | 0                            | 2  | 0   |

# Sexual Abuse and Sexual Harassment Investigation Outcomes

#### **Sexual Abuse Investigation Outcomes**

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

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

|                                      | Ongoing | Referred<br>for<br>Prosecution | Indicted/<br>Court Case<br>Filed | Convicted/<br>Adjudicated | Acquitted |
|--------------------------------------|---------|--------------------------------|----------------------------------|---------------------------|-----------|
| Inmate-on-<br>inmate sexual<br>abuse | 1       | 0                              | 0                                | 0                         | 0         |
| Staff-on-<br>inmate sexual<br>abuse  | 0       | 0                              | 0                                | 0                         | 0         |
| Total                                | 1       | 0                              | 0                                | 0                         | 0         |

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

|                               | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|-------------------------------|---------|-----------|-----------------|---------------|
| Inmate-on-inmate sexual abuse | 0       | 0         | 6               | 0             |
| Staff-on-inmate sexual abuse  | 0       | 0         | 5               | 0             |
| Total                         | 0       | 0         | 11              | 0             |

### **Sexual Harassment Investigation Outcomes**

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

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

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

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

|  | Ongoing | Unfounded | Unsubstantiated | Substantiated |
|--|---------|-----------|-----------------|---------------|
| Inmate-on-inmate<br>sexual<br>harassment | 0       | 0         | 0               | 0             |
| Staff-on-inmate<br>sexual<br>harassment  | 0       | 1         | 1               | 0             |
| Total                                    | 0       | 1         | 1               | 0             |

# Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

## **Sexual Abuse Investigation Files Selected for Review**

| 98. Enter the total number of SEXUAL | 14 |
|--------------------------------------|----|
| ABUSE investigation files reviewed/  |    |
| sampled:                             |    |

| 99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | Yes  No  NA (NA if you were unable to review any sexual abuse investigation files)                  |
|---|---|
| Inmate-on-inmate sexual abuse   | investigation files   |
| 100. Enter the total number of INMATE-<br>ON-INMATE SEXUAL ABUSE investigation<br>files reviewed/sampled:   | 7   |
| 101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?  | Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| 102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?  | Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files) |
| Staff-on-inmate sexual abuse inv  | estigation files  |
| 103. Enter the total number of STAFF-<br>ON-INMATE SEXUAL ABUSE investigation<br>files reviewed/sampled:  | 5   |
| 104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?   | Yes  No  NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)  |

| 105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?   | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</li> </ul> |
|---|--|
| Sexual Harassment Investigation   | Files Selected for Review  |
| 106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:  | 2  |
| 107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes? | <ul> <li>Yes</li> <li>No</li> <li>NA (NA if you were unable to review any sexual harassment investigation files)</li> </ul>            |
| Inmate-on-inmate sexual harass  | ment investigation files   |
| 108. Enter the total number of INMATE-<br>ON-INMATE SEXUAL HARASSMENT<br>investigation files reviewed/sampled:  | 0  |
| 109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?   | No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)                                    |
| 110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?   | Yes  No  NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)                               |

| Staff-on-inmate sexual harassme  | ent investigation files   |
|--|---|
| 111. Enter the total number of STAFF-<br>ON-INMATE SEXUAL HARASSMENT<br>investigation files reviewed/sampled:  | 2   |
| 112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?   | Yes  No  NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?   | Yes  No  NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files) |
| 114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.   | No text provided.   |
| SUPPORT STAFF IN   | FORMATION   |
| DOJ-certified PREA Audito  | ors Support Staff   |
| 115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly. | Yes  No   |

| 116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.  AUDITING ARRANGEMENTS AND COMPENSATION  121. Who paid you to conduct this audit? | Non-certified Support Sta   | aff   |
|--|---|---|
| COMPENSATION   | NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the preonsite through the post-onsite phases to the submission of the final report. Make |   |
| 121. Who paid you to conduct this audit? The audited facility or its parent agency   |   | EMENTS AND  |
|  | 121. Who paid you to conduct this audit?  | My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)  A third-party auditing entity (e.g., accreditation body, consulting firm) |
| Identify the name of the third-party auditing entity  PREA Auditors of America, LLC  |   | PREA Auditors of America, LLC   |

#### **Standards**

#### **Auditor Overall Determination Definitions**

- Exceeds Standard (Substantially exceeds requirement of standard)
- Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period)
- Does Not Meet Standard (requires corrective actions)

#### **Auditor Discussion Instructions**

Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.

#### 115.11

## Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* 

Florida Department of Corrections Bureau of Security Organization Chart

Interviews conducted with:

PREA Coordinator

PREA Compliance Manager

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the policy of FDC is to establish zero-tolerance standards for sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in institutions and community corrections while protecting the rights of inmates and offenders, regardless of gender or sexual preference. This will be accomplished through accountability of perpetrators and the punishment of those institutional and community correctional officials who fail to prevent, detect, and respond to sexual abuse, sexual battery, and sexual harassment crimes for incarcerated inmates and those offenders under departmental jurisdiction.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the FDC will establish and provide implementation of standards for the detection, prevention, elimination, and punishment of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This will be accomplished by increasing the availability of data, information, and training on the incidence of sexual abuse, sexual battery, and sexual harassment, consequently improving the management and administration of correctional facilities.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the FDC will establish guidelines for proper and immediate reporting of such incidents as well as providing appropriate safeguards for victims, the management of evidence, and actions to be taken from reporting an allegation to substantiation of sexual abuse, sexual battery, staff sexual misconduct,

and sexual harassment.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* clearly defines prohibited behaviors regarding sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. In addition, any inmate, employee, volunteer, or contractor who commits a sexual battery may be criminally prosecuted pursuant to chapter 794, Florida Statute.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the Office of Institutions, specifically through the PREA Coordinator and Compliance Managers, is responsible for the administration of the PREA compliance program.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the PREA Coordinator will be responsible for the coordination of activities related to the PREA compliance program through:

- Implementation of terms and conditions of contracts with service providers.
- Development of effective strategies to ensure successful compliance, including policies, procedures, protocols, training, and dissemination of information related to the compliance with federal laws.
- Review of standards to suggest to the United States Department of Justice any revisions, additions, or deletions which may be required.
- Review of all audits, survey results, and incident reports on issues that may affect the compliance process and taking a proactive approach to corrective measures.
- Advising executive, managerial, and supervisory staff within the Department on issues related to the compliance process.
- Planning, directing, and coordinating all activities related to the compliance program including administrative, financial, and operational issues.
- Serve as a liaison between the Department and the USDOJ.
- Coordinating as appropriate with Department program areas to ensure adherence to the compliance standards.
- Maintaining records of all compliance activities.
- Providing training to staff covering all phases of the compliance process, including new compliance procedures and new or revised standards.
- Representing the Department in PREA compliance audits, hearings, PREA committee meetings, and conferences.
- Conducting pre-audit inspection of facilities to ensure preparedness for scheduled compliance audits
- Acting as a liaison between field staff and executive staff on compliance issues.

- Enforcing the performance of PREA compliance contract terms and conditions.
- Assisting in the revision of the Department policies and procedures to ensure compliance with PREA standards.
- Conducting annual staffing reviews for each institution.

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator who verified she has sufficient time and authority in her position to accomplish PREA responsibilities for the agency. The PREA Coordinator oversees fifty-six PREA Compliance Managers, to include seven PREA Compliance Managers assigned to private facilities. The PREA Coordinator reports directly to the FDC Deputy Director of Institutional Operations. A review of the FDC organizational chart provided evidence that the agency has designated an upper-level position as the PREA Coordinator.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the Compliance Manager will coordinate the compliance program at the facility under the advice of the PREA Coordinator and shall:

- Ensure that his/her institution is prepared for PREA audits, including gathering
  all documentation necessary to demonstrate compliance with the standards
  and ensuring that all files are completed at least six weeks prior to the
  scheduled audit date.
- Along with the Facility Warden, designate the compliance teams that will be responsible for evaluating the institution's operation against the assigned standards, determining compliance with both the standard and Department policy, compiling related documentation, preparing plans of action, and recommending additions, deletions, and revisions to existing policies and procedures.
- Prepare and maintain records of all compliance activities within his/her respective institution, including folders, standards compliance checklists, supporting documentation, self-evaluation reports, audit reports, corrective action plans, monitoring reports, and correspondence related to the compliance program.
- Respond in a timely manner to any request(s) for information from the USDOJ submitted through the PREA Coordinator.
- Coordinate transportation, office space, facility tours, interviews, and information needed by the mock audit team or the visiting DOJ auditing team for the audit.
- Ensure the institution puts forth its best effort to maintain compliance during the three-year period between audits.
- Conduct annual PREA self-audits during years where the facility does not receive a mock (pre-audit) or certified DOJ audit.

During the on-site phase of the audit, the Auditor interviewed the PREA Compliance Manager and verified he has sufficient time and authority in his position to accomplish the PREA responsibilities for Marion C. I. Evidence shows that the Florida Department of Corrections has designated a facility PREA Compliance Manager for Marion C. I. as verified through a review of the FDC organizational chart and through interviews with the PREA Compliance Manager and the Facility Warden.

During the on-site phase of the audit, the Auditor interviewed the Facility Warden who confirmed the responsibilities of the PREA Compliance Manager assigned to Marion C. I. and verified he is provided sufficient time and authority in his position to accomplish these responsibilities.

Upon review of the policy and the agency organizational chart and upon completion of interviews conducted with the PREA Coordinator, PREA Compliance Manager, and Facility Warden during the on-site visit, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

#### 115.12 Contracting with other entities for the confinement of inmates

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 205.002, Contract Management

Interviews conducted with:

Agency Contract Administrator

Florida Department of Corrections Procedure 205.002, Contract Management states all new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include the following language to ensure compliance with 28 C.F.R. Part 115 The contractor/vendor(s) will comply with the national standards to prevent, detect, and respond to prison rape under the Prison Rape Elimination Act (PREA), Federal Rule 28 C.F.R. Part 115. The contractor/vendor(s) will also comply with all Department policies and procedures that relate to PREA.

During the pre-on-site phase of the audit, the Auditor conducted an interview with the Agency Contract Administrator regarding how contracts are monitored to determine if the contractor complies with the PREA requirements of the contract. The Agency Contract Administrator explained that all Florida Department of Corrections contracts include verbiage related to the vendor's obligation to comply with the PREA Standards prior to entering into agreement with the agency. If the entity is not PREA compliant, the contract will not be executed. Additionally, these contracts are monitored by Assistant Wardens who serve as the facility PREA Compliance Managers, conduct weekly visits, and inspections to the contracted facility to ensure the compliance of the PREA standards is maintained.

The Agency Contract Administrator informed the Auditor the Florida Department of Corrections currently has 75 contracts for the confinement of inmates. The seven Department of Management Services (DMS) Contract facilities submit their completed audit reports to the FDC PREA Coordinator. These reports are then posted on the FDC public page along with FDC facility PREA reports.

The PREA compliance results for the sixty-eight contracts for confinement of inmates with the other entities are managed by the contract manager in accordance with the

Upon review of the policy and upon completion of the interview with the Agency Contract Administrator, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

| 115.13 | Supervision and monitoring   |
|--------|--|
|        | Auditor Overall Determination: Exceeds Standard  |
|        | Auditor Discussion   |
|        | Documents:   |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i>   |
|        | Florida Department of Corrections Procedure 602.030, Security Staff Utilization  |
|        | Florida Department of Corrections Post Order #3 - Shift Supervisor   |
|        | Florida Department of Corrections Marion C. I. 2022 Staffing Plan Report   |
|        | Facility Blueprint   |
|        | Facility Housing Logs  |
|        |  |
|        | Interviews conducted with:   |
|        | Warden or Designee   |
|        | PREA Coordinator   |
|        | PREA Compliance Manager  |
|        | Intermediate or Higher-Level Facility Staff  |
|        |  |
|        | On-site Review Observations:   |
|        | Daily operational functions  |
|        | Staff interaction with inmates   |
|        | Inmate movement  |
|        | Supervisory staff conducting rounds  |
|        |  |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i> states in conjunction with each institution, the Office of Institutions will develop a particularized staffing plan for each institution that provides adequate staffing levels, and where applicable, video monitoring, to protect inmates against sexual abuse, sexual battery, staff sexual misconduct and sexual harassment. This plan shall be reviewed at least once per year to assess, determine, and |

document whether adjustments are necessary, both by the Warden of the institution and by the PREA Coordinator.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states the agency shall establish guidelines for appropriate and efficient use of security staff to ensure the agency meets its mission of protecting the public and providing a safe and humane environment for staff and offenders.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states to meet staffing requirements, the Bureau of Security Operations shall develop a post chart for each institution, annex, or other facility. A post chart is an actual listing by title of all security posts that are necessary to operate an institution, including the relief positions.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states security staffing level guidelines are designated to assist supervisors in the daily staffing of their shifts by establishing priorities for post staffing which will assist in ensuring continued security and safety of staff, visitors, and inmates. Staffing Level Guidelines are developed by the Bureau of Security Operations and approved by the Deputy Security of Institutions. The Guidelines are used to determine the staffing levels of each security post. Security staffing levels are designated as Level I, Level II, and Level III posts.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states Level I posts are critical for the daily operation of a shift. Operating at Level I may include limiting certain activities such as recreation or work squads. The Duty Warden must grant his/her approval to eliminate or delay any of these daily activities. To staff these posts, supervisors should first utilize staff from Level III posts and then from Level II posts. Under no circumstances will a shift begin below Level I staffing or be allowed to go below this level except in emergencies. Shift Supervisors will respond appropriately to ensure Level I staffing by utilization of the Extended Day Roster in accordance with FDC Procedure 208.007, Extended Workdays for Correctional Officers.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states Level II posts are essential to the daily normal operation of a facility. Operating at Level II allows all activities and programs to be marginally staffed. Level III posts are necessary for long-term "normal" operation. Level III posts will generally be utilized to fill any Level I or Level II posts as needed prior to using the Extended Day Roster. Administrative shift positions listed as Level II or Level III may be used to meet the

Level I needs on the day and night shifts before use of the Extended Day Roster.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states facilities shall utilize the Roster Management System (RMS) to document and account for all security personnel and which post staff members are assigned. Shift Supervisors will ensure that each RMS daily security roster is completed, reviewed, and electronically approved before the end of their shifts. The RMS daily security roster will be reviewed by the Chief of Security the next business day. All deviations from the post chart are documented in an incident report accordingly.

During the pre-on-site phase of the audit, the Auditor reviewed documentation of the deviations from the staffing plan that occurred in the 12 months prior to the on-site visit. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the deviations from the staffing plan. The Facility Warden confirmed that all instances of non-compliance with the staffing plan are documented in the Roster Management System (RMS). If a Level I post is vacant, the non-compliance is also documented via an incident report and Supervisory staff is responsible for following procedures to ensure adequate staffing for the facility.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states a quarterly review will be completed for each security roster beginning with the Warden. Information to be reviewed will be long-term loans, extended special assignments, security-staffing levels, and gender specific assignments. During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Marion C. I. Staffing Plan Report. The Auditor's review of the report, the Auditor noted the facility, when reviewing staffing requirements and the appropriate numbers of assigned staff, took into consideration the following requirements:

- Generally accepted detention and correctional practices.
- Any judicial findings of inadequacy.
- Any inadequacy from internal or external oversight bodies.
- Any findings of inadequacy from Federal investigative agencies.
- All the components of the facility's physical layout (including blind spots);
- Composition of inmate population.
- Number of and placement of supervisory staff.
- Institution programs specific to each shift.
- All applicable State or local laws.
- Prevalence of substantiated and unsubstantiated incidents of sexual abuse.
- Any other relevant factors.

The Marion C. I. 2022 Staffing Plan Report was detailed and specific in each of the above categories. The report also included the review of analyses conducted in 2015

by the National Institute of Corrections (NIC) and by the Florida Legislature's Office of Program Policy Analysis and Government Accountability (OPPAGA). Additionally, in January 2016 the Department contracted with the Association of State Correctional Administrators (ASCA) to conduct a comprehensive staffing analysis.

In the NIC and OPPAGA reviews, the Department was found to have inadequate staffing. The staffing plan was adequate, however the deployment of staff to fulfill the needs of the staffing plan were found to be deficient. Due to limited number of staff at Marion C. I., Level II and Level III posts were left vacant in order to fill all critical Level I posts. Level I posts are the minimum staffing required for the daily operation of a shift and require limitation of certain activates on the compound. The reviews found that the staffing of only Level I posts, the number of secondary duties and the number of staff on special assignments affected the safety and security of facilities. Recommendations were provided to fill all Level I, II, and III posts and to create posts for specific special assignments.

Since the completion of this analysis, the Department is working to modify the current relief factor and piloting programs to test the transition from two twelve-hour shifts to three eight-hour shifts. In addition, the Department continuously reviews all recommendations submitted by these organizations to improve staffing at Marion C. I.

The average daily number of inmates on which the facility-staffing plan was predicated on was 1,369 Security Level 4 / Custody Level Close, Medium, Minimum and Community custody inmates. The facility reported the six common deviations from the staffing plan during the auditing period included FMLA, hospital duty, COVID 19, and staff on loan.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding Marion C. I. staffing plan. The Facility Warden discussed how the Bureau of Security Operations develops a post chart for Marion C. I. that documents the required daily staffing levels. Additionally, when developing a post chart, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the inmate population, the prevalence of substantiated and unsubstantiated allegations of sexual abuse, inmate-on-inmate assaults, and uses of force. The Facility Warden also explained that video monitoring is also taken into consideration. Marion C. I. has 210 video cameras installed throughout the facility that are reviewed on a regular basis. The Facility Warden confirmed that he conducts a quarterly and annually staffing review, which is documented in the Roster Management System (RMS). To ensure compliance with the staffing plan, Facility Warden and the Majors conducts rounds on the compound for visual verification of staff assignments throughout the compound.

During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the PREA Coordinator; both confirmed the process of developing a staffing plan previously described by the Facility Warden. The PREA Coordinator also confirmed that an assessment of the facility-staffing plan is conducted annually, and she is consulted regarding any adjustments to the staffing plan. The auditor reviewed the average daily number of inmates' report, staff shift rosters, facility blueprint, and daily inmate activity schedules to verify adequate staff coverage in comparison to inmate population, inmate movement, and facility size and layout.

Florida Department of Corrections Post Order #3 – *Shift Supervisor* states shift supervisors must conduct daily-unannounced rounds and security inspections of all inmate housing and activity areas. All security posts will be visited, and these inspections documented daily on the DC6-207 Control Room Log, as well as the DC6-209 Housing Unit Log, or DC6-228 Inspection of Special Housing Record maintained in each area. The unannounced rounds shall be conducted on all shifts and staff shall not alert other staff members that a round is being conducted.

During the on-site phase of the audit, the Auditor reviewed 156 pages of housing logs documenting the supervisor unannounced rounds and verified the unannounced rounds are being conducted and documented in accordance with the facility Post Order and the PREA Standard. The sample of housing logs reviewed covered a thirteen-month period, included several days in each month, and covered every shift. In the samples reviewed, the Auditor did not find any consistent patterns or inadequacies.

During the on-site phase of the audit, the Auditor conducted supervisory level staff interviews and inquired how unannounced rounds are completed without staff knowledge. Supervisory level staff indicated this is completed by observing staff movement, monitoring radio transmissions, alternating movement patterns or being unpredictable with times or walking pattern and listening to staff conversations while conducting rounds throughout the facility.

During the on-site phase of the audit, the Auditor toured the facility and observed the daily operational functions, staff interacting with inmates, general inmate movement, inmates out at recreation, inmates participating in programs, inmates completing job assignments, and supervisory staff conducting rounds. These observations provided additional verification of policy and of standard compliance.

Upon review of the policies and documentation provided and upon completion of interviews conducted with the Facility Warden, PREA Coordinator, PREA Compliance Manager, and Intermediate or Upper-level Supervisory Staff during the on-site visit, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

| 115.14 | Youthful inmates   |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | Documents:   |
|        | Florida Department of Corrections Procedure 601.220, Youthful Offenders  |
|        |  |
|        | Interviews conducted with:   |
|        | Facility Warden  |
|        | PREA Compliance Manager  |
|        |  |
|        | Florida Department of Corrections Procedure 601.220, <i>Youthful Offenders</i> defines a youthful offender as any person who is sentenced as such by the court or classified as such by the department pursuant to Section 958.11(4), F.S. |
|        | Marion C. I. does not house youthful inmates. This was verified during interviews with the Facility Warden, PREA Compliance Manager, and Classification Staff.   |
|        | Upon review of the policy and upon completion of the interviews with facility staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.          |

| 115.15 | Limits to cross-gender viewing and searches  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | Documents:   |
|        | Florida Department of Corrections Procedure 602.018, Contraband & Searches of Inmates  |
|        | Florida Department of Corrections Procedure 602.036, Gender Specific Security Positions, Shifts, Posts & Assignments   |
|        | Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response  |
|        | Florida Department of Corrections General Post Order 01  |
|        | Florida Department of Corrections PREA Training Curriculum / Records   |
|        |  |
|        | Interviews conducted with:   |
|        | Random sample of Inmates   |
|        | Transgender/Intersex Inmates   |
|        |  |
|        | On-site Review Observations:   |
|        | Daily operational functions  |
|        | Staff interaction with inmates   |
|        | Inmate movement  |
|        | Florida Department of Corrections Procedure 602.036, <i>Gender Specific Security Positions, Shifts, Posts, &amp; Assignments</i> states strip searches of inmates will be conducted only by those in the Correctional Officer class of the same sex as the inmate, except in emergency circumstances as determined by the Shift Supervisor. All strip searches of inmates conducted by staff of the opposite gender shall require the staff conducting the search to submit an Incident Report DC6-210, explaining the justification for the search exception. |
|        | Documentation provided by the facility indicated there were no cross-gender strip searches or cross-gender visual body cavity searches conducted during the last 12  |

months. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and the PREA Compliance Manager and verified that no cross-gender strip searches or cross-gender visual body cavity searches were conducted.

Florida Department of Corrections Procedure 602.018, *Contraband & Searches of Inmates* states unclothed searches of inmates will be conducted by staff of the same sex, except in an emergency as determined by the Shift Supervisor. The clothing and the inmate's body will be carefully inspected to determine if contraband is being concealed.

During the pre-on-site phase of the audit, the Auditor reviewed the provided documentation to include shift schedules, shift rosters, and daily inmate activity schedule. During the on-site phase of the audit, the Auditor compared the information reviewed with her observations made during the facility tour and noted the number of male staff members is more than adequate and covers all shifts.

During the on-site phase of the audit, the Auditor observed the facility operations throughout the day, to include continuous inmate movement throughout the facility, continuous physical interactions between staff and inmates, and inmates performing job assignments throughout the facility and within the compound grounds. The Auditor also observed opposite gender announcements being conducted throughout the facility tour.

Florida Department of Corrections Procedure 602.036, *Gender Specific Security Positions, Shifts, Posts, & Assignments* states inmates will not be supervised by officer of the opposite gender while inmates are showering or in the toilet areas unless appropriate privacy screening is provided to obscure from view the breasts of female inmates and the genitalia and buttocks of both male and female inmates. Inmates will be required to cover themselves appropriately in accordance with local rules and requirements when not in the shower or not utilizing toilets and while in route to and from these areas.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* and the Florida Department of Corrections General Post Order 01 states staff of the opposite gender will announce at the beginning of each shift that they will be present in the housing unit at any time during the shift. This announcement will be documented on the DC6-209 Housing Unit Log.

During the on-site phase of the audit, the Auditor requested interviews with a random representation of inmates. Inmates from every housing unit and of various diversities were interviewed. Twenty-nine random inmate interviews were completed, and all twenty-nine inmates confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, twenty-six of the twenty-nine inmates interviewed confirmed staff of the opposite gender announce her presence prior to entering the housing unit.

During the on-site phase of the audit, the Auditor conducted a review of 156 housing logs and observed entries indicating opposite gender working and/or entering housing dormitory with notification to inmates being announced documented. The sample of housing logs reviewed covered a thirteen-month period, included several days throughout each month that were selected by the Auditor; the sample of housing logs reviewed covered all shifts. The Auditor also observed the announcement of an opposite gender entering a housing dormitory throughout the on-site tour of the facility, which provided additional documentation and the facility's compliance with this standard.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states staff will not search or physically examine a potential gender dysphoria inmate, transgender inmate or intersex inmate for the sole purpose of determining the inmate's genital status. It the genital status is unknown it can be determined through conversation with the inmate, by reviewing medical documentation or if necessary, through a broader medical examination conducted in private by a medical practitioner.

During the pre-on-site phase of the audit, the Auditor reviewed documentation provided by the facility showed the facility has had zero searches of a transgender or intersex for the sole purpose of determining the inmate's genital status.

During the on-site phase of the audit, the Auditor requested an inmate roster for transgender or intersex inmates to conduct targeted interviews. The Auditor conducted separate interviews with three transgender inmates and inquired if there was any reason to believe the transgender inmate was strip-searched for the sole purpose of determining genital status; all three transgender inmates responded no and indicated that staff members communicated extremely well during the intake process.

Florida Department of Corrections Procedure 602.018, *Contraband & Searches of Inmates* states all staff members shall receive training on how to conduct cross-

gender pat-down searches and searches of transgender and intersex inmates/ offenders in a professional and respectful manner consistent with security correctional environments.

During the on-site phase of the audit, the Auditor reviewed the training records and training curriculum provided to staff members who may have contact with inmates, how to perform cross-gender pat-down searches and searches of transgender and intersex inmates. Training records indicated staff members receive training on the agency's PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined the agency's policy on cross-gender pat-down searches and searches of transgender and intersex inmates, policy prohibiting search of inmates for the sole purpose of determining the inmate's genital status, defining exigent circumstances, and conducting searches in a professional and respectful manner.

Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during random staff interviews conducted during the on-site phase, Marion C. I. demonstrated facility-wide practices that are consistent with policy and with the requirements that complies with the PREA standard.

# Inmates with disabilities and inmates who are limited English 115.16 proficient Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Procedure 604.101, Americans with Disabilities Act Florida Department of Corrections Staff Translator List Florida Department of Corrections Contract with Language Line Services, Inc. Florida Department of Corrections Inmate Handbook (multiple languages) PREA / Sexual Awareness Brochures (multiple languages) Interviews conducted with: Facility Warden Inmates with Disabilities or LEP Random sample of Staff On-site Review Observations: PREA informational signage posted in multiple languages Florida Department of Corrections Procedure 604.101, Americans with Disabilities Act states the Department is required to authorize and/or provide accommodation(s) to inmates with documented disabilities to ensure accessibility for services, programs, and activities. When reviewing an inmate's request for an accommodation, decisions are based on the specific inmate's needs, capabilities, as well as specific criteria for

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention,*Detection, & Response states inmates with recognized disabilities and Limited English

Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual

the program or activity. The Americans with Disabilities Act requires the Department

to make decisions on a case-by-case basis with facts, not suppositions.

abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in FDC Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDC translator list, language line services.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager regarding how the facility takes appropriate steps to ensure that all inmates have an equal opportunity to participate in the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The PREA Compliance Manager detailed the efforts made by the facility to ensure impaired inmates are provided opportunities and benefits equal to those of unimpaired inmates. Inmates with either disabilities or LEP inmates are provided with alternatives to accommodate participation in the PREA program such as videos and brochures tailored to their primary language.

Additionally, every effort is made to provide all training in a format that will be easily understood by inmates who have a physical or developmental impairment or who have limited English proficiency. The Florida Department of Corrections maintains a list of translators for every institution and this list is utilized for assisting with translation; Marion C. I. also has a contract with the Language Line Services, and this service can be utilized at any time.

PREA training for inmates is provided in a video format that is also closed-captioned to accommodate the hearing impaired. If an inmate is identified with a developmental impairment, training is provided through the video with additional instruction if the inmate indicates he has questions.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates shall not be used as interpreters or readers except in exigent circumstances. Marion C. I. utilizes staff as translators or initiates the use of the Language Line for translation services.

During the pre-on-site phase of the audit, the Auditor reviewed the existing contract between the Florida Department of Corrections and Language Line Services, Inc. The contract outlines the translation services provided for each FDC facility, rate of service, and the contract start and ending dates. During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections staff translator list. The Staff Translator list provides the staff member's name, contact number, language translation ability, and facility assignment. The various language translation abilities of FDC staff include Arabic, Armenian, Chinese, Creole, Danish, Filipino, French, German, Gujarati, Hindi, Italian, Kurdish, Laos, Latin, Native American, Patwa, Portuguese, Punjabi, Romanian, Russian, Spanish, Swedish, Tagalog, Thai, Ukrainian, Urdu, and American Sign Language.

The Auditor was also able to confirm compliance with Florida Department of Corrections Procedure 602.053 during the on-site visit when staff demonstrated the process utilized when communicating with an inmate who is LEP, deaf, or disabled. Staff provided a through demonstration of providing all the required PREA information to include the zero-tolerance policy, how to report an incident of sexual abuse or sexual harassment, counseling services, and programs available.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff. Each staff member confirmed the agency policy prohibiting the use of an inmate to provide translation services; all staff members acknowledged the use of either the language line or contacting another staff member to translate.

During the on-site visit, the Auditor interviewed three targeted inmates with physical or cognitive disabilities, LEP, or hearing or vision impaired. All three inmates acknowledged receiving PREA information during the intake / transfer process. All three inmates described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility. Additionally, each inmate acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations throughout the compound. These PREA bulletins are posted in multiple languages, located near the phone banks inside the dormitories, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display phone numbers and addresses for the victim advocate services through the Ocala-Marion County Sexual Assault & Domestic Violence Center, Tips hotline, and the PREA Hotline through the Gulf Coast Children's Advocacy Center.

Upon review of the policies, inmate handbook, and upon completion of the targeted interviews with inmates, and the informal interviews with facility staff, Marion C. I.

demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.17 Hiring and promotion decisions Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 208.049, Background Investigation, & Appointment of Certified Officers Florida State Statute 408.809, Background Screening Interviews conducted with: Administrative / Human Resources Staff On-site Review Observations: Personnel files Florida Department of Corrections Procedure 208.049, Background Investigation & Appointment of Certified Officers states the agency shall not hire or promote anyone who has engaged in sexual abuse in a prion, jail, lockup, community confinement, juvenile facility, or other institution. The agency shall not hire or promote anyone 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 has been civilly or administratively adjudicated to have engaged in such activity. Florida State Statute 408.809, Background Screening establishes responsibilities, policies, and procedures governing background investigations. All FDC employees, interns, contractors, visitors, vendors, and volunteers requesting employment and/or entry into any FDC institution will have a criminal records background investigation completed. Florida State Statute 408.809, Background Screening establish the responsibilities for conducting and ensuring criminal records background investigations are completed on all eligible FDC candidates is the responsibility of the Office of Human Resources

(OHR) and the Office of Human Resources Centralized Recruitment Team located in the Florida Department of Corrections Central Office. The OHR and the Department's Recruitment Team also ensure a criminal records background check is completed on all current FDC and contract employees at least once every five years.

The Florida Department of Corrections OHR utilizes the LiveScan fingerprinting program. LiveScan fingerprinting refers to both the technique and the technology used to capture fingerprints and palm prints electronically. An individual's fingerprints are captured in a digitized format and then transmitted to a state repository and/or the Federal Bureau of Investigations (FBI). LiveScan results can be verified and returned to the source within a matter of hours. LiveScan fingerprints are based on the fingerprint image data contained in the submission and are unique to the individual. Responses to a fingerprint-based inquiry are based on positive identification. Fingerprints provide for a biometric search of the Criminal History Database (CHRI). If an employee from the Florida Department of Corrections has any contact with any law enforcement agency, the LiveScan program notifies the FDC Emergency Action Center (EAC).

During the on-site phase of the audit, the Auditor conducted an interview with the agency's Administrative / Human Resources personnel who confirmed the agency conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a contractor or volunteer and at least once every five years. The HR Staff Member confirmed the FDC requirement imposed upon all employees to disclose any previous misconduct and the agency's requirement to provide information regarding a former employee upon request of another institution or agency. In addition to using LiveScan, the HR Staff Member also confirmed the agency utilizes the Comprehensive Case Information System (CCIS), Florida Crime Information Center (FCIC), and the National Crime Information Center (NCIC) when conducting background investigations.

Marion C. I. reported, in the 12 months prior to the audit, fifty-three background checks were performed of persons hired or promoted who may have contact with inmates. During the on-site visit, the Auditor reviewed twelve personnel files of new hires, employees with tenure, and those with specialized training. Each file contained the required documentation to include thorough background investigations, which were completed as required and in accordance with Florida Department of Corrections Procedure 208.049 and Florida State Statute 408.809.

Upon review of the policies and review of personnel files and upon completion of the interview conducted with the Human Resources Staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# Upgrades to facilities and technologies 115.18 Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Marion C. I. Security Camera Schematic Report Interviews conducted with: Agency Head Facility Warden Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states the facility will use video monitoring systems and other cost-effective and appropriate technology to supplement its sexual abuse prevention, detection, and response efforts. Annually, the facility will assess the feasibility of and need for new or additional monitoring technology and/or equipment. During the on-site tour of the facility, the Auditor observed convex mirrors, security cameras, and video monitoring equipment in all housing areas, food service, laundry, in common areas, and outside throughout the grounds of the compound. During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility effects the ability to protect inmates from sexual abuse. The Agency Head explained how facility modification has always been focused on providing safety to both staff and inmates. Modifications or expansions that are not in the best interest of the facility or department are not given consideration. The Agency Head also explained that video cameras at the facility are installed in all housing units, common areas, food service, and laundry. Recently, the Department has focused their resources in adding and upgrading the current video monitoring

technology, with the goal of having all areas of the facility under surveillance.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden. During the interview, the Facility Warden confirmed that prior to designing or acquiring any new facility or when planning any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect inmates from sexual abuse. The Facility Warden also confirmed that prior to the installation of the additional cameras the facility shall considered how the addition of such technology would enhance the agency's ability to protect inmates from sexual abuse.

The Facility Warden also informed the Auditor, both video and audio surveillance is regularly reviewed to ensure compliance with requirements for security checks and proper implementation of all security and safety procedures. The Facility Warden confirmed that Marion C. I. has added additional security cameras since the last audit.

Upon review of the policy and the Security Camera Schematic report, and upon completion of the interviews conducted with the Agency Head and the Facility Warden, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.21 Evidence protocol and forensic medical examinations Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections contract with Creative Services Inc., Ocala-Marion County Sexual Assault & Domestic Violence Center Florida Department of Corrections contract with Gulf Coast Children's Advocacy Center, Inc. SANEs / SAFEs Uniform Evidence Protocol Florida Department of Corrections Sexual Abuse Awareness Brochure Interviews conducted with: Random sample of Staff SANE/SAFE Staff PREA Compliance Manager Inmates who reported a sexual abuse On-site Review Observations: Sexual Abuse / Harassment Informational Posters Inmate phones located in each dormitory Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states whenever sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism occurs, the Emergency Action Center (EAC) shall be notified without unnecessary delay. The OIC or the Incident Commander shall ensure that any sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism is reported via a Management Information Notification System (MINS) after notification to EAC.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states the Office of the Inspector General shall be the primary investigative unit of all sexual battery allegations and sexual misconduct allegations occurring on Department property.

During the post-on-site phase of the audit, the Auditor established that inspectors assigned to the Office of the Inspector General's office follow the United States Department of Justice, A National Protocol for Sexual Assault Medical Forensic Examinations a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceeding and criminal prosecutions.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states an inmate victim of a sexual battery or sexual misconduct where physical evidence may be present shall ensure the victim obtains medical treatment, a forensic examination, and advocacy and crisis-intervention services. The forensic examination shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct shall receive timely, unimpeded access to emergency treatment and crisis intervention services. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

During the on-site phase of the audit, the Auditor conducted an interview with an inspector assigned to the Office of Inspector General who confirmed the responsibilities of an inspector, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states that a victim's advocate will be made available to victims of sexual abuse to accompany them through the forensic exam process and shall provide the victim with access to outside victim advocates for emotional support services related to sexual abuse. The facility shall enable reasonable communication between inmates and the organizations providing such services in as confidential manner as possible. The evaluation and treatment of such victims shall include

follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to other facilities or upon release from custody.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, contracts between FDC and the Panhandle Forensic Nurse Specialist, FDC and Creative Services, Inc. and FDC and Gulf Coast Children's Advocacy Center, Inc. Each contract uses clear and concise language, provides the agency's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, each contract describes in detail, the expectations, and responsibilities of each contractor including performance measures and financial consequences if the required service is not met.

The Panhandle Forensic Nurse Specialist, Inc. is a non-profit agency consisting of certified Sexual Assault Nurse Examiners and certified Sexual Assault Forensic Examiner. During the pre-on-site phase of the audit, the Auditor conducted an interview with the certified SAFE Doctor, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department of Justice (DOJ) National Protocol for Sexual Assault Medical Forensic Examinations Adults. The SAFE Doctor explained when they receive a notification for services request from the facility, either herself or a SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either herself or one of the SANE Nurses are available 24/7. The SAFE Doctor confirmed there were no forensic medical examination completed for Marion C. I. during the past 12 months.

Creative Services, Inc. (Ocala-Marion County Sexual Assault & Domestic Violence Center) is a non-profit organization located in Ocala Florida which provides victims of domestic abuse and sexual assault with crisis intervention, victim advocacy, and emotional support services. The Ocala-Marion County Sexual Assault & Domestic Violence Center also provides inmates incarcerated at Marion C. I. that are victims of sexual abuse with advocacy services, emotional support services, victim advocate upon request, accompaniment to forensic exams and investigatory interviews, follow-up services for sexual abuse victims, and providing mailing addresses and phone numbers of victim advocates.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate, and she confirmed the existing contract agreement with the facility. She provided a detailed description of the advocacy services provided to the inmates at Marion C. I. to include emotional support services, victim advocate upon request, follow-up services, and a mailing address and phone number for inmate communication with advocacy services.

The Gulf Coast Children's Advocacy Center, Inc. is a non-profit rape crisis center located in Panama City Florida and with satellite offices located in Blountstown, Marianna, Chipley, Bonifay, and Port St. Joe. The Advocacy Center and the satellite offices provide the community with advocacy services for victims of sexual assault.

The Gulf Coast Children's Advocacy Center has the toll-free hotline for services and support and is the designated outside reporting hotline for inmates at Marion C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a certified rape crisis counselor, and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Marion C. I. to include emotional support services and staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested the phones inside the dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor interviewed a random sample of staff regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

Marion C. I. reported no forensic medical exam were conducted during the past 12 months. During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the Facility Warden and both confirmed this information is correct. As previously stated above, the Auditor also confirmed this information during the interview with the SANE doctor.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor requested interviews with inmates who reported an incident of sexual abuse. The Auditor conducted four targeted interviews and inquired to each inmate, after reporting, did the facility allow them to contact anyone. One of the four inmates confirmed to the Auditor, after reporting the incident, he was able to meet with a contracted Medical and Mental Health staff member and that Medical, and Mental Health staff informed him of the additional services available from the Ocala-Marion Sexual Assault & Domestic Violence Center. One inmate informed the Auditor the incident he reported occurred two years prior, therefore, he declined needing the services of mental health or a victim advocate. The two remaining inmates interviewed by the Auditor denied reporting an allegation of sexual abuse.

Upon review of the policies, contracts with outside entities, the SANEs/SAFEs Uniform Evidence Protocol, and observations made during the facility tour, and upon completion of interviews conducted prior to and during the on-site visit, the Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

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

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* 

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations

Office of the Inspector General Investigator Training, Credentials

Investigative Case files (14) – Sexual abuse, sexual misconduct, and sexual harassment

Florida Department of Corrections Agency Website

Interviews conducted with:

Agency Head

**Investigative Staff** 

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states that any knowledge of, or receives information, written or verbal regarding sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the Office of the Inspector General. The notified authority will take immediate steps to evaluate the inmate's concern / allegation and will ensure proper medical treatment and mental health treatment are obtained. An investigation will be initiated in accordance with FDC Procedure 108.003, *Investigative Process* and FDC Procedure 108.015, *Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations*.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or harassment. The Agency Head explained how the Office of the Inspector General oversees and coordinates the process for all criminal investigations involving inmates or staff members and for allegations of sexual harassment committed by staff are addressed in an administrative investigation, which is also overseen by the Office of the Inspector

General. Any allegation of sexual harassment committed by an inmate is addressed as a disciplinary investigation at the facility level.

The Auditor also requested to the Agency Head to describe how an administrative or criminal investigation is completed for allegations of sexual harassment. The Agency Head explained that allegations of repeated sexual harassment by staff members on inmates would be handled with an administrative investigation. The process would entail interviewing the complainant/victim inmate, interview any witnesses, identify, and evaluate any evidence, and interview the subject staff member. The Agency Head explained once the process is completed a summary report is submitted to management for review of findings. Additionally, any sustained finding is then reviewed by the appropriate disciplinary authority to impose appropriate disciplinary action in consultation with the Legal Department. Allegations of inmate-on-inmate sexual harassment are addressed as a disciplinary investigation governed under the rules of prohibited conduct by the Office of Institutions.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations states the agency has designated Inspectors assigned to the Office of the Inspector General (OIG), whose activities are supervised and coordinated by the Inspector General for the purpose of conducting criminal and administrative investigations and who may engage in other activities as authorized by law.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations states the Office of the Inspector General shall, except pursuant to the terms of any valid protocol with any other law enforcement agency, be the primary investigative unit of all sexual battery and sexual misconduct allegations occurring on Department property.

During the on-site phase of the audit, the Auditor conducted an interview with an investigator assigned to the Office of the Inspector General who confirmed the responsibilities of an investigator, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Investigator confirmed attending and successfully completing the specialized training curriculum developed by The Moss Group, Inc.

The Investigator also confirmed agency policy requiring all allegations of sexual abuse or sexual harassment must be referred to the Office of the Inspector General and investigators have the legal authority to conduct administrative and criminal investigations pursuant to FSS 944.31. The investigator explained once the

investigation process has concluded with a case finding, the case must be submitted to the Office of the Inspector General for review and a final determination.

Florida Department of Corrections publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the agency website <a href="http://www.dc.state.fl.us/PREA/inde">http://www.dc.state.fl.us/PREA/inde</a> x.html

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment. The Auditor reviewed each administrative and criminal investigation thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the closed cases.

The Auditor found each case contained all the appropriate documentation, and determined that each incident was investigated promptly, thoroughly, and objectively by a qualified Inspector from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations. The Auditor noted each file contained documentation to include but not limited to the initial incident reports, MINS notification, SART notification, Medical and Mental Health forms, photos, SRI assessment screening, advocacy information, housing logs, confinement forms, witness statements, victim and alleged aggressor statements, investigative report, Office of the Inspector General Inquiry Report, notification of case disposition to inmate, and monitoring for retaliation forms. The Auditor noted each case file was well organized, extremely detailed, and contained all the required documentation.

Upon review of the policies, documentation, and case files previously discussed, and upon completion of the interviews conducted during the on-site visit, the Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.31 Employee training Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Procedure 602.018, Contraband, and Searches of Inmates Florida Department of Corrections Staff PREA Training Curriculum Florida Department of Corrections Marion C. I. Training Roster / Staff Signatures Interviews conducted with: Random sample of Staff On-site Review Observations: Personnel Training Records Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years. In addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners shall complete specialized training. The Auditor reviewed the general PREA training curriculum, which included the following:

- Agency's zero tolerance for sexual abuse and sexual harassment
- How employees fulfill their responsibilities under agency sexual abuse and sexual harassment, prevention, detection, reporting, and response policies and procedures.
- Inmates' rights to be free from sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.
- The right of inmates & staff to be free from retaliation for reporting sexual abuse, sexual battery, staff sexual misconduct, or harassment.
- Dynamics of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings.

- Common reactions of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings.
- How to detect and respond to signs of threatened & actual sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.
- How to avoid inappropriate relationships with inmates and offenders.
- Communicating effectively & professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates.
- How to comply with relevant laws related to mandatory reporting of sexual abuse.

Florida Department of Corrections Procedure 602.018, *Contraband, and Searches of Inmates* states clothed searches of inmates will be conducted at random by security staff during their daily routine. Clothed searches of female inmates by male staff will only be conducted during an emergency as determined by the Shift Supervisor. Clothed searches of transgender/intersex inmates by male staff will only be conducted during an emergency as deemed by the Shift Supervisor.

During the pre-on-site phase of the audit, the Auditor reviewed training curriculum and documentation of staff signatures verifying training comprehension and attendance. The training curriculum outlined the staff member's responsibilities in preventing, detecting, and response to inmate sexual abuse and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with inmates, understanding that inmates have the right to be free from sexual abuse and sexual harassment.

The Florida Department of Corrections PREA training curriculum provided to the Auditor, titled *PREA Lesson Plan Gender Specific*, includes an inmate's right to be free from sexual abuse and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce "opposite gender" correctional officers and supervision staff into an all-male or all-female housing unit and how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner consistent with security correctional environments. The training curriculum included discussions of the required PREA standards, instruction videos from the National PREA Resource Center, and group scenarios. During the on-site phase of the audit, the Auditor reviewed additional training records that also verified receipt of the required PREA training and included certificates for specialized training.

During the on-site phase of the audit, the Auditor conducted fourteen random staff

interviews. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmate right to be free from sexual abuse and sexual harassment. All staff members acknowledged receiving the training every year during his/her In-service training.

Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the files reviewed during the on-site visit, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### 115.32 Volunteer and contractor training

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

#### Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* 

Florida Department of Corrections Volunteer & Contractor Training Curriculum

Florida Department of Corrections Volunteer & Contractor Training Roster with Signatures

Interviews conducted with:

Volunteer or Contractor who have contact with Inmates

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the agency shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities in regard to this and related policies as it relates to the prevention, detection, and response to inmate sexual abuse allegations. Training shall be conducted via as it relates to the via the Staff Development and Training lesson plan *Prison Rape Elimination Act Training for Interns, Volunteers, and Contractors Read and Sign*, form NI1-127. This training shall be administered to all contractors and volunteers every three years. In addition, the PREA Brochure for Interns, Volunteers, and Contractors, form NI1-125 will be distributed annually to all contractors and volunteers.

During the pre-on-site phase, the Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training were tailored based on the services they provide and the level of contact they have with inmates and included the agency's zero-tolerance policy regarding sexual abuse and sexual harassment along with how to report such incidents.

During the on-site visit, the Auditor conducted interviews with volunteers and contract staff; each staff member confirmed and acknowledge understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities.

Upon review of the policy and documentation and after completion of interviews conducted during the on-site visit, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

| 115.33 | Inmate education  |
|--------|---|
|        | Auditor Overall Determination: Exceeds Standard   |
|        | Auditor Discussion  |
|        | Documents:  |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i>  |
|        | Florida Department of Corrections Procedure 601.210, Inmate Orientation   |
|        | Florida Department of Corrections Inmate Orientation Handbook (multiple languages)  |
|        | Florida Department of Corrections Acknowledgement of Receipt of PREA Orientation (FDC Form DC6-134C)  |
|        | PREA / Sexual Awareness Brochures (multiple languages)  |
|        | Interviews conducted with:  |
|        | PREA Compliance Manager   |
|        | Intake Staff  |
|        | Random Sample of Inmates  |
|        | Targeted Inmates (Limited English Proficient, Hearing or Vision Impaired, or Disabled)  |
|        |   |
|        | On-site Review Observations:  |
|        | Inmate files – Comprehensive PREA Education documentation   |
|        | PREA Informational Signage posted throughout facility   |
|        | PREA Informational video  |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff. This orientation will be conducted in accordance with FDC Procedure 601.210, <i>Inmate Orientation</i> . |
|        |   |

Florida Department of Corrections Procedure 601.210, *Inmate Orientation* states within 24 hours of arriving to a Florida Department of Corrections Institution, all inmates will receive an initial orientation to include PREA and the Departments zero tolerance policy. The PREA orientation shall include:

- Information on PREA and the Department's zero tolerance standard relating to sexual assault.
- Viewing the orientation video, PREA What You Need To Know.
- A realistic presentation how to avoid sexual violence while incarcerated.
- Information on how to prevent and reduce the risk of sexual violence.
- Explanation of appropriate methods of self-protection and intervention.
- Information on how to report sexual assault to staff, including the Office of Inspector General.
- · Information on available sexual assault counseling and treatment; and
- Instructions for the process for requesting sexual assault counseling and treatment.

Florida Department of Corrections Procedure 601.210, *Inmate Orientation* states upon completion of the orientation, each inmate will sign the form Acknowledgment of Receipt of Orientation on the Prison Rape Elimination Act (PREA) of 2003, form DC6-134C. The original form will be placed in the inmate's institutional file and receipt of the orientation will be reflected in the inmate record.

During the pre-on-site phase of the audit, the Auditor reviewed the comprehensive PREA educational video, provided in multiple languages, which is given to all FDC inmates within 24 hours of arriving to a permanent facility. The facility utilizes the PREA educational video titled *PREA: What You Need to Know* produced by Just Detention International and the PREA Resource Center. During the on-site phase of the audit, the Auditor also reviewed forty-four comprehensive documentation forms (FDC Form DC6-134C) with inmate signatures and acknowledgment of understanding. The facility maintains documentation of inmate participation with the original form placed in the inmate's institutional file and receipt of the orientation will be noted in the inmate (electronic) record.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in FDC Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDC translator list,

language line services.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and discussed the inmate comprehensive PREA orientation and documentation process. The PREA Compliance Manager provided specific details on the process of educating inmates including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process by using PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

During the on-site visit, the Auditor interviewed three targeted inmates with physical or cognitive disabilities, LEP, or hearing or vision impaired. All four inmates acknowledged receiving PREA information during the intake / transfer process. Each inmate described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins. These PREA bulletins are posted in multiple languages, located near the phones inside every dormitory, as well as several informational bulletins were posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display phone numbers and addresses for the victim advocate services and the Tips hotline and are displayed in multiple languages.

During the on-site phase of the audit, the Auditor conducted a tour of the Intake and Transfer section of the facility. During the tour, the Auditor inquired to Intake Staff how do they ensure current inmates, as well as those transferred from other facilities have been educated on the agency's zero-tolerance policy on sexual abuse or sexual harassment. The Intake Staff informed the Auditor that even if an inmate has already received the orientation in a previous incarnation, all inmates entering the facility receive the PREA comprehensive orientation upon arrival to the facility.

During the on-site phase of the audit, the Auditor conducted twenty-nine interviews with a random representation of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date inmate facility roster from every housing dormitory and selected a random representation from the inmate rosters provided.

Twenty-eight of the twenty-nine inmates interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. Twenty-eight of the twenty-nine inmates also acknowledged the zero-tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Inmates also referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. Twenty-one of the twenty-nine inmates interviewed referred to utilizing the hotline or staff member as the most direct method to report or inquire about PREA information. All twenty-nine inmates interviewed referred to calling a family member as their source outside the facility and all twenty-nine inmates interviewed confirmed knowledge of third-party reporting. Twenty-seven of the twenty-nine inmates interviewed were aware of the availability of submitting an anonymous PREA report.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site tour, Marion C. I. demonstrated facilitywide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

# 115.34 Specialized training: Investigations Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Specialized Training Curriculum & Training Certificates Interviews conducted with: **Investigative Staff** On-site Review Observations: Training files Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states in addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners who work regularly with inmates shall complete specialized training. Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states in addition to the general training provided to all employees pursuant to 23 CFR 115.31, the Department shall ensure that Inspectors have received training in conducting of such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral. Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states the Department shall maintain documentation that Inspectors have completed the required specialized

training in conducting sexual abuse investigations. Training documentation shall be maintained by the Bureau of Professional Development and Training.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National PREA Resource Center, *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an Inspector assigned to the Office of the Attorney General's office who confirmed attending and successful completion of the required specialized training curriculum from the National PREA Resource Center developed by The Moss Group, Inc., *Specialized Training: Investigating Sexual Abuse in Correctional Settings*.

The investigator clearly articulated the comprehensive training received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site visit, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.35 Specialized training: Medical and mental health care Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Health Services Bulletin #15.03.36 Sexual Battery Medical Action Florida Department of Corrections Medical & Mental Health Training Curriculum Florida Department of Corrections Training Certificates (Medical / Mental Health Staff) Interviews conducted with: Medical / Mental Health Staff On-site Review Observations: Medical Staff Training Records Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states all volunteers and contracted staff shall receive training on the Department's zero-tolerance standard for sexual abuse, sexual assault, sexual battery, sexual harassment, and staff sexual misconduct within institutional and community supervision environments. Florida Department of Corrections Health Services Bulletin #15.03.36 Sexual Battery Medical Action states all Medical and Mental Health Care Practitioners who work regularly in Florida Department of Corrections facilities, including contracted staff, will be trained in how to detect and assess signs of sexual abuse and sexual harassment. All Medical and Mental Health Care Practitioners will also be trained on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. All Medical and Mental Health Care Practitioners will also receive specialized training

on recognizing the special medical and mental health needs of all inmates and factors to consider in an inmates' risk of sexual victimization. The agency shall document training of all medical staff to denote employee understanding of material and verified through employee signature.

During the pre-on-site phase of the audit, the Auditor reviewed training records of all medical staff currently assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required elements of the department policy and of the PREA standard.

During the on-site phase, the Auditor conducted interviews with two Medical & Mental Health staff members and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. Each Medical and Mental Health staff member also confirmed receiving the Department's general PREA training, which included the zero tolerance to sexual abuse and sexual harassment.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted, in addition to the observations made during the on-site visit file review, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.41 Screening for risk of victimization and abusiveness Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Procedure 601.209, Reception Process - Initial Classification Florida Department of Corrections IBAS IRMS Assessments Interviews conducted with: Staff Responsible for Risk Screening Random sample of Inmates PREA Coordinator On-site Review Observations: Demonstration of Inmate Behavior Assessment Scale / Inmate Risk Management System Inmate records of initial assessment & reassessment Florida Department of Corrections Procedure 601.209, Reception Process - Initial Classification states during the reception process, all inmates will be subject to screening within 24 hours of arrival for potential mental and physical vulnerabilities that would jeopardize an inmate's safety. Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states each time an inmate arrives at an institution, Health Services Staff will screen the inmate upon arrival as soon as possible, and within 24 hours. The screening will assess the inmate's sexual orientation, to include whether the inmate identifies as LGBTI. The screening will also assess if the inmate has a mental, physical, or developmental disorder that requires particularized medical or mental health care.

Florida Department of Corrections Procedure 601.209, *Reception Process – Initial Classification* and Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states within 72 hours of intake, a Classification Officer will screen all inmates to determine if an inmate is at risk of future victimization of sexual abuse, sexual battery, or is at risk of committing sexual abuse or sexual battery. Characteristics such as the inmate's age, criminal record, and prior identified history of sexual victimization or predation will be utilized to make this determination.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states if an inmate is identified as a potential victim or abuser (perpetrator) housing, bed, and work assignments will be appropriately assigned based on known information and established protocol. Within 30 days from the initial intake screening, the institution will reassess the inmate's risk of victimization or abusiveness if additional information is received by the institution. Additionally, an inmate's risk level shall be reassessed when warranted due to a referral, request, and incident of sexual abuse or receipt of any additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions asked during the risk screening.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states if the results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

The Florida Department of Corrections utilizes the Offender Based Information System (OBIS), an electronic offender database system, to organize and store security, program, and other inmate information such as commitment, day-to-day activities, offenses, cases, movement between facilities, and other historical data. Within the OBIS, the Department utilizes the Inmate Risk Management System (IRMS) and Inmate Behavior Assessment Scale (IBAS) to determine an inmate's risk screening and needs assessment.

During the on-site phase of the audit, the Auditor reviewed the IBAS Factors & Score

Profile Comparison Report. The report provides a summary of each inmate's custody level, risk screening factors, and score, personal demographics (age, weight, and height), tentative release date, time in prison, housing assignment, and predator or aggression risk factors.

In accordance with Florida Department of Corrections Procedure 601.209, *Reception Process – Initial Classification* the inmate classification system is comprised of two primary operational components, the State Classification Office, and the Institutional Classification Team. The State Classification Office refers to the office or office staff at the central office level that is responsible for the review of inmate classification decisions. The Institutional Classification Team (ICT) refers to the team consisting of the Warden, Assistant Warden, Classification Supervisor, Chief of Security, and other members as necessary or when appointed. The ICT is responsible for making work, program, housing, and inmate status decisions at a facility and for making other classification recommendations to the State Classification Office.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification Supervisor regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The Classification Officer provided the Auditor with an overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor also demonstrated the interview process, by utilizing the Inmate Risk Management System (IRMS) and Inmate Behavior Assessment Scale (IBAS) to determine the inmate's risk screening and needs assessment. The Offender Based Information System auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the Inmate Risk Management System. The Inmate Behavior Assessment Scale is a series of questions, which include:

- · Sexual orientation and/or gender identity.
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life.
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life.
- If the inmate is familiar with the prison environment.
- Whether the inmate has been approached or pressured by other inmates for sexual favors.
- · Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses. At the conclusion of the interview process, a Sexual Risk Indicator score (SRI) is generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to medical and mental health staff. The program will automatically generate the next appointment (within 30 days) for each inmate.

The Auditor inquired to the Classification Officer what actions are taken against inmates who refuse to cooperate or answer the questions in the risk screening process. The Classification Officer responded that inmates are not required to provide answers, if an inmate refuses to answer, another staff member will conduct a follow-up interview. The Classification Officer confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process.

The Classification Officer confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Inmates are also assigned to a Classification Team (assignment is on a rotation basis) upon arrival to the facility. Inmates meet regularly with a team representative to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

During the on-site phase of the audit, the Auditor reviewed forty-four inmate records. These records were selected based upon the inmate sexual abuse investigations, inmates who reported sexual victimization during intake, length at facility, and inmates that disclosed sexual orientation as gay, bisexual, or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance with the facility's policy.

During the on-site visit, the Auditor requested an interview with three inmates who disclosed prior sexual victimization. All three inmates confirmed to the Auditor that each were offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process.

During the on-site visit, the Auditor conducted twenty-nine interviews with a random representation of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview* 

Guide for Inmates. The Auditor requested an up-to-date inmate roster from every housing unit and selected a random representation from the inmate rosters provided. Twenty-three of the twenty-nine inmates interviewed entered the facility twelve months or longer, therefore this interview question was not posed to them. Of the remaining six inmates interviewed, all six inmates recalled the initial risk assessment interview as well as the second risk assessment interview occurring with a member of the Classifications Team and within a few weeks after the initial assessment.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the facility shall implement appropriate controls on the dissemination within the facility of responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information that may be used for exploitation by staff or other inmates. During the on-site phase of the audit, the Auditor inquired to the Classification Officer how Marion C. I. protects such sensitive information. The Classification Officer stated the access to such information is strictly limited to Classification staff, Medical, and Mental Health and Facility Administration.

During the on-site phase of the audit, the Auditor inquired to the PREA Coordinator how the facility protects sensitive information, in particular an inmate's risk assessment. The PREA Coordinator explained how the risk assessments are maintained electronically and such information is limited to Classification staff, Medical, and Mental Health and Facility Administration.

Upon review of the policies, on-site file review, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.42 Use of screening information Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Florida Department of Corrections Housing Integrated Assessment & Placement Report Interviews conducted with: PREA Compliance Manager Staff Responsible for Risk Screening Transgender / Intersex Inmates PREA Coordinator Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states if an inmate is identified as a potential victim or abuser (perpetrator) housing, bed, and work assignments will be appropriately assigned based on known information and established protocol. Within 30 days from the initial intake screening, the institution will reassess the inmate's risk of victimization or abusiveness if additional information is received by the institution. Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states housing for transgender and intersex inmates will be determined on a case-by-case basis. The inmate's safety as well as the safety and the security of the institutional compound will be taken into consideration when making the housing determination.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states transgender and intersex inmates will be assessed biannually by Classification. An interview will be conducted as well as a review of their housing, program and work assignments to determine if there are any changes

or threats to the inmate's safety.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

During the on-site phase of the audit, the Auditor reviewed the IBAS Factors & Score Profile Comparison Report. The report provides a summary of each inmate's custody level, risk screening factors, and score, personal demographics (age, weight, and height), tentative release date, time in prison, housing assignment, and predator or aggression risk factors.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification Officer regarding the responsibility to conduct screenings for risk of victimization and abusiveness. The Classification Officer provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor explained how the facility utilizes the Inmate Risk Management System (IRMS) and Inmate Behavior Assessment Scale (IBAS) to determine the inmate's risk screening and needs assessment. The Offender Based Information System auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the Inmate Risk Management System. The Inmate Behavior Assessment Scale is a series of questions, which include:

- Sexual orientation and/or gender identity.
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life.
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life.
- If the inmate is familiar with the prison environment.
- Whether the inmate has been approached or pressured by other inmates for sexual favors.
- Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses.

At the conclusion of the interview process, a Sexual Risk Indicator score (SRI) is

generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to medical and mental health staff. The program will automatically generate the next appointment (within 30 days) for each inmate.

The Classification Officer explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each inmate, which is done strictly on a case-by-case basis. The Classification Officer further explained a transgender or intersex inmate's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the inmate or solely based on the inmate's classification level.

During the on-site visit phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager on how the facility uses information obtained from the risk screening assessment interview to keep inmates from being sexually victimized or being sexually abusive. The PREA Compliance Manager described the risk screening process and explained how depending upon the responses given by the inmate is used to assist in the initial classification and with determining the risk level of vulnerability. Inmates perceived to be vulnerable or predatory will be housed and given work / program assignments consistent with custody level and medical status. Inmates at a risk of high victimization are involuntarily segregated, only if an assessment of all other available alternatives has been made and it is determined that no other alternative means of separation from likely abusers exist.

The Auditor also inquired to the PREA Compliance Manager how the facility determines housing and program assignments for transgender or intersex inmates. The PREA Compliance Manager explained that housing for a transgender or intersex inmate is determined on a case-by-case basis. The inmate's safety as well as the safety and the security of the institutional compound will be taken into consideration when making the housing determination.

During the on-site visit, the Auditor requested an up-to-date inmate roster for gay, bisexual, transgender, and intersex inmates to conducted targeted inmate interviews. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted five separate interviews with inmates who identify as either

gay, bisexual, or transgender. All inmates were questioned whether they were placed in a housing area only for gay, bisexual, or transgender inmates. Each inmate acknowledged being housed in a general population housing area with inmates of the same level of classification. Each inmate explained the classification levels are based on criminal history.

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator and inquired how the agency ensures against placing lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities or wings. The PREA Coordinator informed the Auditor that agency policy prohibits such placement.

Upon review of the policies and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### 115.43 Protective Custody

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* 

Florida Administrative Code 33-602.220 Administrative Confinement

Interviews conducted with:

Facility Warden

Staff who supervise Inmates in Segregated Housing

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates at high risk of victimization will not be involuntarily segregated unless an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates perceived to be vulnerable would be housed and given work/program assignments consistent with custody level and medical status.

Florida Administrative Code 33-602.220, *Administrative Confinement* states if it is necessary to continue the inmate's confinement beyond this first extension, written authorization must be obtained from the State Classification Office for a 30-day extension. The State Classification Office shall have the authority to authorize one additional one additional 30-day extension. Examples of circumstances for placing an inmate in administrative confinement for this reason include:

- Pending an evaluation for placement in close management
- Special review against other inmates, disciplinary, program change or management transfer
- Pending an investigation into allegations that the inmate is in fear of a staff member

• Any other reason when the facts indicate that the inmate must be removed from the general inmate population for the safety of any inmate or group of inmates or for the security of the institution.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates at high risk of victimization. The Facility Warden explained the Inmate Behavior Assessment Scale (IBAS), which assists in determining risk factors, also helps in choosing appropriate and safe housing assignments for inmates identified as being at risk. Inmates who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible, and the inmate will be released from segregation as soon as it can be determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated those inmates placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs and education opportunities. The Facility Staff Member explained if an inmate has restrictions placed on him it would be a result of their behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.

During the auditing period the facility reported one inmate was held in involuntary segregated housing exceeding thirty days. During the pre-on-site phase of the audit, the Auditor reviewed documentation provided by the facility which included statement of basis for the involuntary segregation placement, special reviews completed by the facility, and documentation of approval for transfer to another FDC facility. During the on-site phase of the audit, the Auditor requested an interview with the inmate who was held in involuntary segregation housing. The facility provided documentation the inmate was transferred to another FDC facility, therefore, inmates in this targeted category were not interviewed.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are

consistent with policy and the requirements that complies with the PREA standard.

| 115.51 | Inmate reporting  |
|--------|---|
|        | Auditor Overall Determination: Meets Standard   |
|        | Auditor Discussion  |
|        | Documents:  |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i>  |
|        | Florida Department of Corrections Procedure 601.210, Inmate Orientation   |
|        | Florida Department of Corrections Employee Handbook   |
|        | Florida Department of Corrections contract with Gulf Coast Children's Advocacy<br>Center, Inc.  |
|        | Florida Department of Corrections Inmate Handbook (English/Spanish)   |
|        | Florida Department of Corrections Sexual Abuse Awareness Brochure (English/<br>Spanish)   |
|        | Florida Department of Corrections PREA Zero Tolerance Poster (English/Spanish)  |
|        |   |
|        | Interviews conducted with:  |
|        | PREA Compliance Manager   |
|        | Random sample of Staff  |
|        | Random sample of Inmates  |
|        |   |
|        | On-site Review Observations:  |
|        | PREA informational signage  |
|        | Victim Support Services Hotline   |
|        | TIPS Hotline  |
|        | Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> states each institution will ensure that the inmate orientation process shall advise inmates to report immediately any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment. The PREA orientation shall also include how to report incidents or suspicion of sexual abuse or sexual harassment. |

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. Staff shall utilize the resources outlined and in accordance with the Americans with Disabilities Act for Inmates, Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDC translator list and language line services.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates have multiple methods for reporting incidents of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. The methods inmates can report include:

- verbally to any staff member, volunteer, or contractor
- by calling the TIPS line
- calling an outside entity (Gulf Coast Children's Advocacy Center)
- file an Inmate Request
- file an informal or formal grievance
- have a family member or friend fill out the online Citizen's Complaint form
- write or email the Office of the Inspector General
- write or email the PREA Coordinator

During the on-site phase of the audit, the Auditor reviewed the contract between the Florida Department of Corrections and Gulf Coast Children's Advocacy Center, Inc.

In accordance with the contract between FDC and the Gulf Coast Children's Advocacy Center, the Advocacy Center provides inmates incarcerated at Marion C. I. with a 24/7 toll-free rape crisis reporting hotline staffed by certified victim advocates. The Gulf Coast Children's Advocacy Center is designated as the outside reporting hotline for inmates housed at Marion C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Gulf Coast Children's Advocacy Center. The victim advocate confirmed the Gulf Coast Children's Advocacy Center provides services to the inmates at Marion C. I., which include providing mailing addresses and phone numbers for inmate communication, emotional support services, and staffing of the rape crisis

hotline 24 hours a day, 7 days a week.

During the on-site phase of the audit, the Auditor requested an up-to-date inmate facility roster from every housing dormitory and selected a random representation from the inmate rosters provided. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-nine Inmate interviews and inquired to each, how they would report an incident of sexual abuse or sexual harassment if it happened to them or another inmate. Twenty-one of the twenty-nine inmates interviewed referred to utilizing the hotline or staff member as the most direct method to report or inquire about PREA information. All twenty-nine inmates interviewed referred to calling a family member as their source outside the facility and all twenty-nine inmates interviewed confirmed knowledge of third-party reporting. Twenty-seven of the twenty-nine inmates interviewed were aware of the availability of submitting an anonymous PREA report.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states all reports of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment received by a staff member shall be documented immediately and shall be investigated thoroughly and accordance to agency policy.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states Facility Staff may report sexual abuse and sexual harassment of inmates anonymously to the Inspector General TIPS line.

During the on-site phase of the audit, the Auditor-conducted interviews with fourteen random sample of staff and asked each staff member how an inmate can privately report sexual abuse and sexual harassment or retaliation by other inmates or staff for previously reporting sexual abuse and sexual harassment.

Each staff member interviewed was able to articulate the various methods an inmate may privately report an allegation of sexual abuse or sexual harassment (TIPS hotline, third party reporting, PREA hotline). Staff members also explained that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

The Auditor inquired to each staff member how he/she would report an allegation of sexual abuse or sexual harassment of inmates privately. Staff responses were evenly divided to either calling the Office of the Inspector General (TIPS hotline), Human Resources, or tell his/her immediate supervisor. Staff members expressed confidence in reporting either to the OIG or privately to his/her supervisor and no one reported fear of retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager to verify reporting methods for sexual abuse or sexual harassment allegations that are available for inmates and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for inmates and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the Gulf Coast Children's Advocacy Center is the designated outside entity for inmate reporting.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories, various work assignments, and while touring the program and educational building. The Auditor conducted informal interviews with inmates regarding the use of the PREA hotline and all confirmed it is accessible 24 hours a day, 7 days a week and is considered confidential. Throughout the facility tour, the Auditor conducted multiple test calls of the two hotlines available for inmates to reporting. The hotlines are secured, confidential lines and have designated speed dial numbers, \*8466 – Gulf Coast Children's Advocacy Center and \*8477 – TIPS Line (OIG). All phones tested during the on-site phase of the audit were found to be in working order.

Also, throughout the facility tour, the Auditor observed PREA informational signage posted in all housing dormitories, inmate educational and program building, in the Visitor Park, and inmate work areas (laundry, barbershop, etc.). The PREA informational signage was posted in multiple languages.

Upon review of the policies, contracts, employee handbook, FDC inmate handbook, and PREA informational brochures and signs and upon completion of interviews conducted, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### 115.52 Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

Documents:

Florida Administrative Code Rule 33-103.005, Informal Grievance

Florida Administrative Code Rule 33-103.006, Formal Grievance

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* 

Florida Department of Corrections Inmate Handbook

Interviews conducted with:

Inmates who reported a Sexual Abuse

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states inmates shall utilize the informal grievance process prior to initiating a formal grievance. Inmates may skip this step and initiate the process at the formal institutional level for issues pertaining to grievances regarding allegations of sexual abuse. Inmates filing grievances alleging sexual abuse shall not be instructed to file the grievances to the individual(s) who are the subject(s) of the complaint. Additionally, grievances of this nature shall not be referred to the subject(s) of the complaint.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states there is no time limit on when an inmate or a third party may initiate a grievance regarding allegations of sexual abuse.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states upon receipt of an emergency grievance the reviewing authority shall take the following action as soon as possible, but no later than two calendar days following receipt: review complaint and contact staff for additional information, if necessary, if an emergency is found to exist, initiate action to alleviate condition giving rise to the emergency, provide a formal response to the inmate within 15 calendar days. If an emergency is not found to exist, a response will be provided to the inmate indicating that the complaint is "not an emergency" with instructions to resubmit at the proper level, signed and dated by the responding employee and returned to the inmate within 72 hours of receipt.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Inmate Handbook and confirmed the handbook contains information about the grievance process to include explanation of the two types of grievance, informal and formal. The handbook informs inmates that additional and more detailed grievance information is covered during orientation or they may find the information in Rule 33-103, Florida Administrative Code.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states the Department shall claim an extension of time to respond, of up to 70 days, if the normal time-period for response is insufficient to make an appropriate decision due to the need for additional investigation. The inmate shall be notified in writing of the extension and a date by which a decision will be made.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states if an inmate or third party is filing a grievance involving sexual abuse, it shall be clearly stated in the first line of the grievance that it is a grievance related to sexual abuse. Also, on Form DC1-303, the third-party filer shall check the box next to Third Party Grievance Alleging Sexual Abuse. If this statement is not included in the grievance and if the third-party box is not checked, the grievance shall be responded to. This will not be a reason to return the grievance without action to the filer.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states when third parties initiate a sexual abuse grievance, the inmate will be notified by institutional staff. A staff member shall interview the inmate within two business days of receipt of the third-party grievance alleging sexual abuse. During this interview, the inmate shall elect to allow the grievance to proceed or request that the grievance be stopped by completing the top half of Form DC6-236, *Inmate Request*, stating he elects for the grievance to proceed or stopped. The institution shall document the inmate's desire to either allow or refuse the grievance to proceed under the response section of Form DC6-236. A copy of the request will be placed in the inmate's file.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states an inmate may file an emergency grievance if they believe they are subject to a substantial risk of imminent sexual abuse. When receiving an emergency grievance from an inmate expressing belief, they are subject to a substantial risk of imminent sexual abuse the institution must take immediate corrective action. Staff handling this grievance shall provide an immediate response within 48 hours and shall issue a final decision within five calendar days from the receipt of the grievance. The final decision will document the agency's determination whether the inmate is in substantial risk of imminent

sexual abuse and the action taken in response to the emergency grievance.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states when it is determined that an inmate has filed a PREA report in bad faith, i.e., knowingly filed a false report, that inmate shall be subject to discipline.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate if the facility notified him of the final decisions made regarding the allegation and if such notification was in writing. Two of the four inmates interviewed confirmed to the Auditor each were notified by staff of the case disposition. The Auditor verified the notifications while reviewing the investigative files and each inmate notification contained the date, case disposition, and inmate signature. The two other inmates interviewed denied reporting an allegation of sexual abuse.

Upon review of policies and of the Florida Department of Corrections Inmate Handbook, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.53 Inmate access to outside confidential support services Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections contract with Creative Services Inc. Florida Department of Corrections PREA Informational Poster (English / Spanish) Florida Department of Corrections Sexual Abuse Awareness Brochure (English / Spanish) Florida Department of Corrections Inmate Orientation Handbook (English / Spanish) Interviews conducted with: Random sample of Inmates Inmates who reported a Sexual Abuse On-site Review Observations: PREA informational signage Sexual Abuse Awareness Brochure Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. Additionally, the victim will be offered support services by means of means of a mailing address and/or telephone numbers to local community support groups. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states any inmate who alleges sexual abuse or sexual battery

will be advised of his/her right to crisis intervention services, forensic examination, and to have a victim advocate present during the forensic examination and/or the

investigative interviews.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Inmate Orientation Handbook. The FDC Inmate Handbook provides information regarding victim advocacy services for inmates and all information provided will be kept confidential, except information that requires mandatory reporting.

During the on-site phase of the audit, the Auditor reviewed the contract between the Florida Department of Corrections and Creative Services Inc. Creative Services Inc. (Ocala-Marion County Sexual Assault & Domestic Violence Center) provides inmates incarcerated at Marion C. I. with advocacy services for victims of sexual abuse or sexual violence.

Creative Services, Inc. (Ocala-Marion County Sexual Assault & Domestic Violence Center) is a non-profit organization located in Ocala Florida which provides victims of domestic abuse and sexual assault with crisis intervention, victim advocacy, and emotional support services. The Ocala-Marion County Sexual Assault & Domestic Violence Center also provides inmates incarcerated at Marion C. I. that are victims of sexual abuse with advocacy services, emotional support services, victim advocate upon request, accompaniment to forensic exams and investigatory interviews, follow-up services for sexual abuse victims, and providing mailing addresses and phone numbers of victim advocates.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate, and she confirmed the existing contract agreement with the facility. She provided a detailed description of the advocacy services provided to the inmates at Marion C. I. to include emotional support services, victim advocate upon request, follow-up services, and a mailing address and phone number for inmate communication with advocacy services.

During the on-site phase of the audit, the Auditor requested an up-to-date inmate facility roster from every housing dormitory and selected a random representation from the inmate rosters provided. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-nine interviews and inquired to each inmate if they

were informed of the services available outside of the facility for dealing with sexual abuse. Twenty-four of the twenty-nine inmates interviewed stated there are services available as they were explained to them during the comprehensive PREA orientation and referred to the informational bulletins posted in the dormitory and throughout the compound, which provides specific details. Twenty-four of the twenty-nine inmates interviewed acknowledged being provided mailing address and telephone numbers to victim advocacy services and that such call is toll-free.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories and in various work assignments, and while touring the programs, educational, and workshop buildings. Throughout the tour, the Auditor noted PREA informational posters and Sexual Abuse Awareness Brochures displayed in all of the above areas / buildings.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate, after reporting, did the facility allow them to contact anyone. One of the four inmates confirmed to the Auditor, after reporting the incident, he was able to meet with a contracted Medical and Mental Health staff member and that Medical, and Mental Health staff informed him of the additional services available from Ocala-Marion County Sexual Assault & Domestic Violence Center. One inmate informed the Auditor the incident he reported occurred two years prior, therefore, he declined needing the services of mental health or a victim advocate. The two remaining inmates interviewed by the Auditor denied reporting an allegation of sexual abuse.

Upon review of the policies and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

| 115.54 | Third-party reporting  |
|--------|--|
|        | Auditor Overall Determination: Meets Standard  |
|        | Auditor Discussion   |
|        | Documents:   |
|        | Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response   |
|        | Florida Department of Corrections Inmate Orientation Handbook (multiple languages)   |
|        | Florida Department of Corrections Website <a href="http://www.dc.state.fl.us/PREA/inde">http://www.dc.state.fl.us/PREA/inde</a> <a href="mailto:x.html">x.html</a>   |
|        | PREA Informational Poster (English / Spanish)  |
|        | Interviews conducted with:   |
|        | Random sample of Inmates   |
|        | On-site Review Observations:   |
|        | PREA informational signage   |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &amp; Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff. |
|        | Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, &amp; Response</i> states inmates may report incidents of sexual abuse, sexual battery, or staff misconduct by having a family member, friend, or other member of the public submit a third-party grievance.  |
|        | During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted. These PREA bulletins are posted in multiple languages, located near the phone's banks inside every dormitory, as well as several posted in common areas (educational and vocational buildings) throughout                        |

the compound. The bulletins display reporting instructions to include telling a family member or friend can file a third-party grievance via the agency's online complaint form on the agency website.

During the on-site phase of the audit, the Auditor requested an up-to-date inmate facility roster from every housing dormitory and selected a random representation from the inmate rosters provided. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*.

The Auditor conducted twenty-nine inmate interviews and twenty-eight out of twenty-nine inmates interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates also acknowledged the zero-tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

When questioned about third party reporting, all twenty-nine inmates interviewed acknowledged how to submit a third-party report (ask a family member or friend to submit a report or call the PREA hotline). In addition, several of the inmates referred to the PREA bulletins posted throughout the facility as it contains the directions on how to submit a third-party report.

During the pre-on-site phase of the audit, the Auditor visited the agency's website and confirmed the availability for the public to submit a report of sexual abuse or sexual harassment on behalf of an inmate. The report may also be submitted anonymously.

Upon review of the policies and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct

Interviews conducted with:

Random sample of Staff

Medical / Mental Health Staff

Facility Warden

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention*, *Detection*, & *Response* states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized.

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to:

- Taking all reports concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment seriously.
- Initiating immediate reporting of alleged sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment to the Office of the Inspector General.
- Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment.
- Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an

incident of sexual abuse, sexual harassment, or retaliation.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention*, *Detection*, & *Response* states staff will not reveal any information related to the sexual abuse or sexual harassment allegation to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct states whenever sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism occurs, the Emergency Action Center (EAC) shall be notified without unnecessary delay. The OIC or the Incident Commander shall ensure that any sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism is reported via Management Information Notes System (MINS) after notification to EAC.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct states the Office of the Inspector General shall, except pursuant to the terms of any valid Memorandum of Understanding (MOU) or protocol with any other law enforcement agency, be the primary investigative unit of all sexual battery and sexual misconduct allegations occurring on Department property.

During the on-site phase of the audit, the Auditor conducted interviews with a random representation of staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmate right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the on-site phase of the audit, the Auditor conducted interviews with two Medical and Mental Health Staff members regarding responsibilities to disclose to inmates the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Each Medical and Mental Health Staff member articulated in detail step-by-step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Staff member acknowledged disclosing the confidentiality limitation prior to the initiation of services with any inmate. The

Auditor inquired if any inmates had reported an incident of sexual abuse or harassment during the past 12 months and one of the Medical and Mental Health Staff members indicated they had received such reports and reported it immediately.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired how Marion C. I. responds when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone who is considered vulnerable adult under state law. The Facility Warden explained that Marion C. I. does not house inmates under the age of 18 nor inmates who are considered vulnerable adults.

The Auditor inquired to the Facility Warden are allegations of sexual abuse and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Warden indicated all allegations of sexual abuse and sexual harassment, no matter the origin of reporting, are reported directly to the Office of the Inspector General via the Management Information Note System (MINS).

Upon review of the policies and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.62 Agency protection duties Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Interviews conducted with: Agency Head Facility Warden Random sample of Staff Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized. Security / safety concerns will be immediately addressed by the Shift Supervisor, and s/he will take the necessary steps to ensure the security / safety of the inmate. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to: Taking all reports concerning sexual abuse, sexual battery, staff sexual

- misconduct, and sexual harassment seriously. Initiating immediate reporting of alleged sexual abuse, sexual battery, staff

sexual misconduct, and sexual harassment to the Office of the Inspector General.

- Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment.
- Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an incident of sexual abuse, sexual harassment, or retaliation.

During the on-site phase of the audit, the Auditor conducted interviews with fourteen random staff members and inquired about his/her actions if they received information that an inmate was in imminent risk of sexual abuse. Each staff member articulated the agency's response protocol to receiving such information and all staff members interviewed confirmed the priority is ensuring the safety of the inmate. Staff indicated that once the inmate who was at risk is secured, they would immediately notify their supervisor.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Facility Warden informed the Auditor that once a staff member receives information that an inmate may be at risk for sexual abuse or sexual harassment, that inmate is immediately removed from the area. The inmate victim's housing preference is considered, however the decision on his ultimate placement is driven by the need for protection from possible abuse and/or retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Agency Head stated if an inmate is at risk of imminent sexual abuse the first thing staff will be responsible for separating the victim from the potential abuser. The potential victim will be given the opportunity to speak with a staff member regarding the situation as well as Medical and Mental Health. If necessary, a housing change or facility transfer may be required for that inmate. The inmate may also request to be reviewed for placement in Protective Management (PM), which would require the inmate to be placed in Administrative Confinement until the PM investigation is complete.

Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.63 Reporting to other confinement facilities Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Interviews conducted with: Agency Head Facility Warden Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states if staff at a receiving institution receives information that sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment occurred at another institution, the receiving institutions Warden shall notify the sending institutions Warden within 72 hours of receiving the allegation. The notification shall be documented on a DC6-210. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states the receiving institution, where the allegation is reported will be responsible for contacting Emergency Action Center (EAC), completing a DC6-210, and entering the appropriate information into Management Information Notes System (MINS) for appropriate handling. In the twelve months prior to the audit, Marion C. I. reported one allegation of sexual abuse from another facility and one allegation was reported from an inmate at Marion C. I. alleging sexual abuse while confined at another facility. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an

allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the facility. The Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notifies the Office of the Inspector General, if necessary, and the Emergency Action Center. If the time of the alleged occurrence were recent, Marion C. I. would secure the crime scene until the

OIG could collect evidence. If the alleged perpetrator were still housed at Marion C. I., he would be placed in Administrative Confinement as a PREA perpetrator until Institutional Classification Team (ICT) could review the need to maintain him in confinement.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired if another agency or facility refers allegations of sexual abuse or sexual harassment that occurred within one of your facilities, is there a designated point of contact. The Agency Head explained that the point of contact for all Department related incidents is either the facility where the incident occurred or the Office of the Inspector General. Staff members receiving an allegation will in turn contact the Department's Emergency Action Center (EAC). If an outside agency advises that an inmate reported being sexually victimized at a prior Departmental facility, it is the receiving staff member's responsibility to notify the EAC of the incident. The EAC will provide that staff member with an incident number and a PREA case number. The PREA case number will be utilized to create a record of the incident in the Management Information Notes System (MINS). Once a record is created in MINS, the information is automatically routed to the Office of the Inspector General for review. The Warden at the facility were the inmate reported will also be responsible for notifying the Warden at the facility the incident occurred within 72 hours of receiving the allegation.

Upon review of the policy, documentation, and investigative files, and upon completion of the interviews conducted, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

### 115.64 Staff first responder duties

Auditor Overall Determination: Meets Standard

### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Department of Corrections Staff PREA Training Curriculum

Florida Department of Corrections Marion C. I. Training Roster / Staff Signatures

Interviews conducted with:

Security Staff / Non-Security Staff First Responders

Random sample of Staff

Inmates who reported a sexual abuse

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states upon learning of an inmate sexual abuse or sexual battery allegation or incident, the first security staff member to respond to the report shall be required to:

- Separate the alleged victim and abuser.
- Preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence.
- If the alleged abuse occurred within a time period that still allows for the
  collection of physical evidence, request that the alleged victim not take any
  actions that could destroy physical evidence, including but not limited to,
  washing, bathing, brushing teeth, changing clothes, urinating, defecating,
  drinking or eating.
- If the alleged abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to,

- washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating.
- If the first responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff.

During the on-site phase of the audit, the Auditor conducted random Staff interviews and three targeted interviews (Security Staff who act as First Responders) regarding his/her role as a First Responder to an allegation of sexual abuse. The Staff Members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health.

In addition, each Staff Member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder. Every Staff Member interviewed articulated in detail the responsibilities of a First Responder and the importance of his/her responsibility when responding to an incident of sexual abuse or sexual harassment.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate, after reporting the sexual abuse, how did the facility respond and what did staff do when they first arrived at the scene. Two of the four inmates confirmed to the Auditor, that staff responded appropriately and immediately, escorted him to medical for treatment and evaluation. The other two inmates interview denied reporting an allegation of sexual abuse.

Upon review of the policy, documentation, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.65 Coordinated response Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Marion C. I. PREA Coordinated Response Plan Interviews conducted with: Facility Warden Florida Department of Corrections Marion C. I. PREA Coordinated Response Plan outlines the facility's written plan to coordinate actions taken in response to an incident of sexual abuse. Any employee who has knowledge of or receives information, written or verbal (firsthand or third party) regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor or the Chief of Security, who will then take immediate steps to evaluate the inmate's concern/allegation. The authority notified will ensure proper medical treatment (if applicable) and the safety of the inmate by means provided in Rule 33-602.22, F.A.C., Administrative Confinement, if applicable. Upon learning of an allegation that an inmate was sexually abuse or sexually battered, the first security staff member to respond to the report shall be required to: 1. Separate the alleged victim and abuser. 2. Ensure all victims and other injured persons are provided appropriate First Aid & Emergency Medical Services, as appropriate. 3. Preserve & protect any crime scene until appropriate steps can be taken to collect any evidence. 4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions

5. If the First Responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff.

that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating.

6. Any inmate who alleges sexual battery shall be given a copy of Form N11-120

and advised of her/his right to access crisis intervention services, to have a forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interview if s/he chooses. This offer will be documented in an incident report.

The Shift Supervisor or the Chief of Security shall ensure that the inmate victim, and if applicable the inmate perpetrator, are escorted to medical. The Shift Supervisor or the Chief of Security will determine the timeline of the alleged incident. If the incident occurred more than forty-eight hours prior to the reporting of the incident, the Office of the Inspector General will be notified to determine if physical evidence exists for examination before activating the Sexual Abuse Response Team (SART).

The Shift Supervisor or the Chief of Security shall ensure that the names of all persons responding to the crime scene are recorded and provided to the responding Inspector. S/He shall also ensure that all inmates who witnessed any sexual battery or sexual misconduct are segregated, and their information is listed on an incident report (DC6-210).

The Shift Supervisor or the Chief of Security shall ensure:

- 1. Any weapon or evidence suspected of being involved in a sexual battery or sexual misconduct is preserved.
- 2. That a Chain of Custody form (DC1-801) is created and maintained.
- 3. The evidence is provided to the responding Inspector or other Law Enforcement personnel as soon as possible and with minimal handling to preserve any latent or forensic evidence.

The Shift Supervisor will ensure that a DC6-210 and a Management Information Notes System (MINS) report are processed and submitted. The Inspector shall respond to the scene and immediately contact the Shift Supervisor or the Chief of Security. S/He will conduct any necessary preliminary interviews of the victim, if applicable, and witnesses, as appropriate.

If the SART Team is activated the Shift Supervisor or the Chief of Security and/or the Inspector will ensure that no attempt is made by Medical Staff to clean or treat the inmate unless the injuries are such that not treating them would cause deterioration of the inmate's medical condition. Staff from the Office of the Inspector General will collect evidence as appropriate; the Panhandle Nurse Forensic Specialist's SART will collect the clothing the inmate was wearing at the time of the sexual battery if the inmate is still wearing them.

Following the forensic medical examination (or after the inmate is escorted to medical for those instances where SART Team is not activated), Medical Staff shall ensure that the Alleged Sexual Battery Protocol (DC4-683M) is completed. Medical Staff shall complete the Consent and Authorization for Use and Disclosure Inspection and Release of Confidential Information (DC4-711B) and have the inmate sign the form.

The victim and perpetrator (if known) will be tested for the below diseases and provided access to sexually transmitted infection prophylaxis. Repeat testing shall be done for all diseases that may have been transmitted at intervals of four week, three months, and one year.

- HIV
- Hepatitis B and C
- Gonorrhea
- Syphilis
- Chlamydia

Medical Staff shall ensure that the inmate victim(s) and/or inmate perpetrator(s) are referred for mental health services if appropriate. Mental Health Staff shall ensure that inmate victim(s) and/or perpetrator(s) receive the appropriate services.

During the pre-on-site phase of the audit, the Auditor reviewed the *Marion C. I. PREA Coordinated Response Plan*. The plan is very detailed, provides systematic instructions, and outlines the roles and responsibilities for all staff responding to an incident of sexual abuse.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to the implementation of the PREA Coordinated Response to Sexual Abuse. The Facility Warden provided a detailed description of the response plan and each staff member's responsibility when responding to an allegation of sexual abuse or sexual harassment.

Upon review of the policies and upon completion of the on-site interview with the Facility Warden, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.66

# Preservation of ability to protect inmates from contact with abusers

**Auditor Overall Determination:** Meets Standard

#### **Auditor Discussion**

#### Documents:

Agreement State of Florida and the Florida Police Benevolent Association, Security Services Bargaining Unit

Interviews conducted with:

Agency Head

Florida Department of Corrections has a collective bargaining agreement with the Florida Police Benevolent Association (PBA). The PBA is the representative for the purposes of collective bargaining with respect to wages, hours, and terms and conditions of employment for all employees included in the Security Services Bargaining Unit.

The Security Services Bargaining Unit includes all employees, non-professional, and professional, certified under Florida Statute Chapter 943, whose primary duties involve the direct care, custody, and control of persons confined in or supervised by the Department's Office of Community Corrections, Probation, and Parole Services.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding collective bargaining agreements the agency has entered into or renewed since August 20, 2012. The Agency Head confirmed to the Auditor, the Florida Department of Corrections has a collective bargaining agreement with the Police Benevolence Association (PBA) since December 2016, which represents Correctional Officer and Probation Officer staff. Prior to the PBA, the Department had an agreement with the Teamsters Local 2011.

Additionally, the Agency Head explained that the Department is authorized to dismiss or suspend a permanent status career service employee for any cause noted in Chapter 110.277 of the Florida Administrative Code. Such cause includes poor performance, negligence, insubordination, inefficiency, or inability to perform assigned duties, violation of law or agency rules, conduct unbecoming a public employee, misconduct, habitual drug use and any conviction of any crime.

The Agency Head also explained that the Department does not have permanent post assignments, nor does it allow posts to be "bid" out. Staff members are assigned to posts prior to the commencement of the shift by their shift supervisor. Staff members can be relocated to numerous posts, including posts that do not allow for contact with inmates. Because the Department is so large, staff and inmates may be relocated to alleviate any problems.

Upon review of the policies and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.67 Agency protection against retaliation Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Interviews conducted with: Designated Member Charged with Monitoring Retaliation Inmates who reported a Sexual Abuse Facility Warden Agency Head On-site Review Observations: Investigative Case files Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states inmates and/or staff who report sexual abuse will be monitored for retaliation for at least 90 days, with at least three contact status checks to occur within the 90-day monitoring period at the 30, 60, and 90-day marks from the date of the allegation. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states inmate conduct, including a review of disciplinary reports, treatment by other staff and inmates, and changes in housing, program

assignments, work assignments, and demeanor will be reviewed along with the period status checks. The facility shall respond appropriately to protect any other individual who cooperates with an investigation and expresses a fear of retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Staff Member designated with monitoring retaliation. The Staff Member acknowledged responsibility as the primary staff member designated with monitoring retaliation; however, there are other staff members and the PREA Compliance Manager who can monitor retaliation if either one of them were unavailable for an extended period.

The Staff Member articulated that in an effort to prevent retaliation against inmates and staff who report sexual abuse or harassment or those who cooperate with an investigation, the Staff Member would monitor those individuals for at least 90 days. The Staff Member reviews disciplinary reports, inmate housing or transfers, and negative performance reviews of staff members. If a concern that potential retaliation might occur beyond the 90 days, the Staff Member would continue to monitor conduct and treatment until the issue or threat is resolved.

During the on-site phase of the audit, the Auditor reviewed the fourteen investigative files. Each file contained forms showing the retaliation monitoring interviews that were conducted with inmates who previously alleged sexual abuse or sexual harassment. Each form provided a detailed explanation of the interview, statements from the inmate, and comments from the Staff Member. The monitoring interviews were conducted at 30-, 60-, and 90-day review dates.

Each file also contained a FDC Housing Preference Form which indicates the inmates housing preference selection after reporting an incident of sexual abuse. Inmates who report incidents of sexual abuse are offered the opportunity to select General Population housing assignment or can be placed into Protective Management pending the investigation; each form must be reviewed and signed by the inmate. The Housing Preference Form will then be forwarded to the Institution Classification Team (ICT) for final review and housing assignment.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate if he feels protected against possible revenge from staff or inmates for reporting an incident of sexual abuse. Two of the four inmates interviewed acknowledged feeling safe within the facility and if there was a need or concern, he would report to a staff member. The remaining two inmates denied reporting an allegation of sexual abuse.

During the twelve months prior to the audit, the facility reported no incidents of retaliation. During the on-site phase of the audit, the Auditor conducted multiple interviews with facility staff to include the Facility Warden, PREA Compliance Manager, Medical and Mental Health Staff and Classification Staff and inquired to each, specific to the twelve months prior to the audit, the number of incidents of retaliation reported. Each staff member interviewed confirmed having any knowledge of allegations of retaliation being alleged by inmates or staff. Therefore, inmates in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired on the different measures taken to protect inmates and staff from retaliation for reporting allegations of sexual abuse or sexual harassment. The Facility Warden confirmed the facility would take all necessary steps to protect any person who reports a sexual abuse / harassment incident from retaliation. The Facility Warden explained that housing changes or transfers of inmates, disciplinary action against staff members – including possible dismissal – or other means of removal of those who retaliate against someone who reports an allegation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency protects inmates or staff from retaliation for sexual abuse or sexual harassment allegations. The Agency Head explained that facilities deploy numerous measures including housing, program, and work assignments changes. If warranted, an inmate may be transferred to another Department facility in order to protect him from retaliation. All inmates who report sexual abuse are monitored for retaliation for at least 90 days. Staff members are required to monitor the inmate with periodic status checks every 30 days to ensure they are not experiencing any additional problems. Inmates are also provided information for the local rape crisis center for emotional support services.

The Agency Head also explained that staff members might be afforded the ability to change posts or facilities to protect them from retaliation. They are also monitored for retaliation for at least 90 days following a report of sexual abuse or sexual harassment.

The Auditor inquired to the Agency Head if an individual cooperates with an investigation expresses a fear of retaliation, what measures does the agency take to protect that individual against retaliation. The Agency Head explained the same process previously described is utilized. If the individual is an inmate, he may be afforded a housing change or transfer to another Department facility. That inmate will also be subject to the 90-day monitoring. If the individual is a staff member, they may be provided the opportunity to change posts or institutions and will be subject to the 90-day monitoring.

Upon review of the policy, investigative files, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.68 Post-allegation protective custody

**Auditor Overall Determination: Meets Standard** 

#### **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Department of Corrections Miscellaneous Log Report

Interviews conducted with:

Facility Warden

Staff who supervise inmates in Segregated Housing

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states inmates perceived to be vulnerable will be housed and given work/program assignments consistent with custody level and medical status. Inmates at high risk of victimization or who have alleged sexual abuse, will not be segregated involuntarily unless an assessment of all other available alternatives has been made and it is determined that there are not available alternative means of separation from likely abusers.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmate placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an inmate has restrictions placed on him it would be a result of their behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.

During the on-site phase of the audit, the Auditor reviewed fourteen investigative files, each file contained a FDC Housing Preference Form which indicates the inmates housing preference selection after reporting an incident of sexual abuse. Inmates who

report incidents of sexual abuse are offered the opportunity to select General Population housing assignment or can be placed into Protective Management pending the investigation; each form must be reviewed and signed by the inmate. The Housing Preference Form will then be forwarded to the Institution Classification Team (ICT) for final review and housing assignment. In the fourteen investigative case files reviewed by the Auditor, each file contained a completed (with inmate signature) Housing Preference Form. All forms indicated either the inmates request or refusal for placement into Protective Management during the investigative process. One of the fourteen allegations, indicated the inmate requested placement into protective housing pending the investigation, therefore providing further evidence that no inmates were assigned to involuntary segregated housing.

During the twelve months prior to the audit, the facility reported no incidents of retaliation. During the on-site phase of the audit, the Auditor conducted multiple interviews with facility staff to include the Facility Warden, PREA Compliance Manager, Medical and Mental Health Staff and Classification Staff and inquired to each, specific to the twelve months prior to the audit, the number of incidents of retaliation reported. Each staff member interviewed confirmed having any knowledge of allegations of retaliation being alleged by inmates or staff. Therefore, inmates in this targeted category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates who alleged sexual abuse. Inmates who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible, and the inmate will be released from segregation as soon as it can be determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.71 Criminal and administrative agency investigations Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response Investigative Case files (14) - Sexual abuse and sexual harassment Interviews conducted with: **Investigative Staff** On-site Review Observations: Training files Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, & Response states any knowledge suspicion or information regarding sexual abuse or sexual harassment shall be reported immediately. All allegations of sexual abuse or sexual harassment will be investigated promptly, thoroughly, and objectively including third party and anonymous reports. Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states Inspectors shall receive specialized training and shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for prosecution referral. Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations the department shall maintain documentation that Inspectors have completed the required specialized training in

conducting sexual abuse investigations. Training documentation shall be maintained

by the Bureau of Professional Development and Training.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a parallel administrative investigation.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations in all instances of investigating sexual battery, sexual misconduct, sexual abuse, or sexual harassment, the case Inspector shall not make a request of the victim to submit to a voice stress analysis or polygraph examination. Additionally, the creditability of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff member.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations the agency shall retain all administrative and criminal investigative reports, pursuant to a sexual battery investigation, as long as the alleged suspect is incarcerated, supervised, or employed by the agency plus five years.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National PREA Resource Center, *Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an investigator assigned to the Office of the Attorney General who confirmed his attendance and successful completion of the required specialized training curriculum from the National PREA Resource Center developed by The Moss Group, Inc., Specialized Training: Investigating Sexual Abuse in Correctional Settings.

The investigator clearly articulated the comprehensive training he had received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

The investigator also confirmed agency policy requiring all allegations of sexual abuse or sexual harassment must be referred to the Office of the Inspector General and Inspectors have the legal authority to conduct administrative and criminal investigations pursuant to FSS 944.31. The investigator explained once the investigation process has concluded with a case finding, the case must be submitted to the Office of the Inspector General for review and a final determination.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment. The Auditor reviewed each administrative and criminal investigation thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the thirteen closed cases.

The twelve sexual abuse allegations included seven inmate-on-inmate allegations with six investigations closed as unsubstantiated, and one investigation remains pending with the Office of Inspector General. The remaining five sexual abuse investigations were staff-on-inmate allegations with all five cases closed as unsubstantiated. The two sexual harassment allegations were both staff-on-inmate allegations with one investigation closed as unsubstantiated and one investigation closed as unfounded.

During the on-site phase, the Auditor reviewed all fourteen investigations. All cases were selected and reviewed based upon the outcome and the Auditor's requirement to review all the required steps and processes to verify compliance with multiple PREA Standards. Upon completion of reviewing all case files, the Auditor determined that the facility (to include but not limited to Investigators, Staff First Responders, Medical and Mental Health, PREA Compliance Manger, Supervisory Staff, etc.) followed the required steps and processes for all reported allegations. The Auditor's review included the one pending sexual abuse investigation and found it also met the above criteria, with the only exception of a final disposition from the OIG. At the time

of the Auditor's review, there were no cases referred for prosecution.

Each case reviewed by the Auditor, contained all documented reports for that specific incident, an inmate body chart, inmate notifications, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings. Additionally, each completed report included an assessment as to whether staff actions or a failure to act on the part of staff contributed to the abuse. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all the correct procedures, completed documentation, and that all processes were completed as required, to include the case disposition.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate, did the facility require them to submit to a polygraph test as a condition for proceeding with the investigation. Two of the four inmates informed the Auditor that no one required them to complete a polygraph test as a condition of proceeding with the investigation. The remaining two inmates denied reporting an allegation of sexual abuse.

Upon review of the policies, investigative case files, and documentation listed above, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.72 Evidentiary standard for administrative investigations Auditor Overall Determination: Meets Standard Auditor Discussion Documents:

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations

Interviews conducted with:

**Investigative Staff** 

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states during investigation into any PREA allegations, investigators shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a parallel administrative investigation.

During the on-site phase of the audit, the Auditor conducted an interview an Inspector assigned to the Office of the Inspector General. The investigator provided the Auditor with a complete overview of the investigative process to include verifying specialized training credentials. The investigator articulated the investigative process beginning with initial notification, investigation of the allegation, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity, and criteria required for administrative action and prosecution referrals. The Auditor inquired to the Inspector what standard of evidence is required to substantiate allegations of sexual abuse or sexual harassment. The investigator explained that the agency should impose no standard higher than a preponderance of the evidence.

Upon review of the policy and upon completion of the interview with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the

requirements that complies with the PREA standard.

# 115.73 Reporting to inmates Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections PREA Administrative Investigative Case Final **Notifications** Investigative Case files (14) - Sexual abuse and sexual harassment Interviews conducted with: **Investigative Staff** Facility Warden Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states at the conclusion of any sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism investigation, the investigator shall make appropriate notifications and follow-up notifications. Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states the case Inspector shall notice any PREA victim inmate if an allegation against a staff member for sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism (administrative or criminal) is exonerated, sustained, partially sustained, not sustained, unfounded, closed by arrest, exceptionally cleared or placed in open-active status.

Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations states the case Inspector or designee shall notice any victim inmate when the department learns the alleged abuser has been indicted on a charge related to sexual abuse or when the alleged abuser was convicted on a charge related to sexual abuse.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention*, *Detection*, & *Response* states unless the allegation is unfounded, following an inmate's allegation that a staff member has committed sexual abuse against him/her, the Warden, or designee, shall inform the inmate whenever the staff member is no longer assigned to the facility or no longer employed with the Department.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate if the facility notified him of the final decisions made regarding the allegation and if such notification was in writing. Two of the four inmates interviewed confirmed to the Auditor each were notified by staff of the case disposition. The Auditor verified the notification while reviewing the investigative files and the inmate notification contained the date, case disposition, and inmate signature. The remaining two inmates denied reporting an allegation of sexual abuse.

During the on-site phase of the audit, the Auditor reviewed fourteen investigative case files from the twelve months prior to the audit. Thirteen of the fourteen investigative case files were closed with a final disposition and contained an inmate notification form documenting the outcome of the case (substantiated, unsubstantiated, or unfounded) with the signature of the inmate documented on the notification.

During the on-site phase of the audit, the Auditor conducted an interview with the investigator and inquired about the agency's notification procedures, to an alleged victim of sexual abuse, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or unfounded. The investigator confirmed such notifications are completed by the case Inspector, who also allows the inmate (victim) to review the case file and both actions are documented.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an inmate who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that the Office of the Inspector General notifies the inmate of an outcome in all

investigations completed by the OIG. For inmate-on-inmate sexual harassment, Security Staff completes the notifications and obtains a signed DC6-2080 form to document the notification.

Upon review of the policies, investigative case files, and upon completion of the interviews with staff, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

## **Auditor Discussion**

Documents:

Florida Administrative Code Rule 33-208.003, Range of Disciplinary Actions

Florida Administrative Code Rule 60L-36.005, *Conduct of Employees- Disciplinary Standards* 

Florida Department of Corrections Procedure 208.039, *Employee Counseling & Discipline* 

Interviews conducted with:

Administrative (Human Resources) Staff

Florida Department of Corrections Procedure 208.039, *Employee Counseling & Discipline* states employees who fail to uphold the Department's policy on an antiharassment work environment to include sexual harassment, whether the employee committed, failed to report, or to have falsely reported any form of harassment in the workplace is subject to termination.

Florida Administrative Code Rule 60L-36.005, *Conduct of Employees- Disciplinary Standards* states employees shall abide by the law and applicable rules and policies and procedures, including those of the employing agency and the rules of the State Personnel System. All employees are subject to Part III of Chapter 112, Florida Statutes, and governing standard of conduct, which agencies shall make available to employees. An agency may determine that an employee has violated the law even if the violation has not resulted in arrest or conviction. Employees shall abide by both the criminal law, for example drug laws, and the civil law, for example, laws prohibiting sexual harassment and employment discrimination.

Florida Department of Corrections notifies the Criminal Justice Services Training Center through the Florida Department of Law Enforcement when criminal violations of sexual abuse or sexual harassment are committed by staff. Policy requires notifications to be made within 45 days after the violation.

The facility reported one staff violation of the agency's sexual assault, sexual abuse,

sexual harassment, or sexual misconduct polices during the 12 months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with Administrative / HR Staff Member who confirmed that Marion C. I. had one staff member resign prior to termination for violating the agency's policy against sexual assault, sexual abuse, sexual harassment, or sexual misconduct during the past twelve months.

Upon review of the policy, personnel files, and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

## **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Department of Corrections Procedure 205.002, Contract Management

Interviews conducted with:

Facility Warden

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states the institution shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities as it related policies via the Staff Development and Training lesson plan Prison Rape Elimination Act Training for Interns, Volunteers, and Contractors.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states contractors or volunteers that engage in sexual abuse, sexual battery, or sexual harassment and found guilty will be disciplined up to and including termination of contract and/or prohibition from working or volunteering for the Department.

Florida Department of Corrections Procedure 205.002, *Contract Management* states background check clearances for contract/subcontract staff prior to employment (FCIC/NCIC) and shall receive clearance prior to entering an institution or facility. Documentation may be maintained electronically or hard copy. All new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include language to ensure compliance with 28 C.F.R. Part 115. Any contractor failing to comply with the Department's PREA policies and procedures and/ or Federal Rule 28 C.F. R. Part 115 is termination for cause.

The facility reported there have been no contractor or volunteer violations or terminations of the agency's sexual assault, sexual abuse, sexual harassment or sexual misconduct polices during the 12 months prior to the audit.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding any violation of the facility's sexual assault, sexual abuse, sexual harassment, or sexual misconduct by a contractor or volunteer. The Facility Warden explained that the incident would be reported to the Office of the Inspector General, which would conduct an investigation. If the investigation shows the activity was criminal, then the incident will be reported to law enforcement. The Facility Warden also explained the incident would be reported to any relevant licensing entities and the contractor or volunteer would be prohibited from any further contact at Marion C. I. or any facility within our agency.

Upon review of the policy and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.78 Disciplinary sanctions for inmates

**Auditor Overall Determination: Meets Standard** 

## **Auditor Discussion**

Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Administrative Code Rule 33-601.301, Inmate Discipline

Florida Administrative Code Rule 33-601.800, Close Management

Florida Administrative Code Rule 33-601.314, Rules of Prohibited Conduct

Interviews conducted with:

Facility Warden

Medical / Mental Health Staff

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention*, *Detection*, & *Response* states inmate(s) who have been found guilty of sexual abuse, sexual battery, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with Disciplinary Confinement, Rule 33-602.222, F.A.C., unless otherwise ordered through judicial or administrative process.

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention*, *Detection*, & *Response* states all inmates who have been found guilty of sexual abuse, sexual battery, or sexual harassment will be referred for Close Management review and/or issued a Disciplinary Report. All Case Management and Disciplinary Report reviews will take into consideration whether the mental disabilities or mental illness contributed to the abuser or perpetrator's behavior.

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention*, *Detection*, & *Response* states when it is determined that an inmate has filed a PREA report in bad faith, knowingly filed a false report, that inmate shall be subject to discipline.

Florida Department of Corrections Inmate Handbook states there is no such thing as legal consensual sex in prison. Department of Corrections policy and law prohibit sexual behavior between inmates. Those who commit sexual assault/battery or sexual harassment face legal action. If necessary, the Department will seek outside criminal charges.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the facility's policy on disciplinary sanctions for an inmate after an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The Facility Warden referred to the existing policy that an inmate would be subject to disciplinary sanctions, which would be conducted in accordance with the formal disciplinary process.

During the on-site phase of the audit, the Auditor conducted an interview with two Medical and Mental Health Staff members and discussed the victim advocate services available to inmates and counseling services available for abusers. Each Medical and Mental Health Staff member explained the services provided at the facility and through the local county crisis center, include one-on-one counseling, and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

Upon review of the policy, Florida Department of Corrections Inmate Handbook, and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.81 Medical and mental health screenings; history of sexual abuse Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections Procedure 601.209, Reception Process - Initial Classification Florida Department of Corrections IBAS IRMS Assessments Interviews conducted with: Inmates who disclose Sexual Victimization at Risk Screening Staff responsible for Risk Screening On-site Review Observations: Demonstration of Inmate Behavior Assessment Scale / Inmate Risk Management System Inmate records of initial assessment & reassessment Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states if results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention,

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention*, *Detection*, & *Response* states any information relating to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary, to inform treatment plans and security and management decisions. This also includes housing, bed, work, education, and program assignments, or as otherwise required by Federal, state, or local law.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the facility shall implement appropriate controls on the dissemination within the facility of responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information that may be used for exploitation by staff or other inmates.

In accordance with Florida Department of Corrections Procedure 601.209, *Reception Process – Initial Classification* the inmate classification system is comprised of two primary operational components, the State Classification Office and the Institutional Classification Team. The State Classification Office refers to the office or office staff at the central office level that is responsible for the review of inmate classification decisions. The Institutional Classification Team (ICT) refers to the team consisting of the Warden, Assistant Warden, Classification Supervisor, Chief of Security, and other members as necessary or when appointed. The ICT is responsible for making work, program, housing, and inmate status decisions at a facility and for making other classification recommendations to the State Classification Office.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification Officer who is responsible for conducting screenings for risk of victimization and abusiveness. The Classification Officer provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor explained how the interview process utilizes the Inmate Risk Management System (IRMS) and Inmate Behavior Assessment Scale (IBAS) to determine the inmate's risk screening and needs assessment. The Offender Based Information System auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the Inmate Risk Management System. The Inmate Behavior Assessment Scale is a series of questions, which include:

- Sexual orientation and/or gender identity.
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life.
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life.
- If the inmate is familiar with the prison environment.
- Whether the inmate has been approached or pressured by other inmates for

sexual favors.

• Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses. At the conclusion of the interview process, a Sexual Risk Indicator score (SRI) is generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to Medical and Mental Health Staff, specifically when an inmate discloses prior sexual victimization or has perpetrated sexual abuse. In addition, automatic notifications to Medical and Mental Health Staff, the program will automatically generate the next appointment (within 30 days) for each inmate.

The Classification Officer confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process. The Auditor inquired to the Classification Officer how Marion C. I. protects such sensitive information. The Classification Officer stated the access to such information is strictly limited to Classification Staff, and Medical and Mental Health.

The Classification Officer confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Inmates are also assigned to a Classification Team (assignment is on a rotation basis) upon arrival to the facility. Inmates meet regularly with a team representative to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

During the on-site phase of the audit, the Auditor reviewed forty-four inmate records. These records were selected based upon the inmate sexual abuse investigations, length at facility, and inmates that disclosed sexual orientation as gay or bisexual. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance with the facility's policy.

During the on-site visit, the Auditor requested an interview with inmates who disclosed prior sexual victimization. The Auditor conducted targeted interviews with three inmates who disclosed prior sexual victimization. All three inmates confirmed to the Auditor that each were offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process.

Upon review of the policy, documentation, and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.82 Access to emergency medical and mental health services Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Interviews conducted with: Medical / Mental Health Staff Inmates who reported a Sexual Abuse Security Staff / Non-Security Staff First Responders On-site Review Observations: Secondary Medical Records Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention,

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention*, *Detection*, & *Response* states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.

During the on-site phase of the audit, the Auditor reviewed secondary medical records of inmates who reported an allegation of sexual abuse. These records include *Office of Health Services Alleged Sexual Battery Protocol* (multiple pages with body chart) and Mental Health Screening Evaluation. The forms have specific requirements to complete and/or make notations as to why the question or process was not completed. All protocols are completed by LPNs and must be reviewed and cosigned by an RN or Clinician.

During the on-site phase of the audit, the Auditor conducted interviews with two Medical and Mental Health Staff members at the facility. Each Medical and Mental Health Staff member confirmed that inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. The Medical and Mental Health Staff explained the services provided at the facility and through the local county crisis center and include one-on-one counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the on-site phase of the audit, the Auditor conducted interviews with fourteen random staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmate right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each

inmate, after reporting, did the facility allow them to contact anyone. One of the four inmates confirmed to the Auditor, after reporting the incident, he was able to meet with a contracted Medical and Mental Health staff member and that Medical, and Mental Health staff informed him of the additional services available from Ocala-Marion County Sexual Assault & Domestic Violence Center. One inmate informed the Auditor the incident he reported occurred two years prior, therefore, he declined needing the services of mental health or a victim advocate. The two remaining inmates interviewed by the Auditor denied reporting an allegation of sexual abuse.

Upon review of the policy, contract agreement, and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.83

# Ongoing medical and mental health care for sexual abuse victims and abusers

Auditor Overall Determination: Meets Standard

#### **Auditor Discussion**

#### Documents:

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* 

Florida Department of Corrections Health Services Bulletin 15.03.36, *Post Sexual Battery Medical Action* 

Interviews conducted with:

Medical / Mental Health Staff

Inmates who reported a Sexual Abuse

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states if an SRI assessment or medical assessment indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate shall be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

Florida Department of Corrections Procedure 602.053, *Prison Rape - Prevention, Detection, & Response* states medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.

Florida Department of Corrections Health Services Bulletin 15.03.36, *Post Sexual Battery Medical Action* states inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

During the on-site phase of the audit, the Auditor conducted an interview with two Medical and Mental Health Staff members at the facility. Each Medical and Mental Health Staff member confirmed that inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. Each Medical and Mental Health Staff member explained the services provided at the facility and through the local crisis center and include one-on-one counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the 12 months prior to the audit, Marion C. I. reported fourteen allegations of sexual abuse and sexual harassment; twelve of the fourteen allegations were sexual abuse, and two allegations were sexual harassment.

During the on-site phase of the audit, the Auditor conducted four targeted interviews with inmates who reported an incident of sexual abuse. The Auditor inquired to each inmate, after reporting the incident did you see a Medical or Mental Health staff member in a timely manner and did anyone provide treatment or follow-up plans. Two of the four inmates confirmed to the Auditor that immediately after reporting the incident he was seen by medical staff, had the opportunity to speak to the mental health staff member and was informed of the additional services available from the Ocala-Marion Sexual Assault & Domestic Violence Center. The remain two inmates denied reporting an incident of sexual abuse.

The Auditor also inquired to the two inmates if he was offered tests for sexually transmitted infections and if payment for any of the services provided were required. One of the two inmates confirmed he was provided testing for sexually transmitted infections and denied being charged for any medical treatment related to the incident. The second inmate indicated he reported an incident of sexual abuse two years after the incident occurred, therefore, he declined medical and mental health treatment.

Upon review of the policy and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

# 115.86 Sexual abuse incident reviews Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections Sexual Abuse Incident Review Report Interviews conducted with: Facility Warden **Incident Review Team** Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states the institution shall conduct a sexual abuse incident review within 30 days of the conclusion of the investigation by completing the Sexual Abuse Incident Review/Facility Investigation Summary DC6-2076. This review team shall consist of the Assistant Warden, Chief of Security, and Classification Supervisor. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states the review team will also obtain input via reports from line supervisors, investigators, and medical or mental health practitioners. The Sexual Abuse Incident Review Committee shall meet to assess the adequacy of staffing levels in the area where the incident happened, consider whether the incident/ allegation was motivated by race, ethnicity, LGBTI identification, gang affiliation, or other group dynamics at the institution. The committee shall also examine the area the incident allegedly occurred to assess whether physical barriers or obstructions in the area may have enabled abuse, assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and on a monthly basis, prepare a report with recommendations for improvements and submit to the PREA Coordinator.

During the pre-on-site phase of the audit, the Auditor reviewed *Sexual Abuse Incident Review/Facility Investigation Summary* provided by the facility. The reports contained

the required elements of the PREA standard to include:

- Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse.
- Consider whether the incident or allegation was motivated by race, ethnicity, gender identity; LGBTI identification, status, or perceived status or gang affiliation; or was motivated or otherwise caused by other group dynamics.
- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.
- Assess the adequacy of the staffing levels in that area during different shifts.
- Assess whether monitoring technology would be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its finding including, but not necessarily limited to, determinations made pursuant to the above considerations and any recommendations for improvement.

The review was completed in its entirety, within the required time limits, and signed by the Chief of Security, Facility Warden, and the PREA Compliance Manager (Assistant Warden of Programs).

During the on-site phase of the audit, the Auditor reviewed twelve sexual abuse investigations. The twelve sexual abuse investigations included eleven unsubstantiated allegations and one allegation that was pending a final disposition. The eleven sexual abuse investigations were completed with a final case disposition. During the Auditor's review of the closed investigations, a sexual abuse incident review was completed for each investigation and all sexual abuse incident reviews were completed within the required 30 days.

During the on-site phase of the audit, the Auditor conducted an interview with an Incident Review Team member and inquired if the Sexual Abuse Incident Review (SAIR) Team considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the SAIR Team examines the area in the facility were the incident allegedly occurred. The Incident Review Team member confirmed the SAIR Team does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. The SAIR Team also tours the area where the alleged incident occurred as well as consider if additional monitoring technology should be deployed or augmented to supplement supervision by staff. The Incident Review Team member explained how touring the area in conjunction with reviewing monitoring technology provides the team with the best possible representation of an incident and assists the SAIR Team in determining if changes or additions to monitoring technology is warranted.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the Sexual Abuse Incident Review (SAIR) process. The Facility Warden explained the SAIR Team includes the PREA Compliance Manager (Assistant Warden of Programs), Chief of Security, at least one Classification Supervisor, and the Facility Warden. The SAIR Team always seeks input from Inspectors, Line Staff, and Medical and Mental Health personnel. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained how the SAIR Team uses the information obtain from the review to determine if changes need to be made to the physical plant, surveillance systems, policy and procedure or any other change that would improve the safety of the inmate population and prevent sexual abuse.

Upon review of the policy and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.87 **Data collection** Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections Survey of Sexual Victimization Summary Reports to DOJ Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training. During the pre-on-site phase of the audit, the Auditor reviewed eight years of Survey of Sexual Violence Reports, six years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website <a href="http://www.dc.state.fl.us/">http://www.dc.state.fl.us/</a> PREA/inde x.html

Upon review of the policy, Annual Reports, and SSV Reports, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.88 Data review for corrective action Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Florida Department of Corrections 2021 Corrective Action Plan & Annual Report Interviews conducted with: PREA Compliance Manager PREA Coordinator Agency Head Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training. During the pre-on-site phase of the audit, the Auditor reviewed the last three years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/inde x.html

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the agency collects data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies. The PREA Compliance Manager confirmed the facility is responsible for compiling institution specific PREA data and

preparing the Annual Corrective Action Plan for Marion C. I.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response polices, practices, and training. The Agency Head explained that sexual abuse data is collected annually and utilized to complete the Survey of Sexual Victimization. The data is collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head confirmed, as the Secretary of the Department of Corrections, he is responsible for reviewing and approving the annual PREA report.

Upon review of the policy, Annual Reports, and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

## 115.89 Data storage, publication, and destruction Auditor Overall Determination: Meets Standard **Auditor Discussion** Documents: Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response Interviews conducted with: PREA Coordinator Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states no employee, volunteer, or contractor may knowingly disclose any information pursuant a sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to any person other except as permitted by law. The release of any information identifying any PREA or other sexual battery or sexual abuse victims in the custody of the Department shall not be printed, published, or broadcasted unless a court determines that such information is no longer confidential. Florida Department of Corrections Procedure 602.053, Prison Rape - Prevention, Detection, & Response states case or investigation records including any criminal or administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years. During the pre-on-site phase of the audit, the Auditor reviewed the last three years of Survey of Sexual Violence Reports, and the last three years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/inde x.html

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely

retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

Upon review of the policy and upon completion of staff interviews, Marion C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with the PREA standard.

| 115.401 | Frequency and scope of audits  |
|---------|--|
|         | Auditor Overall Determination: Meets Standard  |
|         | Auditor Discussion   |
|         | Florida Department of Corrections, Marion C. I. had its first PREA Audit conducted on November 14 - 15, 2016; the first year of the second three-year auditing cycle. The facility had its second PREA Audit conducted on December 11 - 13, 2019; the first year of the third three-year auditing cycle. This audit was the facility's third audit and was conducted on October 17 - 19, 2022; the first year of the fourth three-year auditing cycle. |
|         | The Auditor was provided access to and observed all areas of the facility and outside compound. The Auditor was permitted to request and receive copies of any relevant documents.   |
|         | The Auditor was permitted to conduct private interviews with inmates and staff. The Auditor verified the posting of the audit notifications including posting of the audit in all housing dormitories and common areas accessible and visible for inmates and staff. The Auditor verified through inmate and staff interviews that inmates and staff were permitted to send confidential correspondence to the Auditor in the same                     |

manner as if they were communicating with legal counsel.

| 115.403 | Audit contents and findings  |
|---------|--|
|         | Auditor Overall Determination: Meets Standard  |
|         | Auditor Discussion   |
|         | Florida Department of Corrections publishes PREA Audit Reports for all facilities within the FDC on the agency website. The reports are grouped according to the audit cycle year. Marion C. I. has published the prior PREA Audit Reports on the agency website. The Auditor reviewed the facility's prior PREA Audit Reports (November 2016; December 2019). |

| Appendix: Provision Findings |   |           |  |
|------------------------------|---|-----------|--|
| 115.11 (a)                   | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator  |           |  |
|                              | Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?  | yes       |  |
|                              | Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?   | yes       |  |
| 115.11 (b)                   | Zero tolerance of sexual abuse and sexual harassment; PREA coordinator  |           |  |
|                              | Has the agency employed or designated an agency-wide PREA Coordinator?  | yes       |  |
|                              | Is the PREA Coordinator position in the upper-level of the agency hierarchy?  | yes       |  |
|                              | Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?  | yes       |  |
| 115.11 (c)                   | Zero tolerance of sexual abuse and sexual harassmer coordinator   | nt; PREA  |  |
|                              | If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)   | yes       |  |
|                              | Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)   | yes       |  |
| 115.12 (a)                   | Contracting with other entities for the confinement o   | f inmates |  |
|                              | 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       |  |

| 115.12 (b) | Contracting with other entities for the confinement of inmates  |     |  |
|------------|---|-----|--|
|            | Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) | yes |  |

| 115.13 (a) | Supervision and monitoring  |     |
|------------|---|-----|
|            | Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)? | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?   | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?  | yes |
|            | In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?   | yes |
|            | In calculating adequate staffing levels and determining the need  | yes |

| 115.14 (a) | Youthful inmates  |     |
|------------|---|-----|
|            | 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).) | na  |
| 115.14 (b) | Youthful inmates  |     |
|            | 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).)   | 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).)  | na  |
| 115.14 (c) | Youthful inmates  |     |
|            | 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).)   | 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).)  | 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).)  | na  |
| 115.15 (a) | Limits to cross-gender viewing and searches   |     |
|            | Does the facility always refrain from conducting any cross-gender<br>strip or cross-gender visual body cavity searches, except in<br>exigent circumstances or by medical practitioners?   | yes |

| 115.15 (b) | Limits to cross-gender viewing and searches   |     |  |
|------------|---|-----|--|
|            | Does the facility always refrain from conducting cross-gender pat-<br>down searches of female inmates, except in exigent<br>circumstances? (N/A if the facility does not have female inmates.)  | 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 if the facility does not have female inmates.)  | na  |  |
| 115.15 (c) | Limits to cross-gender viewing and searches   |     |  |
|            | Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  | yes |  |
|            | Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?   | na  |  |
| 115.15 (d) | Limits to cross-gender viewing and searches   |     |  |
|            | Does the facility have policies 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 |  |
|            | Does the facility have procedures 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 |  |
|            | Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?   | yes |  |
| 115.15 (e) | Limits to cross-gender viewing and searches   |     |  |
|            | 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 |  |
|            | 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 |  |

| 115.15 (f) | Limits to cross-gender viewing and searches   |     |
|------------|---|-----|
|            | 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 |
|            | 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 |

| 115.16 (a) | Inmates with disabilities and inmates who are limited English proficient   |     |
|------------|--|-----|
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?  | yes |
|            | Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?   | yes |
|            | Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication   | yes |

|            | with inmates with disabilities including inmates who: Have intellectual disabilities?   |           |
|------------|---|-----------|
|            | 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       |
|            | 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       |
| 115.16 (b) | Inmates with disabilities and inmates who are limited proficient  | l English |
|            | 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       |
|            | Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?  | yes       |
| 115.16 (c) | Inmates with disabilities and inmates who are limited proficient  | l English |
|            | 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       |

| 115.17 (a) | Hiring and promotion decisions  |     |
|------------|---|-----|
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?   | yes |
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?            | yes |
|            | Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?   | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?  | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? | yes |
|            | Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?  | yes |
| 115.17 (b) | Hiring and promotion decisions  |     |
|            | Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?   | yes |
|            | Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?  | yes |

| 115.17 (c) | Hiring and promotion decisions   |     |
|------------|--|-----|
|            | Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?  | yes |
|            | Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? | yes |
| 115.17 (d) | Hiring and promotion decisions   |     |
|            | Does the agency perform a criminal background records check<br>before enlisting the services of any contractor who may have<br>contact with inmates?   | yes |
| 115.17 (e) | Hiring and promotion decisions   |     |
|            | Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?   | yes |
| 115.17 (f) | Hiring and promotion decisions   |     |
|            | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?   | yes |
|            | Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?  | yes |
|            | Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?   | yes |
| 115.17 (g) | Hiring and promotion decisions   |     |
|            | Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?  | yes |

| 115.17 (h) | Hiring and promotion decisions  |     |
|------------|---|-----|
|            | Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)  | yes |
| 115.18 (a) | Upgrades to facilities and technologies   |     |
|            | If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect 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.) | na  |
| 115.18 (b) | Upgrades to facilities and technologies   |     |
|            | If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect 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 |
| 115.21 (a) | Evidence protocol and forensic medical examinations   |     |
|            | If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)   | yes |

| 115.21 (b) | b) Evidence protocol and forensic medical examinations  |     |  |
|------------|---|-----|--|
|            | 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 |  |
|            | Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/ Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) | yes |  |
| 115.21 (c) | Evidence protocol and forensic medical examinations   |     |  |
|            | 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 |  |
|            | Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?  | yes |  |
|            | If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?  | yes |  |
|            | Has the agency documented its efforts to provide SAFEs or SANEs?  | yes |  |
| 115.21 (d) | Evidence protocol and forensic medical examinations   |     |  |
|            | Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?  | yes |  |
|            | If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)   | yes |  |
|            | Has the agency documented its efforts to secure services from rape crisis centers?  | yes |  |

| 115.21 (e) | Evidence protocol and forensic medical examinations   |        |  |
|------------|---|--------|--|
|            | As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?   | yes    |  |
|            | As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?  | yes    |  |
| 115.21 (f) | Evidence protocol and forensic medical examinations   |        |  |
|            | If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency 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    |  |
| 115.21 (h) | Evidence protocol and forensic medical examinations   |        |  |
|            | If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.) | yes    |  |
| 115.22 (a) | Policies to ensure referrals of allegations for investig  | ations |  |
|            | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?  | yes    |  |
|            | Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?   | yes    |  |
| 115.22 (b) | Policies to ensure referrals of allegations for investig  | ations |  |
|            | 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    |  |
|            | Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?   | yes    |  |
|            | Does the agency document all such referrals?  | yes    |  |

| 115.22 (c) | Policies to ensure referrals of allegations for investigations   |     |
|------------|--|-----|
|            | If a separate entity is responsible for conducting criminal investigations, does the policy 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 |
| 115.31 (a) | Employee training  |     |
|            | Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?   | yes |
|            | 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 |
|            | 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 |
|            | 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 |
|            | Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?  | yes |
|            | Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?   | yes |
|            | 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 |
|            | Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?  | yes |
|            | 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 |
|            | 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 |

| 115.31 (b) | Employee training   |     |
|------------|---|-----|
|            | Is such training tailored to the gender of the inmates at the employee's facility?  | yes |
|            | 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 |
| 115.31 (c) | Employee training   |     |
|            | Have all current employees who may have contact with inmates received such training?  | yes |
|            | Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?  | yes |
|            | In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?  | yes |
| 115.31 (d) | Employee training   |     |
|            | Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?   | yes |
| 115.32 (a) | Volunteer and contractor training   |     |
|            | 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 |
| 115.32 (b) | Volunteer and contractor training   |     |
|            | 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 |
| 115.32 (c) | Volunteer and contractor training   |     |
|            | Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?   | yes |

| 115.33 (a) | Inmate education   |     |
|------------|--|-----|
|            | During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?  | yes |
|            | During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?   | yes |
| 115.33 (b) | Inmate education   |     |
|            | 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 |
|            | 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 |
|            | 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 |
| 115.33 (c) | Inmate education   |     |
|            | Have all inmates received the comprehensive education referenced in 115.33(b)?   | yes |
|            | 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 |
| 115.33 (d) | Inmate education   |     |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?  | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?  | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?   | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?  | yes |
|            | Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?   | yes |

| 115.33 (e) | Inmate education  |     |
|------------|---|-----|
|            | Does the agency maintain documentation of inmate participation in these education sessions?   | yes |
| 115.33 (f) | Inmate education  |     |
|            | In addition to providing such education, does the agency ensure<br>that key information is continuously and readily available or visible<br>to inmates through posters, inmate handbooks, or other written<br>formats?  | yes |
| 115.34 (a) | Specialized training: Investigations  |     |
|            | 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 receive 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 |
| 115.34 (b) | Specialized training: Investigations  |     |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |

| 115.34 (c) | Specialized training: Investigations  |     |
|------------|---|-----|
|            | Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)  | yes |
| 115.35 (a) | Specialized training: Medical and mental health care  |     |
|            | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)                           | yes |
|            | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)  | yes |
|            | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
|            | Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)      | yes |
| 115.35 (b) | Specialized training: Medical and mental health care  |     |
|            | If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)  | na  |

| 115.35 (c) | Specialized training: Medical and mental health care   |     |
|------------|--|-----|
|            | Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.) | yes |
| 115.35 (d) | Specialized training: Medical and mental health care   |     |
|            | Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)   | yes |
|            | Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)  | yes |
| 115.41 (a) | Screening for risk of victimization and abusiveness  |     |
|            | 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 |
|            | 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 |
| 115.41 (b) | Screening for risk of victimization and abusiveness  |     |
|            | Do intake screenings ordinarily take place within 72 hours of arrival at the facility?   | yes |
| 115.41 (c) | Screening for risk of victimization and abusiveness  |     |
|            | Are all PREA screening assessments conducted using an objective screening instrument?  | yes |

| 115.41 (d) | Screening for risk of victimization and abusiveness   |     |
|------------|---|-----|
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 nonconforming or otherwise may be perceived to be LGBTI)? | yes |
|            | 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 |
|            | 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 |
|            | 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 |

| 115.41 (e) | Screening for risk of victimization and abusiveness   |     |
|------------|---|-----|
|            | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?   | yes |
|            | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?   | yes |
|            | In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?  | yes |
| 115.41 (f) | Screening for risk of victimization and abusiveness   |     |
|            | 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 |
| 115.41 (g) | Screening for risk of victimization and abusiveness   |     |
|            | Does the facility reassess an inmate's risk level when warranted due to a referral?   | yes |
|            | Does the facility reassess an inmate's risk level when warranted due to a request?  | yes |
|            | Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?  | yes |
|            | Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?   | yes |
| 115.41 (h) | Screening for risk of victimization and abusiveness   |     |
|            | 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 |
| 115.41 (i) | Screening for risk of victimization and abusiveness   |     |
|            | 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 |

| 115.42 (a) | Use of screening information   |     |
|------------|--|-----|
|            | 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 |
|            | 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 |
|            | Does the agency use information from the risk screening required<br>by § 115.41, with the goal of keeping separate those inmates at<br>high risk of being sexually victimized from those at high risk of<br>being sexually abusive, to inform: Work Assignments?   | yes |
|            | 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 |
|            | Does the agency use information from the risk screening required<br>by § 115.41, with the goal of keeping separate those inmates at<br>high risk of being sexually victimized from those at high risk of<br>being sexually abusive, to inform: Program Assignments?  | yes |
| 115.42 (b) | Use of screening information   |     |
|            | Does the agency make individualized determinations about how to ensure the safety of each inmate?  | yes |
| 115.42 (c) | Use of screening information   |     |
|            | 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 |
|            | 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 |

| 115.42 (d) | Use of screening information   |     |
|------------|--|-----|
|            | 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 |
| 115.42 (e) | Use of screening information   |     |
|            | 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 |
| 115.42 (f) | Use of screening information   |     |
|            | Are transgender and intersex inmates given the opportunity to shower separately from other inmates?  | yes |
| 115.42 (g) | Use of screening information   |     |
|            | 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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.) | yes |
|            | 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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)                | yes |
|            | 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: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)                   | yes |

| 115.43 (a) | Protective Custody  |     |
|------------|---|-----|
|            | 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 |
|            | If a facility cannot conduct such an assessment immediately, does<br>the facility hold the inmate in involuntary segregated housing for<br>less than 24 hours while completing the assessment?  | yes |
| 115.43 (b) | Protective Custody  |     |
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
|            | If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)                                      | yes |
|            | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |
|            | If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)  | yes |

| 115.43 (c) | Protective Custody  |     |
|------------|---|-----|
|            | 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 |
|            | Does such an assignment not ordinarily exceed a period of 30 days?  | yes |
| 115.43 (d) | Protective Custody  |     |
|            | 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 |
|            | 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 |
| 115.43 (e) | Protective Custody  |     |
|            | 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 |
| 115.51 (a) | Inmate reporting  |     |
|            | Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?   | yes |
|            | 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 |
|            | 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 |

| 115.51 (b) | Inmate reporting  |     |  |
|------------|---|-----|--|
|            | 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 |  |
|            | Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?  | yes |  |
|            | Does that private entity or office allow the inmate to remain anonymous upon request?   | yes |  |
|            | 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? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)   | na  |  |
| 115.51 (c) | Inmate reporting  |     |  |
|            | Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?   | yes |  |
|            | Does staff promptly document any verbal reports of sexual abuse and sexual harassment?  | yes |  |
| 115.51 (d) | Inmate reporting  |     |  |
|            | Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?   | yes |  |
| 115.52 (a) | Exhaustion of administrative remedies   |     |  |
|            | Is the agency exempt from this standard?  NOTE: The agency is exempt ONLY if it does not have administrative procedures to address 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 |  |

| 115.52 (b) | Exhaustion of administrative remedies   |     |
|------------|---|-----|
|            | 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 |
|            | 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 |
| 115.52 (c) | Exhaustion of administrative remedies   |     |
|            | 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 |
|            | Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)  | yes |
| 115.52 (d) | Exhaustion of administrative remedies   |     |
|            | Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)                            | yes |
|            | 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 |
|            | 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 |

| 115.52 (e) | Exhaustion of administrative remedies  |     |
|------------|--|-----|
|            | 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 |
|            | 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 |
|            | If the inmate declines to have the request processed on his or her<br>behalf, does the agency document the inmate's decision? (N/A if<br>agency is exempt from this standard.)   | yes |

| 115.52 (f) | Exhaustion of administrative remedies   |     |
|------------|---|-----|
|            | 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 |
|            | 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 |
|            | After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)  | yes |
|            | After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)   | yes |
|            | Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)   | yes |
|            | Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)   | yes |
|            | Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)  | yes |
| 115.52 (g) | Exhaustion of administrative remedies   |     |
|            | 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 |

| 115.53 (a) | Inmate access to outside confidential support service   | es  |
|------------|---|-----|
|            | 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 |
|            | 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? (N/A if the facility never has persons detained solely for civil immigration purposes.) | na  |
|            | Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?  | yes |
| 115.53 (b) | Inmate access to outside confidential support services  |     |
|            | Does the facility inform inmates, prior to giving them access, of<br>the extent to which such communications will be monitored and<br>the extent to which reports of abuse will be forwarded to<br>authorities in accordance with mandatory reporting laws?   | yes |
| 115.53 (c) | Inmate access to outside confidential support service   | :S  |
|            | 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 |
|            | Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?  | yes |
| 115.54 (a) | Third-party reporting   |     |
|            | Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?   | yes |
|            | Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?   | yes |

| 115.61 (a) | Staff and agency reporting duties  |     |
|------------|--|-----|
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?   | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?  | yes |
|            | Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?                         | yes |
| 115.61 (b) | Staff and agency reporting duties  |     |
|            | 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 |
| 115.61 (c) | Staff and agency reporting duties  |     |
|            | 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 |
|            | 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 |
| 115.61 (d) | Staff and agency reporting duties  |     |
|            | 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 |
| 115.61 (e) | Staff and agency reporting duties  |     |
|            | Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?   | yes |

| 115.62 (a) | Agency protection duties   |     |
|------------|--|-----|
|            | 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 |
| 115.63 (a) | Reporting to other confinement facilities  |     |
|            | 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 |
| 115.63 (b) | Reporting to other confinement facilities  |     |
|            | Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?  | yes |
| 115.63 (c) | Reporting to other confinement facilities  |     |
|            | Does the agency document that it has provided such notification?   | yes |
| 115.63 (d) | Reporting to other confinement facilities  |     |
|            | Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?   | yes |

| 115.64 (a) | Staff first responder duties  |     |
|------------|---|-----|
|            | 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 |
|            | 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 |
|            | 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 |
|            | 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 |
| 115.64 (b) | Staff first responder duties  |     |
|            | If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?  | yes |
| 115.65 (a) | Coordinated response  |     |
|            | Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?   | yes |

| 115.66 (a) | Preservation of ability to protect inmates from contact with abusers  |     |
|------------|---|-----|
|            | Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? | yes |
| 115.67 (a) | Agency protection against retaliation   |     |
|            | 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 |
|            | Has the agency designated which staff members or departments are charged with monitoring retaliation?   | yes |
| 115.67 (b) | Agency protection against retaliation   |     |
|            | 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 |

| 115.67 (c) | Agency protection against retaliation   |     |
|------------|---|-----|
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?          | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of 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 |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?   | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?   | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?  | yes |
|            | Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?   | yes |
|            | Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?  | yes |

| 115.67 (d) | Agency protection against retaliation  |     |
|------------|--|-----|
|            | In the case of inmates, does such monitoring also include periodic status checks?  | yes |
| 115.67 (e) | Agency protection against retaliation  |     |
|            | If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?  | yes |
| 115.68 (a) | Post-allegation protective custody   |     |
|            | 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 |
| 115.71 (a) | Criminal and administrative agency investigations  |     |
|            | When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) | yes |
|            | 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 |
| 115.71 (b) | Criminal and administrative agency investigations  |     |
|            | Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?  | yes |
| 115.71 (c) | Criminal and administrative agency investigations  |     |
|            | Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?   | yes |
|            | Do investigators interview alleged victims, suspected perpetrators, and witnesses?   | yes |
|            | Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?  | yes |

| 115.71 (d) | Criminal and administrative agency investigations  |     |
|------------|--|-----|
|            | When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? | yes |
| 115.71 (e) | Criminal and administrative agency investigations  |     |
|            | Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?   | yes |
|            | 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 |
| 115.71 (f) | Criminal and administrative agency investigations  |     |
|            | Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?   | yes |
|            | Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?                    | yes |
| 115.71 (g) | Criminal and administrative agency investigations  |     |
|            | Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?                               | yes |
| 115.71 (h) | Criminal and administrative agency investigations  |     |
|            | Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?   | yes |
| 115.71 (i) | Criminal and administrative agency investigations  |     |
|            | 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 |

| 115.71 (j) | Criminal and administrative agency investigations   |     |
|------------|---|-----|
|            | Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?  | yes |
| 115.71 (I) | Criminal and administrative agency investigations   |     |
|            | When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)                                    | na  |
| 115.72 (a) | Evidentiary standard for administrative investigations  |     |
|            | Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?  | yes |
| 115.73 (a) | Reporting to inmates  |     |
|            | Following an investigation into an inmate's allegation that he or<br>she suffered sexual abuse in an agency facility, does the agency<br>inform the inmate as to whether the allegation has been<br>determined to be substantiated, unsubstantiated, or unfounded?  | yes |
| 115.73 (b) | Reporting to inmates  |     |
|            | 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.) | na  |

| Reporting to inmates   |   |
|--|---|
| Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  | yes   |
| Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?   | yes   |
| Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?      | yes   |
| Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? | yes   |
| Reporting to inmates   |   |
| 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   |
| 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   |
| Reporting to inmates   |   |
| Does the agency document all such notifications or attempted notifications?  | yes   |
|  | Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?  Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?  Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?  Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?  Reporting to inmates  Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?  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? |

| 115.76 (a) | Disciplinary sanctions for staff  |     |
|------------|---|-----|
|            | Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?  | yes |
| 115.76 (b) | Disciplinary sanctions for staff  |     |
|            | Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?  | yes |
| 115.76 (c) | Disciplinary sanctions for staff  |     |
|            | Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? | yes |
| 115.76 (d) | Disciplinary sanctions for staff  |     |
|            | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?  | yes |
|            | Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?   | yes |
| 115.77 (a) | Corrective action for contractors and volunteers  |     |
|            | Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?  | yes |
|            | Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?  | yes |
|            | Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?  | yes |
| 115.77 (b) | Corrective action for contractors and volunteers  |     |
|            | In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?  | yes |

| 115.78 (a) | Disciplinary sanctions for inmates  |     |
|------------|---|-----|
|            | 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 |
| 115.78 (b) | Disciplinary sanctions for inmates  |     |
|            | 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 |
| 115.78 (c) | Disciplinary sanctions for inmates  |     |
|            | 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 |
| 115.78 (d) | Disciplinary sanctions for inmates  |     |
|            | 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 |
| 115.78 (e) | Disciplinary sanctions for inmates  |     |
|            | 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 |
| 115.78 (f) | Disciplinary sanctions for inmates  |     |
|            | For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?         | yes |
| 115.78 (g) | Disciplinary sanctions for inmates  |     |
|            | If the agency prohibits all sexual activity between inmates, does<br>the agency always refrain from considering non-coercive sexual<br>activity between inmates to be sexual abuse? (N/A if the agency<br>does not prohibit all sexual activity between inmates.)   | yes |

| 115.81 (a) | Medical and mental health screenings; history of sexual abuse   |           |
|------------|---|-----------|
|            | 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       |
| 115.81 (b) | Medical and mental health screenings; history of sex  | ual abuse |
|            | 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       |
| 115.81 (c) | Medical and mental health screenings; history of sex  | ual abuse |
|            | 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? (N/A if the facility is not a jail).                  | na        |
| 115.81 (d) | Medical and mental health screenings; history of sex  | ual abuse |
|            | Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? | yes       |
| 115.81 (e) | Medical and mental health screenings; history of sexual abuse   |           |
|            | 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       |

| 115.82 (a) | Access to emergency medical and mental health services  |      |
|------------|---|------|
|            | 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  |
| 115.82 (b) | Access to emergency medical and mental health serv  | ices |
|            | 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  |
|            | Do security staff first responders immediately notify the appropriate medical and mental health practitioners?  | yes  |
| 115.82 (c) | Access to emergency medical and mental health services  |      |
|            | 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  |
| 115.82 (d) | Access to emergency medical and mental health serv  | ices |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes  |
| 115.83 (a) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|            | Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?  | yes  |
| 115.83 (b) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|            | Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?      | yes  |

| 115.83 (c) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|------------|---|------|
|            | Does the facility provide such victims with medical and mental health services consistent with the community level of care?   | yes  |
| 115.83 (d) | Ongoing medical and mental health care for sexual a victims and abusers   | buse |
|            | Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility.  Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)  | na   |
| 115.83 (e) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|            | 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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) | na   |
| 115.83 (f) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|            | Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?   | yes  |
| 115.83 (g) | Ongoing medical and mental health care for sexual abuse victims and abusers   |      |
|            | Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?  | yes  |

| 115.83 (h) | Ongoing medical and mental health care for sexual abuse victims and abusers   |     |
|------------|---|-----|
|            | 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 |
| 115.86 (a) | Sexual abuse incident reviews   |     |
|            | Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?   | yes |
| 115.86 (b) | Sexual abuse incident reviews   |     |
|            | Does such review ordinarily occur within 30 days of the conclusion of the investigation?  | yes |
| 115.86 (c) | Sexual abuse incident reviews   |     |
|            | Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?   | yes |

| 115.86 (d) | Sexual abuse incident reviews   |     |
|------------|---|-----|
|            | 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 |
|            | 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 |
|            | Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?  | yes |
|            | Does the review team: Assess the adequacy of staffing levels in that area during different shifts?  | yes |
|            | Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?  | yes |
|            | Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?     | yes |
| 115.86 (e) | Sexual abuse incident reviews   |     |
|            | Does the facility implement the recommendations for improvement, or document its reasons for not doing so?  | yes |
| 115.87 (a) | Data collection   |     |
|            | Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?  | yes |
| 115.87 (b) | Data collection   |     |
|            | Does the agency aggregate the incident-based sexual abuse data at least annually?   | yes |
| 115.87 (c) | Data collection   |     |
|            | Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?  | yes |

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

| 115.88 (d)     | Data review for corrective action   |     |
|----------------|---|-----|
|                | Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?   | yes |
| 115.89 (a)     | Data storage, publication, and destruction  |     |
|                | Does the agency ensure that data collected pursuant to § 115.87 are securely retained?  | yes |
| 115.89 (b)     | Data storage, publication, and destruction  |     |
|                | Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?   | yes |
| 115.89 (c)     | Data storage, publication, and destruction  |     |
|                | Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?  | yes |
| 115.89 (d)     | Data storage, publication, and destruction  |     |
|                | 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 |
| 115.401<br>(a) | Frequency and scope of audits   |     |
|                | During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.) | yes |

| 115.401<br>(b) | Frequency and scope of audits  |     |
|----------------|--|-----|
|                | Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)  | yes |
|                | If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)      | na  |
|                | If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.) | na  |
| 115.401<br>(h) | Frequency and scope of audits  |     |
|                | Did the auditor have access to, and the ability to observe, all areas of the audited facility?   | yes |
| 115.401<br>(i) | Frequency and scope of audits  |     |
|                | Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?   | yes |
| 115.401<br>(m) | Frequency and scope of audits  |     |
|                | Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?  | yes |
| 115.401<br>(n) | Frequency and scope of audits  |     |
|                | 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 |

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