

PREA Facility Audit Report: Final

Name of Facility: Bradford County Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 11/25/2023

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: James Kenney	Date of Signature: 11/25/ 2023

AUDITOR INFORMATION	
Auditor name:	Kenney, James
Email:	kenney.consult@gmail.com
Start Date of On-Site Audit:	11/16/2023
End Date of On-Site Audit:	11/17/2023

FACILITY INFORMATION	
Facility name:	Bradford County Jail
Facility physical address:	945-A N Temple Avenue, Starke, Florida - 32091
Facility mailing address:	PO Box 310, Starke, Florida - 32091

Primary Contact	
Name:	Lieutenant Beth Griffin
Email Address:	beth_griffin@bradfordsheriff.org
Telephone Number:	19049666219

Warden/Jail Administrator/Sheriff/Director	
Name:	Dawn McKinley
Email Address:	dawn_mckinley@bradfordsheriff.org
Telephone Number:	904-966-6359

Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	

Facility Health Service Administrator On-site	
Name:	Doctor David Kemp
Email Address:	golfdp69@gmail.com
Telephone Number:	3525143624

Facility Characteristics	
Designed facility capacity:	240
Current population of facility:	118
Average daily population for the past 12 months:	118
Has the facility been over capacity at any point in the past 12 months?	No

Which population(s) does the facility hold?	Both females and males
Age range of population:	18-65
Facility security levels/inmate custody levels:	Minimum, Medium, Maximum
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	55
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	0
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	0

AGENCY INFORMATION

Name of agency:	Bradford County Sheriff's Office
Governing authority or parent agency (if applicable):	
Physical Address:	945 North Temple Avenue, Starke, Florida - 32091
Mailing Address:	945A N Temple Avenue, Starke, Florida - 32091
Telephone number:	19049666250

Agency Chief Executive Officer Information:

Name:	Sheriff Gordon Smith
Email Address:	gordon_smith@bradfordsheriff.org
Telephone Number:	909666380

Agency-Wide PREA Coordinator Information

Name:	Beth Griffin	Email Address:	beth_griffin@bradfordsheriff.org
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Facility AUDIT FINDINGS

Summary of Audit Findings

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

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

Number of standards exceeded:

1	<ul style="list-style-type: none"> • 115.33 - Inmate education
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Number of standards met:

44

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 audit:	2023-11-16
2. End date of the onsite portion of the audit:	2023-11-17

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Alachua Rape Crisis Center, Just Detention International

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	240
15. Average daily population for the past 12 months:	118
16. Number of inmate/resident/detainee housing units:	11
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	123
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	2
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:	1
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:	0
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:	0
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:	1
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:	5

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>1</p>
<p>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:</p>	<p>2</p>
<p>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:</p>	<p>1</p>
<p>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):</p>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>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:</p>	<p>55</p>
<p>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:</p>	<p>47</p>

<p>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:</p>	<p>1</p>
<p>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:</p>	<p>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>13</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>
<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor selected at random at least one individual from each housing unit, ensuring to select individuals with different ages and races.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>

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:	12
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
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:	2
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:	0

<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The auditor verified with the PREA compliance manager and medical staff that there were no individuals that were blind housed in the facility during the onsite phase of the audit.</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The auditor verified with the PREA compliance manager and medical staff that there were no individuals that were deaf or hard of hearing housed in the facility during the onsite phase of the audit.</p>
<p>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:</p>	<p>1</p>

<p>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:</p>	<p>4</p>
<p>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:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The auditor verified with the PREA compliance manager and medical staff that there were no individuals that identified as transgender housed in the facility during the onsite phase of the audit.</p>
<p>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:</p>	<p>1</p>
<p>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:</p>	<p>2</p>

<p>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:</p>	<p>1</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>10</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None </p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p> <input checked="" type="radio"/> Yes <input type="radio"/> No </p>
<p>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):</p>	<p>No text provided.</p>

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):	20
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Maintenance staff, Grievance coordinator, Mailroom staff.
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	1
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
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, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?

Yes

No

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)?

Yes

No

87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?

Yes

No

88. Informal conversations with staff during the site review (encouraged, not required)?

Yes

No

<p>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).</p>	<p>No text provided.</p>
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Documentation Sampling

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

<p>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?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

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

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	0	6	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	6	0	6	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 for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	1	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	0	1	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	2	0	0
Staff-on-inmate sexual abuse	0	0	0	0
Total	0	2	0	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 detainee 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 for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	0	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	0	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	5	1	0
Staff-on-inmate sexual harassment	0	0	0	0
Total	0	5	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 ABUSE investigation files reviewed/ sampled:

2

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>2</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>0</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>6</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	6
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> 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?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> 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 INFORMATION	
DOJ-certified PREA Auditors 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 pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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 pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions)
Auditor Discussion Instructions
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. BCSO Policy 110.18 Inmate Sexual Assault 3. Bradford County Sheriff’s Office <i>Organizational Chart</i> 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator 2. PREA compliance manager <p>Findings (by provision):</p> <p>115.11(a). The Bradford County Jail has adopted a comprehensive written policy that mandates zero-tolerance toward all types of sexual abuse and sexual harassment. The Jail provided their BCSO <i>Policy 40.11 Prison Rape Elimination Act</i></p>

(PREA), which contains their entire sexual abuse policy and information related to the PREA standards. The policy states, "This policy addresses the prevention, intervention, treatment, investigation, tracking and reporting of inmate/detainee sexual assault/battery and staff sexual misconduct/harassment. BCJ shall make every effort to provide all inmate/detainees with a safe, humane, and secure environment, free from the threat of sexual assault/battery and staff sexual misconduct/harassment. As part of the orientation process, inmate/detainees shall be provided information regarding sexual assault/battery and staff sexual misconduct/harassment. In addition, all BCJ volunteers and contractual staff shall receive training on sexual assault/battery and sexual misconduct/harassment. BCJ has a zero tolerance for incidents of inmate/detainee-on-inmate/detainee sexual assault/battery and staff sexual misconduct/harassment towards inmate/detainees. Reports of victimization can be made confidentially. All complaints of attempted sexual assault/battery, sexual assault/battery and staff misconduct/harassment shall be reported promptly and thoroughly investigated by the appropriate authorities. Information regarding a sexual assault/battery or sexual misconduct/harassment shall be only disclosed to those who need to know for the purpose of investigation, decision making, and/or prosecution." The policy provides the definitions for sexual abuse and sexual harassment that are consistent with the prohibited behaviors in the PREA standards. The policy also outlines sanctions for those that have participated in prohibited behaviors in the facility. The auditor was also provided BCSO *Policy 110.18 Inmate Sexual Assault* in the PAQ. This policy includes the same information regarding zero tolerance, prohibited behaviors, and sanctions for violations of the prohibited behaviors. Based upon this analysis, the auditor finds the facility in compliance with this provision.

115.11(b). The agency has designated an agency wide PREA coordinator, Captain Dalton Diggs, who maintains these duties along with his duties as the jail's programs captain. The facility's organizational chart was provided for review. The chart shows the PREA coordinator's position as a direct report to the Major, the Jail Administrator. There is no question as to the authority level of the PREA coordinator at this agency. The auditor interviewed the PREA coordinator and confirmed that he has other responsibilities but has ample time to oversee the agency's efforts to comply with the PREA standards. He also confirmed that he has direct access to the Major so immediate action, if necessary, can be taken. Based on this interview and my contact with the agency during the several months of this audit, the auditor believes he has both the time and authority necessary. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.11(c). Although the agency does not operate more than one facility, they have elected to designate a PREA compliance manager, Lieutenant Beth Griffin. The PREA compliance manager (PCM) handles all day-to-day PREA operations and is responsible for monitoring of PREA education of staff, inmates, contractors, and volunteers, oversight of risk screening, retaliation monitoring, oversight of investigations, annual PREA reporting, and maintenance and storage of PREA files. The auditor worked with the PCM throughout the audit process and evaluated the PCM's time and authority level. Also, during the onsite audit the auditor was able to evaluate the PCM's knowledge of PREA and authority level. Through an interview with the PCM, it was

	<p>clear that she understood her role and was well educated in the PREA standards. Staff members interviewed knew the PCM and knew to contact her directly if something related to PREA was noted. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. None 2. Interviews: <ol style="list-style-type: none"> 1. Agency Contract Administrator <p>Findings (by provision):</p> <p>115.12(a). The agency does not contract with any other agency for the housing of their incarcerated individuals.</p> <p>115.12(b). The agency does not contract with any other agency for the housing of their incarcerated individuals. Although there are no current contracts, the auditor interviewed the programs captain, who would be responsible for signing such contracts to house incarcerated individuals elsewhere. He confirmed that they would only house incarcerated individuals in a facility that can show proof of PREA compliance. He also confirmed that they would include in the contract provisions to audit for PREA compliance.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.06 Staffing and Supervision 2. BCSO Policy 90.02 Housekeeping & Sanitation

3. *Bradford County Sheriff's Office Corrections Division Staffing Plan 2022*
4. Housing Event Logs
2. Interviews:
 1. PREA Coordinator
 2. Agency Head
 3. Random Incarcerated individuals
 4. Random Staff
 5. Specialized Staff
3. Site Review Observations:
 1. Control rooms (electronic monitoring)
 2. Programs area
 3. Housing units
 4. Kitchen
 5. Health services

Findings (by provision):

115.13(a). The agency provided a copy of the *Bradford County Sheriff's Office Corrections Division Staffing Plan 2022*. The document is well written and provides a wide view of the activities and staffing in the facility. The plan includes a review of the incarcerated individual population, the programs, and activities available for incarcerated individuals, the medical and mental health care available, video monitoring, physical plant, and the coverage plan for staff. The plan was written within the last year.

The staffing plan mandated in this provision must take into account 11 considerations:

1. Provision 115.13(a)(1) - Generally accepted detention and correctional practices - The Jail references the practices found in The National Institute of Corrections "Staffing Analysis Workbook for Jails", along with the Florida Model Jail Standards (FMJS), and the Prison Rape Elimination Act.
2. Provision 115.13(a)(2) - Any judicial findings of inadequacy - The Jail states that there are no such findings.
3. Provision 115.13(a)(3) - Any findings of inadequacy from Federal investigative agencies - The Jail states that there are no such findings and has already completed two PREA audits.
4. Provision 115.13(a)(4) - Any findings of inadequacy from internal or external oversight bodies - The Jail is inspected annually and must conform with the standards of the FMJS. The facility has also been audited by the Florida Department of Juvenile Justice with no findings of inadequacy.
5. Provision 115.13(a)(5) - All components of the facility's physical plant (including "blind-spots" or areas where staff or incarcerated individuals may be

isolated) – Areas of the facility are continuously observed for areas of concern. Staff are conducting additional security rounds and additional cameras have been installed in areas where deficiencies have been noted.

6. Provision 115.13(a)(6) – The composition of the incarcerated individual population – The Jail houses male and female adult incarcerated individuals. The plan includes required staffing to maintain the safety of all incarcerated individuals, regardless of gender, sexual orientation, or age. Job opportunities and activities and programs are available for all open population individuals. Classification is completed in order to adequately and safely house individuals who are found to be at risk of possible victimization or of having indications of sexually aggressive behavior.

7. Provision 115.13(a)(7) – The number and placement of supervisory staff – Each security shift is comprised of one sergeant who is the shift supervisor, one corporal who supervises the pod areas, one booking deputy, one central control deputy, and one pod roving deputy.

8. Provision 115.13(a)(8) – Institution programs occurring on a particular shift – Programs are scheduled during evening and weekend hours when all other security activity is at a minimum and can be adequately supervised by staff that are on duty. Visitation is conducted through video visitation with on duty civilian and security staff having the ability to monitor it for safety.

9. Provision 115.13(a)(9) – Any applicable State or local laws, regulations, or standards – State standards require that all new hires be educated on the PREA standards, zero tolerance policy, how to report sexual abuse, and the signs of a person who are being sexually abused. All new staff (security and civilian) are trained during New Hire Orientation on all areas prescribed.

10. Provision 115.13(a)(10) – The prevalence of substantiated and unsubstantiated incidents of sexual abuse – The staffing plan addresses the periodic review of incidents of sexual abuse that are reported in the facility. Over the previous 12 months, the facility has had zero substantiated incidents of sexual abuse. The number of reported incidents in the facility has either stayed consistent or reduced over the last three years.

11. Provision 115.13(a)(11) – Any other relevant factors – The Bradford County Jail housed both county and Federal Marshal individuals. The facility also provides routine courtesy holds for female individuals from Union County as their facility cannot house them and Department of Corrections individuals who are awaiting transfer or court appearance. If any complaints (including PREA) are received regarding any other facility, every effort is made to notify the affected facility as well as facility medical and mental health departments so appropriate action such as counseling and investigation can be initiated.

The overall staffing of the facility is consistent with accepted practices and standards and the auditor saw nothing in the plan or in the facility that would be inconsistent with that finding.

During the site review, the auditor found no areas of concern that would be considered blind spots in the facility. The auditor reviewed all areas, including the kitchen, laundry, medical, and all housing units. There are clearly visible cameras throughout the facility and the auditor could see where the facility had identified potential areas of concern, as some mirrors had been installed. This would support the assertion in the staffing plan that the facility has done an extensive review. The auditor visited the control rooms where staff actively monitor video within the facility. There appeared to be extensive coverage in all areas of the facility. In both control rooms, the auditor viewed the camera monitoring stations and camera views.

The auditor talked with supervisors throughout the facility and witnessed their interactions with staff. It was apparent that there is ample supervisory coverage to ensure staff and incarcerated individual safety.

The auditor interviewed the Major, who is the agency head, who confirmed the written staffing plan. The plan includes a review to ensure adequate staffing to meet the agency's efforts to prevent, detect and respond to incidents of sexual abuse. The video monitoring system is evaluated at least once per year to determine if the agency should make adjustments to better identify safety concerns. The Major stated that they utilize an overtime list to ensure proper coverage on each shift to avoid deviations which could lead to unsafe conditions in the facility. The Major reviews daily and weekly staffing reports and addresses any concerns immediately. The auditor also interviewed the PREA compliance manager, who confirmed that she plays a large role in the development of the staffing plan. She explained the need to review each of the points in this standard in developing the plan. Each of the points assists the agency to better prevent and detect sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(b). In the PAQ, the auditor was provided with BCSO *Policy 40.06 Staffing and Supervision*. The policy states, "Minimum Staffing: Four staff members must be on-duty at the Jail with no less than three deputies physically present unless authorization is obtained from an Assistant Commander or above and will be for shortest time possible until additional staff arrive. Any drop in staffing to the level of three will be document via incident report."

The Jail reports no deviations from the staffing plan. In order to meet required staffing, the agency utilizes overtime hours. The auditor interviewed the Major, who stated that the facility utilizes a system for overtime that allows them to avoid deviations from the plan. The Major was unaware of a time when activities of incarcerated individuals had to be limited due to short staffing. Shift supervisors utilize the overtime list to fill open positions on the shift due to sick leave and vacation leave or leaves of absence. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(c). The staffing plan provided was last updated in December 2022. The staffing plan states that the plan is to be reviewed and updated at a minimum annually. The auditor was also provided a copy of the 2021 staffing plan, which was updated in December 2021. This makes it clear that the agency reviews it annually

per this provision of the standard. The review is completed by the Major, the PREA coordinator, and the PREA compliance manager.

The PREA compliance manager was interviewed, and she stated that the annual review is done annually in December and is performed by her, in consultation with the PREA coordinator and the Major of the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(d). The auditor was provided BCSO *Policy 90.02 Housekeeping & Sanitation* in the PAQ. This policy states, "Reviews/inspections/rounds will be conducted by various staff members as outlined to ensure the safety and sanitation of the facility. Additionally, during rounds staff will be alert and observant to identify and deter sexual abuse, including staff sexual abuse/harassment. All such reviews/inspections/rounds are considered unannounced, and staff are prohibited from alerting others when higher ranking staff are present in the facility."

During interviews with 13 random incarcerated individuals, each incarcerated individual clearly stated they see supervisors come in the housing units often. During interviews with 10 random staff members, staff stated that supervisors perform rounds daily and at different times. Supervisors interviewed indicated that rounds are performed at all times of the day and night. Also, during the site review, the auditor met supervisors in the housing units while they were performing their unannounced rounds.

Several copies of event logs were supplied in the PAQ, which showed various upper-level supervisors logging in PREA rounds throughout the facility. Rounds were logged as **Supervisor In** and **Supervisor Out** at all times of the day and night. The logs were from different days of the week throughout the month. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none">1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>)<ol style="list-style-type: none">1. BCSO <i>Policy 50.02 Classification</i>2. BCSO <i>Policy 50.03 Admission, Classification, & Release</i>3. Population reports2. Interviews:<ol style="list-style-type: none">1. Specialized staff2. Targeted incarcerated individuals

3. Random incarcerated individuals
3. Site Review Observations:
 1. Programs area
 2. Youthful housing

Findings (by provision):

115.14(a). The auditor reviewed BCSO *Policy 50.02 Classification*, which was provided in the PAQ. This policy clearly outlines the requirements to house incarcerated individuals in the Jail that are under the age of 18. The policy states, "Youthful offender inmates will not be housed with adult inmates. In order to better accommodate the housing considerations of youthful offenders, attempts should be made to house them at another facility when possible." The auditor was provided facility incarcerated individual population reports for the 12 months preceding the onsite phase of the audit and there have been no youthful offenders housed in the jail during the 12-month period.

During the site review, the auditor toured the facility and noted no such individuals currently housed in the jail. The PREA compliance manager pointed out the last housing unit, Unit J, which is the last unit in the circle around the control center. This unit would be utilized to house a youthful offender if one were admitted to the jail. This would provide the appropriate separation in sight and sound from adult incarcerated individuals. Through interviews with the PREA coordinator and the PREA compliance manager, the auditor learned that the jail staff would make every effort to locate another jail that could house the youthful offender as a courtesy to Bradford County. This would provide the offender housing in such a way that separation from adult individuals is provided safely, and the youthful offender would be enabled to participate in education and daily large muscle exercise. As there were no youthful offenders housed in the facility, the auditor was unable to interview anyone to verify the information in this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.14(b). The auditor was provided BCSO *Policy 50.03 Admission, Classification, & Release* in the PAQ. The policy states, "Best efforts to avoid placing youthful inmates in isolation. Absent exigent circumstances, youthful inmates shall not be denied daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible."

The auditor was provided facility incarcerated individual population reports for the 12 months preceding the onsite phase of the audit and there have been no youthful offenders housed in the jail during the 12-month period. As there were no youthful offenders housed in the facility, the auditor was unable to interview anyone to verify the information in this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.14(c). The auditor was provided BCSO *Policy 50.03 Admission, Classification, & Release* in the PAQ. The policy states, "Best efforts to avoid placing youthful inmates

in isolation. Absent exigent circumstances, youthful inmates shall not be denied daily large-muscle exercise and any legally required special education services to comply with this provision. Youthful inmates shall also have access to other programs and work opportunities to the extent possible.”

The auditor was provided facility incarcerated individual population reports for the 12 months preceding the onsite phase of the audit and there have been no youthful offenders housed in the jail during the 12-month period. As there were no youthful offenders housed in the facility, the auditor was unable to interview anyone to verify the information in this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15 Limits to cross-gender viewing and searches

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. BCSO Policy 110.12 Searches
 3. BCSO Policy 50.03 Admission, Classification, & Release
 4. Training curriculum
 5. Training records
 6. Housing logs
2. Interviews:
 1. Specialized staff
 2. Targeted incarcerated individuals
 3. Random incarcerated individuals
3. Site Review Observations:
 1. Control rooms (electronic monitoring)
 2. Strip search room
 3. Bathrooms and shower areas
 4. Housing units
 5. Medical services

Findings (by provision):

115.15(a). In the PAQ, the facility provided BCSO Policy 110.12 Searches. This document specifically describes the policy related to when and how searches are to be performed on incarcerated individuals. The policy prohibits cross-gender strip searches and states, “All searches shall be conducted by a deputy of the same gender as the inmate with exception to transgender or intersex inmates.” The policy also

states, "Body cavity/Invasive body searches may be authorized by the Jail Administrator only for clear, probable cause. Medical personnel must conduct the search with a deputy of the same sex as the inmate present. Such searches will not be conducted on pregnant inmates if it presents the possibility of adverse clinical consequences. An incident report containing the reason, the results and who conducted the search is required." The PAQ shows that no body cavity searches were performed in the previous 12 months.

During the site review, the auditor viewed the strip search room in the facility's intake area. This room has no window on the door and no camera inside. It is utilized only for strip searches following supervisor approval and only for those arrested for offenses where strip searches are allowable based on Florida State Statutes. Through informal discussion with deputies in the intake area, the auditor learned that all strip searches had to be approved by a supervisor and then performed by a staff member of the same gender as the incarcerated individual. Informal discussion with incarcerated individuals confirmed that information, with all incarcerated individuals stating that they were never searched by a staff member of the opposite gender. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(b). In the PAQ, the facility provided *BCSO Policy 110.12 Searches*. This document specifically describes the policy related to when and how searches are to be performed on incarcerated individuals. The policy prohibits cross-gender strip searches and states, "All searches shall be conducted by a deputy of the same gender as the inmate with exception to transgender or intersex inmates." The PAQ shows that no cross-gender searches have been performed in the previous 12 months.

During informal discussions with staff and random interviews with staff and incarcerated individuals, everyone confirmed that pat searches of female incarcerated individuals are performed by female staff members. The auditor interviewed 13 random incarcerated individuals, two of which were female, as well as four additional female individuals in the targeted interviews. Each stated clearly that they were never searched by a male staff member or witnessed a male staff member searching a female incarcerated individual. All six female incarcerated individuals stated that male officers were not allowed to search them. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(c). In the PAQ, the facility marked zero cross-gender searches over the previous 12-month period. The policy clearly shows that if any such search was performed an incident report was to be written immediately to document the reason for the search, as well as the supervisor who approved the search. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(d). The auditor was provided with *BCSO Policy 50.03 Admission, Classification, & Release* in the PAQ. The policy states, "Shower curtains and privacy screens will be utilized for all times when showering or changing clothing that may allow others (non- medical) of opposite gender to view breasts, buttocks, or genitalia. Exigent circumstances or incidents such as routine cell checks may occasionally cause incidental viewing, but the normal daily course of showering, performing bodily

functions and changing of clothing will not be observed by non-medical staff of the opposite gender.” The policy also states, “All cases of cross gender entry into a Pod will be for the least amount of time necessary to complete the assigned task. Most routine tasks should be performed by staff of the same gender as the pod housing. Anytime a staff member of the opposite gender enters a Pod they will be kept under continuous observation by the Pod Control Officer. And an announcement will be made to the inmates if a staff member of a different gender is entering the pod.”

During the site review, the auditor visited all housing units and viewed the restroom and shower areas. In all areas, the auditor could see the specific actions taken to provide privacy. The facility has a total of ten (10) housing units, lettered A through J. The layout is either open dormitory style or double-bunked cell style. In the dormitory style units, there are open restrooms and showers on the top and bottom tiers. The restrooms and showers have been provided with a large metal divider to separate the view directly into the toilet areas and into the showers. The showers also have curtains for additional privacy. In the other units, each of the double-bunked cells are outfitted with a toilet and sink. Showers are provided on both the top and bottom tier. The showers have a curtain as well as a metal divider for additional privacy. The auditor walked through the housing units and could see how well the privacy measures worked. The auditor had informal discussions with several individuals and was told that they felt comfortable in the restrooms and showers and that most of the deputies allowed the individuals to hang clothing, towels, or sheets during showers to provide additional privacy.

The auditor visited the control room where video is monitored by staff. The auditor was able to view housing units and determined that there were no cameras that could view into the restrooms or showers.

Also, during the site review, the auditor routinely witnessed cross-gender announcements during entry into housing units. The auditor was escorted by the female PREA compliance manager during the facility site review, including the male housing units. Each time the auditor approached the unit door, the officer on duty or the escorting staff clearly made a "female on the floor" announcement when entering male housing units or "male on the floor" when entering female housing units and asked that we wait a few minutes before we could enter. This allowed incarcerated individuals the opportunity to cover up if it was necessary.

During random interviews with 13 incarcerated individuals, they all stated that officers routinely make an announcement before entry to the unit. The female incarcerated individuals stated that officers in female housing units also make the male staff wait until the restrooms are empty before allowing staff to enter the unit. Incarcerated individuals also confirmed that they felt comfortable to shower and use the restroom without staff members of the opposite sex viewing them. During random interviews with staff members, they confirmed that cross-gender announcements are done every time someone enters a housing unit. Officers stated clearly that that they cannot see incarcerated individuals in the showers and restrooms and will only see incarcerated individuals naked during routine cell checks and security rounds. Based on this analysis, the auditor finds the facility in

	<p>compliance with this provision.</p> <p>115.15(e). In the PAQ, the facility provided BCSO <i>Policy 110.12 Searches</i>. The policy states, “Transgender or intersex inmate/detainees may not be searched or physically examined for the sole purpose to determine the inmate’s genital status.”</p> <p>During interviews with 10 random staff members, the auditor asked about the strip search policy and the identification of transgender incarcerated individuals. All 10 staff members were aware of the policy regarding strip searches and identification of transgender incarcerated individuals. All staff interviewed stated that only medical staff can visualize the incarcerated individual’s body, if necessary, to make a determination. There were no transgender individuals in custody in the facility during the onsite phase of the audit to interview regarding this provision of the standard. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.15(f). The facility provided the auditor with a copy of the search procedures training curriculum that is provided for staff on an annual basis. The training was provided by the Moss Group and very familiar to the auditor. It identifies the need for staff members to perform pat searches using the bladed technique between and under the breasts to search for contraband. The training also requires the need to do searches in a professional and respectful manner, in the least intrusive manner possible. The auditor was provided with training records for the last two years, which document the completion of training for all staff members on the search module.</p> <p>During random staff interviews, all 10 staff members stated that they had received training on performing pat searches of transgender incarcerated individuals. All those interviewed stated that searches must be done professionally and respectfully. Officers stated that a transgender individual would be given a search preference form and would select either a male or female to perform the strip search. The auditor was told that they rarely have transgender incarcerated individuals incarcerated in the jail. There were no transgender individuals in custody in the facility during the onsite phase of the audit to interview regarding this provision of the standard. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>)

1. BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*
2. Language Line Information
3. Incarcerated individual handbook
2. Interviews:
 1. Agency head
 2. Targeted incarcerated individuals
 3. Random incarcerated individuals
3. Site Review Observations:
 1. Postings in housing units
 2. Medical housing
 3. Incarcerated individual educational materials in intake

Findings (by provision):

115.16(a). In the PAQ, the auditor was provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "The agency shall take appropriate steps to ensure that inmate/detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The agency shall take appropriate steps to ensure that inmate/detainees with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment." The policy directs staff to utilize contracted interpreter services to assist incarcerated individuals that are not proficient in English, are blind or deaf, or requires other interpretation services to understand the information provided. The agency provided the auditor with proof of a contract with Language Line Services, Inc. for translation services. The auditor was also provided copies of the intake PREA education and questionnaires in several languages.

During the site review, the auditor talked with one incarcerated individual who spoke Spanish. The incarcerated individual understood what PREA was and knew how to properly report an incident of sexual abuse, if needed. There were signs clearly posted in each of the housing units in English and Spanish. The auditor viewed the incarcerated individual orientation information on the kiosk in two languages, and it was easy to read and included captions.

The auditor interviewed three targeted incarcerated individuals, two with physical disabilities and one with a cognitive disability. All three incarcerated individuals could explain what PREA was, the prohibited behaviors and how to properly report an incident of sexual abuse or sexual harassment. The first with a physical disability has a permanent knee injury and utilizes a walker. He stated that he easily gets around the facility and had no problem with accessing intake education. He understands the PREA information and was able to easily use the telephone and kiosk. The second individual with a physical disability is a stroke survivor. His speech is very slow, and he has severe left side weakness. He can read, however, and reported that he can easily utilize the kiosk. He understands the PREA information and knows how to report allegations if it were necessary. The individual with a cognitive disability

reported that he was very safe in the jail. He was housed safely in a unit by himself because staff felt that was best due to his cognitive awareness. When asked, he understood what sexual abuse was but stated that he felt like he was safe in the jail. He knew that he could tell the deputy if something happened. He told the auditor about the sign posted on the wall. There were no other individuals with disabilities such as blind, deaf, or hard of hearing currently housed for the auditor to interview. The jail administrator confirmed that all efforts are made to provide all incarcerated individuals with the required PREA information. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.16(b). In the PAQ, the auditor was provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "The agency shall 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 inmate/detainees with disabilities or who are limited English proficient, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both respectively and expressively, using any necessary specialized vocabulary." The policy directs staff to utilize contracted interpreter services to assist incarcerated individuals that are not proficient in English, are blind or deaf, or requires other interpretation services to understand the information provided. The incarcerated individual handbook is provided in both English and Spanish and the initial PREA education pamphlet is also available in both languages.

The auditor spoke with one incarcerated individual who spoke Spanish during the random incarcerated individual interviews. The incarcerated individual could speak both English and Spanish. The auditor was able to speak with him in English, but he confirmed that all information for orientation and PREA are readily available in Spanish and are easily understood. The auditor was told that there were no incarcerated individuals in the facility that spoke a different language during the onsite phase of the audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.16(c). In the PAQ, the auditor was provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "The agency shall not rely on inmate/detainee interpreters, inmate/detainee readers, or other types of inmate/detainee assistants 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, or the investigation of the inmate's allegations. An incident report will be written any time such circumstances arise and an inmate/detainee interpreter is utilized."

During the onsite phase of the audit, the auditor spoke with 10 random staff members and 13 random incarcerated individuals. All staff and incarcerated individuals stated that the facility does not utilize incarcerated individuals to interpret for other incarcerated individuals. Staff members stated clearly that using an incarcerated individual to interpret could be dangerous, as there is no way to ensure that the translation from their language to English is accurate.

The jail administrator and the PREA coordinator both confirmed that use of

	<p>incarcerated individual interpreters is prohibited in the policy and not authorized. Rather than use an incarcerated individual, they would utilize Google translate to translate a written document of PREA information and give that directly to the incarcerated individual. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.03 Employee Rules 2. BCSO Policy 110.10 Facility Access 3. Bradford County Sheriff's Office Supplemental Questionnaire 4. Sheriff's Office Law Enforcement Employment Application Form 5. Employment records 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.17(a). In the PAQ, the auditor was provided BCSO Policy 40.03 Employee Rules. The policy states, "Correctional Deputies, civilian personnel, volunteers, contractors, and any other person supervising jail inmates shall not commit, nor have ever committed or been arrested for, or civilly/administratively adjudicated for, any act defined under Florida law that constitutes sexual harassment or sexual abuse, including but not limited to, making unwelcome sexual advances, requesting sexual favors, engaging in sexually motivated physical contact, behaving in a lewd manner or other verbal/physical conduct or communication of a sexual nature. This prohibited conduct applies to peers, supervisors, inmates, arrestees, families and friends of arrestees, volunteers, or any other persons working in the Jail. All allegations of sexual harassment/sexual abuse will be referred for investigation for possible criminal or administrative sanctions." The auditor was provided with the <i>Bradford County Sheriff's Office Supplemental Questionnaire</i>. This document asks the questions in this provision and is given to all new applicants for employment, to those seeking promotions, to contractors, and to volunteers.</p> <p>The agency's employment application (<i>Sheriff's Office Law Enforcement Employment Application Form</i>) requires that the applicant answer affirmatively regarding any prior arrests for all felony charges, specifically sexual abuse related offenses. The criminal background check will verify that this information is correct. The applicant then must</p>

take a computer voice stress analysis (CVSA) test prior to final selection for employment. This test also includes questions regarding sexual abuse related offenses and sexual harassment accusations.

All potential volunteers and contractors that will have incarcerated individual contact inside the secure facility must also have a completed background check performed prior to admission to the facility. This requires that the applicant affirmatively state that they have not been charged with a sexual abuse offense or be the subject of a sexual harassment allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(b). In the PAQ, the auditor was provided BCSO *Policy 40.03 Employee Rules*. The policy states, "Correctional Deputies, civilian personnel, volunteers, contractors, and any other person supervising jail inmates shall not commit, nor have ever committed or been arrested for, or civilly/administratively adjudicated for, any act defined under Florida law that constitutes sexual harassment or sexual abuse, including but not limited to, making unwelcome sexual advances, requesting sexual favors, engaging in sexually motivated physical contact, behaving in a lewd manner or other verbal/physical conduct or communication of a sexual nature. This prohibited conduct applies to peers, supervisors, inmates, arrestees, families and friends of arrestees, volunteers, or any other persons working in the Jail. All allegations of sexual harassment/sexual abuse will be referred for investigation for possible criminal or administrative sanctions."

The employment application for staff members and for volunteers and contractors includes a questionnaire that specifically asks applicants if he or she was the subject of a sexual harassment allegation. During interviews, the administrative assistant confirmed that sexual harassment allegations are taken into consideration during the approval and hiring process for all individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(c). The auditor was provided BCSO *Policy 110.10 Facility Access* in the PAQ. The policy states, "Only authorized, properly identified persons are allowed to enter the Bradford County Jail. Background checks will be conducted on staff, contractors, volunteers and other who may have contact with inmates/detainees. An updated record check will be conducted on such persons a minimum of every five years. Designated jail staff will maintain a record of all back-ground checks conducted on staff, contractors, volunteers or may have contact with inmates."

During the interview with the administrative assistant, this requirement was discussed. The agency will not hire an individual who has a negative employment history check. This includes asking prior corrections employers if the individual had a substantiated sexual abuse allegation or resigned during an investigation of sexual abuse. The agency was not able to provide proof of denying employment based on this evaluation because it has not yet happened over the last five years. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(d). The auditor was provided BCSO *Policy 110.10 Facility Access* in the PAQ. The policy states, "Only authorized, properly identified persons are allowed to enter

the Bradford County Jail. Background checks will be conducted on staff, contractors, volunteers and other who may have contact with inmates/detainees. An updated record check will be conducted on such persons a minimum of every five years.

Designated jail staff will maintain a record of all back-ground checks conducted on staff, contractors, volunteers or may have contact with inmates.”

During the auditor’s interview with the administrative assistant, she confirmed that background checks are completed before any individual is approved for entry into the secure facility. Once the background is completed, the application must be approved by the administration before the individual’s name is entered on the approved list.

This process is completed for anyone who will volunteer with incarcerated individual programs or the chaplain’s office and for any contractor. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(e). The auditor was provided BCSO *Policy 110.10 Facility Access* in the PAQ.

The policy states, “Only authorized, properly identified persons are allowed to enter the Bradford County Jail. Background checks will be conducted on staff, contractors, volunteers and other who may have contact with inmates/detainees. An updated record check will be conducted on such persons a minimum of every five years.

Designated jail staff will maintain a record of all back-ground checks conducted on staff, contractors, volunteers or may have contact with inmates.”

During the onsite phase of the audit, the auditor interviewed the administrative assistant, who confirmed it is part of their normal procedure. In fact, she stated, they perform background checks on all individuals every year. She has a date selected on her calendar each year and completes the background checks for everyone, then sets a date for the next year that is within the next 365 days. This includes all contractors and volunteers as well. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(f). In the PAQ, the auditor was provided BCSO *Policy 40.03 Employee Rules*.

The policy states, “Employees shall advise their supervisor in writing when they are in a personal relationship with an inmate (any jurisdiction), persons under probation supervision, or a former inmate not under supervision, who was released within the past (3) years. The information will be sent to the Jail Administrator for review.” The auditor was provided with the *Bradford County Sheriff’s Office Supplemental Questionnaire*. This document asks the questions in this provision and is given to all new applicants for employment, to those seeking promotions, to contractors, and to volunteers.

During the auditor’s interview with the administrative assistant, it was confirmed the agency follows this policy. She explained that questions regarding an individual’s prior employment, sexual abuse and sexual harassment allegations, and prior criminal offenses are asked during the oral interview process and in the CVSA testing.

She also confirmed that all employees are required to report any arrests or allegations of sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(g). The agency’s employment application (*Sheriff’s Office Law Enforcement*

	<p><i>Employment Application Form</i>) was provided to the auditor during the interview. The application clearly provides this statement, "I am aware that any omission, falsification, misstatement or misrepresentation will be the basis for my disqualification as an applicant or my dismissal from the Sheriff's Office."</p> <p>During the interview with the administrative assistant, the auditor confirmed that the agency will terminate any employee for false information provided during the application process or omissions of fact of any information, including sexual abuse and sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.17(h). During the auditor's interview with the administrative assistant, it was confirmed that the agency would, in fact, provide potential new employers with information regarding a past employee's sexual abuse and sexual harassment allegations and/or investigations. She stated that this would come from the Sheriff's Office human resources department once they receive an official request from a law enforcement agency. She stated that there is no law prohibiting this in Florida. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. None 2. Interviews: <ol style="list-style-type: none"> 1. Agency head 2. PREA coordinator <p>Findings (by provision):</p> <p>115.18(a). The facility did not provide any documentation regarding this provision. Based on the auditor's review of the agency website and the facility characteristics provided, it is clear there have been no design changes of the current facility or acquisitions of new facilities by the agency since August 20, 2012.</p> <p>During interviews with the jail administrator and the PREA coordinator, the auditor confirmed that there have been no design changes in the facility and no new acquisitions. Both confirmed, however, that the PREA coordinator would be part of any future agency growth to consider how the design, acquisition, expansion, or modification would affect the agency's ability to protect incarcerated individuals from</p>

	<p>sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.18(b). The facility did not provide any documentation regarding this provision. The auditor did read in the 2022 staffing plan that some cameras had been added in the facility based on a review performed.</p> <p>During interviews with the jail administrator and the PREA coordinator, the auditor learned that there were some recent upgrades to the video monitoring. In 2023, an evaluation was performed that identified at least one cell that presented a danger to the individual housed there as well as to the facility staff. While changes are made, the facility is not housing individuals in the cell. Cameras have been added to improve sightlines from control rooms and to provide additional safety for both the incarcerated individuals and staff members. These changes were made with the agreement of the jail administrator and the PREA coordinator. The camera views were planned specifically to add to the facility’s sexual safety and to assist with the elimination of any blind spots. The video monitoring system has a 30-day retention time. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. BCSO Policy MB 148 Collection, Processing and Preservation of Evidence 3. Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 3. Site Review Observations: <ol style="list-style-type: none"> 1. Medical services <p>Findings (by provision):</p> <p>115.21(a). The agency indicated in the PAQ that the Bradford County Sheriff's Office is responsible to investigate all allegations of sexual abuse and sexual harassment in the Bradford County Jail. This includes the administrative and criminal investigations.</p>

There is no outside agency utilized for these investigations. The auditor was provided the BCSO *Policy MB 148 Collection, Processing and Preservation of Evidence* in the PAQ. This multi-bureau policy directs evidence collection for the entire agency and meets the provision of their uniform evidence protocol.

During the onsite phase of the audit, the auditor interviewed the security lieutenant, who initiates sexual investigations in the corrections facility. The lieutenant confirmed that all investigations of sexual abuse are performed in the facility just as they are performed in the community. He stated that investigators would collect and process evidence under the same protocols that are utilized at all crime scenes.

These protocols are used for all evidence collection related to any criminal and administrative investigation in the County as outlined in Policy MB 148. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(b). In the PAQ, the auditor was provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. On page 11, the policy highlights evidence collection guidelines and states, "This portion of guideline has been adapted from the U.S. Department of Justice's Office on Violence Against Women publication, "*A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.*" The policy goes on to list eleven specific points that jail staff are to follow for evidence preservation and collection until investigative staff and forensic staff can respond and take custody. Although the facility does not routinely house youthful individuals, the protocol would be appropriate for youth.

During the onsite phase of the audit, the auditor interviewed the security lieutenant. The lieutenant confirmed that all investigations of sexual abuse in the facility are performed just as they are performed in the community. He stated that investigators would collect and process evidence under the same protocols that are utilized at all crime scenes. These protocols are used for all evidence collection related to any criminal and administrative investigation in the County and are consistent with the *National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents*. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(c). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "BCJ shall offer all victims of sexual abuse access to forensic medical examinations, at an outside facility, without financial cost, where evidentiary or medically appropriate. Such examinations shall be performed by Sexual Assault Forensic Examiners (SAFE's) or Sexual Assault Nurse Examiners (SANE's) where possible. If SAFEs or SANEs cannot be made available, the examination can be performed by other qualified medical practitioners. The agency shall document efforts for provide SAFEs or SANEs." The agency indicated in the PAQ that there were no forensic examinations performed for incarcerated victims during the 12 months prior to the onsite audit.

During the onsite phase of the audit, the auditor interviewed the security lieutenant. The lieutenant confirmed that all forensic examinations for sexual abuse victims in the Bradford County Jail would be performed at Shands Hospital in Gainesville. The

hospital has a SAFE or SANE on duty and would perform the examination then provide information to the Sheriff's Office investigator and to the jail. The facility does not have a plan in place if a SAFE or SANE is not available, since the hospital will always have one on duty. The services would be at no cost to the incarcerated victim. The auditor made contact with the nurse manager at Shands Hospital emergency department. She was confirmed that the hospital does, in fact, have a SAFE or SANE on duty at all times. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(d). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "The agency shall attempt to make available to the victim a victim advocate." The facility also provided the *Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center (MOU)*. The MOU requires the rape crisis center to provide a victim advocate for the incarcerated victim for several services, including the forensic medical examination. The MOU states the advocate would be available 24 hours a day, seven days a week., so there would not be a reason for the facility to provide an alternative community-based advocate.

During the onsite phase of the audit, the auditor interviewed the PREA compliance manager. She confirmed the MOU and a great working relationship with the staff at the rape crisis center. She maintains communication with the center's director to ensure their availability to the incarcerated individual population. The auditor interviewed one individual who had filed an allegation of sexual abuse. The allegation did not require a forensic medical examination. The individual was aware of the services of a victim advocate but did not request those services. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(e). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "As requested by the victim, the victim advocate shall be allowed to accompany and support the victim through the forensic medical examination process and investigatory process, and shall provide emotional support, crisis intervention, information and referrals." The facility also provided the *Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center (MOU)*. The MOU requires the rape crisis center to provide a victim advocate for the incarcerated victim for several services, including the forensic medical examination.

During the onsite phase of the audit, the auditor interviewed the PREA compliance manager. She confirmed the MOU and a great working relationship with the staff at the rape crisis center. She maintains communication with the center's director to ensure their availability to the incarcerated individual population. The auditor interviewed one individual who had filed an allegation of sexual abuse. The allegation did not require a forensic medical examination. The individual was aware of the services of a victim advocate but did not request those services. Based on this analysis, the auditor finds the facility in compliance with this provision.

	<p>115.21(f). Since sexual abuse investigations are performed by the agency, this provision does not apply to the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.21(g). The auditor is not required to audit this provision.</p> <p>115.21(h). The agency does not utilize their own staff members to provide victim advocate services. This is provided through the agreement with the Alachua rape crisis center. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.22(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). This policy states, “The Assistant Commander, Commander and/or Corrections Bureau Chief shall ensure that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment including detainee/inmate on detainee/inmate or staff sexual misconduct.” The facility indicated in the PAQ that there were eight (8) investigations initiated during the 12 months prior to the onsite audit.</p> <p>During the onsite phase of the audit, the auditor interviewed the jail administrator who confirmed that the agency takes all allegations of sexual abuse very seriously. The agency has a zero-tolerance for sexual abuse and will investigate all allegations, regardless of when they are reported and how they are reported. The auditor reviewed the facility’s sexual abuse investigation files from the previous 12 months. All of the investigations were completed promptly and thoroughly. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.22(b). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). This policy states, “The facility shall ensure that allegations of sexual abuse or sexual harassment are referred for investigation to BCSO</p>

	<p>Investigative Division to conduct criminal investigations unless the allegation does not involve potentially criminal behavior. This includes staff of the agency, contractors, volunteers, or other persons who have contact with inmate/detainees.”</p> <p>During the onsite phase of the audit, the auditor interviewed the security lieutenant, the PREA coordinator and the agency head. They all confirmed that the agency investigates all allegations of sexual abuse and sexual harassment. The auditor reviewed the facility’s incident reports and grievances from the previous 12 months. The auditor could not find any reports or grievances related to sexual abuse or sexual harassment that were not investigated properly. The auditor reviewed the sexual abuse and sexual harassment allegations at the same time. There were eight (8) allegations that were investigated properly. The auditor reviewed the Bradford County Sheriff’s Office web page, and under the page heading for Jail, there is a link for PREA. This page lists the agency’s zero-tolerance information and directs the public to contact the jail administrator to file an allegation of sexual abuse or sexual harassment, if needed. The agency’s PREA policy is also posted. The information can be found here: Prison Rape Elimination Act notice-1.pdf (bradfordsheriff.org). Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.22(c). All investigations are performed by the agency and not an outside agency. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.22(d). The auditor is not required to audit this provision.</p> <p>115.22(e). The auditor is not required to audit this provision.</p>
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115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Training curriculum 3. Training logs 4. Classroom sign in sheets 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator 2. Random staff

Findings (by provision):

115.31(a). In the PAQ, the facility provided a copy of their BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. This policy states, “Staff shall be trained in the following PREA issues. Training will be tailored to both male and female inmates in those areas applicable.” The policy goes to list the ten points required under this provision of the standard. The training curriculum provided in the PAQ is produced by the Moss Group and is known by the auditor. It is well produced and clearly covers all required points in this provision. Training logs provided in the PAQ were from the last two years.

They show completion of the annual training related to sexual abuse and sexual harassment and the date it was completed.

During the onsite phase of the audit, the auditor interviewed 10 random staff members and spoke informally with several staff members. Each person interviewed indicated that they received PREA education prior to beginning work in the secure facility or had received it in 2014, when the first PREA education was presented to the staff. Each person interviewed confirmed the training included the ten points required under this standard. The auditor was also told that they get annual refresher training online or in the classroom and must take the class and sign off on a document to show completion. The auditor reviewed training records provided by the PREA coordinator. The auditor was able to view training completion records for ten randomly selected staff member files. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.31(b). The Jail houses both male and female incarcerated individuals. Training for staff, therefore, is consistent and there is no need to provide additional training related to a specific gender. Also, the agency has only one facility and there is no requirement to prepare training for additional facilities with different incarcerated individual populations. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.31(c). The Jail has concentrated its efforts to ensure full preparation since 2014 for their first PREA audit. Training was put into place in 2014 and annual retraining, either in the classroom setting or online, is documented in employee training records in the training office.

During the onsite phase of the audit, the auditor interviewed 10 random staff members and spoke informally with several staff members. Each person interviewed indicated that they received PREA education prior to beginning work in the secure facility or had received it in 2014, when the first PREA education was presented to the staff. Each person interviewed confirmed the training included the ten points required under this standard. The auditor was also told that they get annual refresher training online or in the classroom and must take the class and sign off on a document to show completion. The auditor reviewed training records provided by the PREA coordinator. The auditor was able to view training completion records for ten randomly selected staff member files. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.31(d). All classroom training and online classes require staff to acknowledge, in

	<p>writing or electronically, they understand and will comply with the training on PREA. The facility requires that all staff complete the online training module annually or in the classroom setting, and this training includes an online or handwritten test to confirm completion of the class and understanding of the concepts provided in the training. The auditor was provided copies of sign in sheets from the classroom training.</p> <p>The auditor reviewed random training records during the onsite phase of the audit. The records show acknowledgement of completion of the PREA training on an annual basis. Records show full completion of the training by staff. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.32	Volunteer and contractor training
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Contractor and Volunteer Prison Rape Elimination Act Training Handout 3. Acknowledgement Forms 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.32(a). In the PAQ, the facility provided the <i>Contractor and Volunteer Prison Rape Elimination Act Training Handout</i>, which is provided to all potential volunteers and contractors prior to their approval to enter the secure facility. They also receive this annually before they approved again each year. The packet includes education on the zero-tolerance policy, a written acknowledgement of understanding, and the <i>Bradford County Sheriff's Office Supplemental Questionnaire</i>. The facility's BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> also requires volunteers and contractors to receive training on sexual abuse and sexual harassment. The policy states, "The agency shall ensure that all volunteers and contractors who have contact with inmate/detainees have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures." The facility indicated there are a total of 48 approved volunteers and contractors.</p> <p>During the onsite phase of the audit, the auditor interviewed one contractor and one</p>

volunteer. The contractor, the facility’s physician, and the volunteer, a religious volunteer, confirmed completion of the education handout prior to being granted access to the secure facility. The handout included education on sexual abuse and sexual harassment, how to report incidents of abuse and rules to avoid physical contact with an incarcerated individual. They also confirmed a requirement to complete the education handout annually. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.32(b). The auditor reviewed the *Training Handout*, which was included in the PAQ. The handout includes information regarding the facility’s zero-tolerance policy, how to properly report allegations of sexual abuse, and how to avoid sexual misconduct with incarcerated individuals.

During the onsite phase of the audit, the auditor interviewed one contractor and one volunteer. The contractor, the facility’s physician, and the volunteer, a religious volunteer, confirmed completion of the education handout prior to being granted access to the secure facility. The handout included education on sexual abuse and sexual harassment, how to report incidents of abuse and rules to avoid physical contact with an incarcerated individual. They also confirmed a requirement to complete the education handout annually. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.32(c). The auditor was provided signing education acknowledgement forms in the PAQ. The forms were all signed within the previous 12 months. They showed written proof that the volunteer and/or contractor had completed the required education material.

During the onsite phase of the audit, the auditor reviewed training records for several volunteers and other random records. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33	Inmate education
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet 3. BCSO Department of the Jail Inmate PREA Orientation Form 4. Inmate Rules

5. Video – *PREA: What You Need to Know*
2. Interviews:
 1. Specialized staff
 2. Random staff
 3. Random incarcerated individuals
3. Site Review Observations:
 1. Housing units

Findings (by provision):

115.33(a). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, “As part of the booking process, a staff member will provide each Inmate/Detainee with a printed copy of *Inmate Rules* upon request and advise that the same *Inmate Rules* are posted on each housing kiosk. In addition to the *Inmate Rules*, every inmate is provided a PREA information leaflet. The *Inmate Rules* also contain information about the Sexual Assault/Abuse prevention and Intervention program, including: 1. BCJ Zero Tolerance policy and how inmate/detainees can protect themselves from becoming victims while incarcerated, 2. Treatment options available to victims of sexual assault, and 3. Methods of reporting incidents of sexual assault/abuse, including information on the PREA hot line.” The auditor was provided copies of the *BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet*, *BCSO Department of the Jail Inmate PREA Orientation Form*, and the *Inmate Rules*. Each of the documents clearly identify the facility’s zero-tolerance policy and inform the incarcerated individuals of the many ways to report incidents of sexual abuse while incarcerated. In the PAQ, the facility indicated there were approximately 1,200 individuals admitted to the facility over the previous 12 months prior to the onsite audit. All of the 1,200 individuals had received the PREA education at intake. It is important to note that the agency has reported approximate numbers for intake and in other provisions throughout this report.

During the onsite phase of the audit, the auditor entered the Intake/Booking area and saw copies of the *BCSO Department of the Jail Inmate PREA Orientation Form*, which were available for distribution to the incarcerated individuals in booking. At the time of the facility visit there were no individuals present at intake, so the auditor asked to be processed through as an incarcerated individual. The intake deputy simulated the taking of property, strip search, photo, fingerprinting, and completion of intake paperwork, which included the PREA orientation form. The strip search was performed in a small room, privately, with no windows or cameras. The simulated search was performed by a male deputy. The intake deputy then performed the intake risk screening by providing the screening form and assisting the auditor through the form. He explained items that the auditor was unsure about. The PREA orientation form was then provided and explained by the intake deputy. The auditor was then asked to sign the property forms to acknowledge issuance of intake property, such as linen and uniform, as well as the *BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet*, and the *BCSO Department of the Jail Inmate PREA Orientation Form*. The auditor was then escorted to one of two holding cells where incarcerated individuals would await further processing or movement to

housing. In these cells, individuals would view several videos, including the PREA education video, *PREA: What You Need to Know*, which is produced by Just Detention International and well known to the auditor.

The auditor interviewed the intake deputy and confirmed that all incarcerated individuals receive the same *BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet* and *BCSO Department of the Jail Inmate PREA Orientation Form*.

These documents are presented to all individuals that are admitted to the facility.

The auditor also interviewed 13 random incarcerated individuals during the onsite phase of the audit. All 13 incarcerated individuals confirmed that they understood the PREA information and how to ask for help or file a report. All 13 incarcerated individuals confirmed receiving the PREA leaflet in intake. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(b). In the PAQ, the facility provided documentation to show incarcerated individual attendance at the incarcerated individual orientation that is provided to incarcerated individuals in intake prior to their move to general population. The individuals are shown the PREA education video, *PREA: What You Need to Know*, which is produced by Just Detention International and well known to the auditor. In the PAQ, the facility indicated there were approximately 330 incarcerated individuals admitted to the facility whose length of stay was 30 days or more. All 330 individuals had seen the PREA education video.

Through discussions with the PREA coordinator, the auditor learned that orientation is provided to incarcerated individuals prior to their move to general population from intake. During the orientation, the facility shows the video, *PREA: What You Need to Know*, which was produced by Just Detention International, in conjunction with the National PREA Resource Center. This video provides the mandated education for incarcerated individuals. The auditor was shown logs as proof that all incarcerated individuals currently in custody had viewed the video.

The auditor interviewed 13 random incarcerated individuals during the onsite phase of the audit. All 13 incarcerated individuals had been housed in the facility for at least 30 days. Each of the incarcerated individuals confirmed that they had viewed the video and were aware of their right to be free from sexual abuse and sexual harassment, free from retaliation for reporting abuse and that the agency would properly respond to incidents of such abuse. The auditor was told that the video runs on the facility televisions two times every day and they are unable to change the channel. Some of them were able to repeat word for word from the video. Most of the incarcerated individuals also stated they could read the PREA information on the kiosk at any time. The auditor also interviewed staff from intake, who confirmed that the PREA video is shown daily during orientation, prior to incarcerated individuals being moved to general population. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(c). The facility provides all incarcerated individuals with education regarding PREA at intake and during orientation. The PREA coordinator stated that all incarcerated individuals receive initial education at intake and then view the

comprehensive PREA video during orientation. The logs reviewed by the auditor showed attendance by all 330 incarcerated individuals housed for 30 days or more over the previous 12 months. The agency does not have any additional facilities, so additional PREA education is not required upon transfer.

The auditor interviewed 13 random incarcerated individuals, each in the facility for 30 or more days. Each incarcerated individual stated they had received the required education. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(d). The facility did not provide any information on this provision in the PAQ, other than to say that they provide incarcerated individual education in different formats on a case-by-case basis.

During the onsite phase of the audit, the auditor could see posters in each of the housing units and in several other locations that were provided in English and Spanish. The posters inform incarcerated individuals of their right to be free from sexual abuse and sexual harassment, free from retaliation for reporting abuse and that the agency would properly respond to incidents of such abuse. Also, the incarcerated individuals receive the *BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet* and the *BCSO Department of the Jail Inmate PREA Orientation Form*, available in Spanish for those that require it. The PREA coordinator did provide documentation for Standard 115.16 to show that the facility has access to the language line and to American Sign Language interpreters, if needed. When asked, the PREA coordinator stated that he could read a blind incarcerated individual the required PREA education if it was necessary. The auditor interviewed one incarcerated individual who spoke Spanish and he confirmed that the facility provided the education in Spanish for him to read. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(e). In the PAQ, the facility provided documentation that confirms an incarcerated individual's receipt of required PREA education. The signed property sheet in booking which is completed at intake also confirms receipt of the initial education. The auditor was supplied copies of these signed forms, and the auditor also reviewed these forms during the onsite phase of the audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(f). During the site review, the auditor could see many forms of PREA education readily available for incarcerated individuals. In all housing units there are signs posted in English and Spanish. These signs remind incarcerated individuals that sexual abuse is not tolerated and provide the hotline number, as well as the information for available counseling services. The incarcerated individuals all have access to the kiosk where they can access information about PREA and have access to a grievance to complete if needed. This same information is readily available on the incarcerated individual's tablet. Based on this analysis, the auditor finds the facility in compliance with this provision.

During the onsite audit, the incarcerated individuals interviewed all discussed the PREA video. Several of them were able to recite information directly from the video.

	<p>They told the auditor this is due to the facility's decision to show the video repeatedly in all the housing units. The video is shown on all televisions twice daily, morning and evening. At the time the video runs, the individuals are not given the opportunity to change the channel to avoid watching the video. This repetitive, ongoing education of the incarcerated population ensures that each of them receive information regarding the facility's zero-tolerance policy and reminds them that their sexual safety inside the facility is important. The decision to show the video daily is over and above what is required by the provision of this standard. Therefore, the auditor considers the agency to have exceeded this standard.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Training curriculum - <i>PREA: Investigating Sexual Abuse in a Confinement Setting</i> 3. Training certificates 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.34(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states, "Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations." Also included in the PAQ was the training curriculum of the investigations class provided to the agency investigators, <i>PREA: Investigating Sexual Abuse in a Confinement Setting</i>, which is provided by the National Institute of Corrections (NIC). The agency also provided copies of training certificates for three of the Sheriff's Office sexual abuse detectives.</p> <p>The auditor interviewed the security captain during the onsite phase of the audit. The lieutenant confirmed that he had taken the investigations course provided by the NIC and had successfully received his certificate. He stated that the agency also requires that the detectives from the law enforcement side of the Sheriff's Office also take the investigations course before they are asked to investigate allegations of sexual abuse in the facility. The auditor reviewed training records and verified that a total of three detectives had completed the NIC course. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

	<p>115.34(b). The facility provided in the PAQ copies of certificates received by Sheriff’s Office detectives. The class, entitled <i>PREA: Investigating Sexual Abuse in a Confinement Setting</i>, is provided by the NIC. This training curriculum is known to the auditor and includes modules related to the four points required under this provision of the standard.</p> <p>The auditor interviewed the security captain during the onsite phase of the audit. The lieutenant confirmed that he had taken the investigations course provided by the NIC and had successfully received his certificate. He stated that the agency also requires that the detectives from the law enforcement side of the Sheriff’s Office also take the investigations course before they are asked to investigate allegations of sexual abuse in the facility. The auditor reviewed training records and verified that a total of three detectives had completed the NIC course. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.34(c). The PREA coordinator maintains a file with written proof that supervisors in the facility and detectives have completed the online class. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.34(d). The auditor is not required to audit this provision.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Training curriculum - <i>PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting</i> 3. Training certificates 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.35(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states, “The facility shall insure that all full and part time medical care practitioners who work regularly in the facility have been trained in: a. How to detect and assess signs of sexual abuse and sexual harassment; b. How to preserve physical evidence of sexual abuse; c. How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and d. How and</p>

whom to report allegations or suspicions of sexual abuse and sexual harassment.”

During the onsite phase of the audit, the auditor interviewed the facility’s two medical staff members. Both staff members, nurses, confirmed completion of the basic PREA education as well as the specialized medical education required in this provision. They told the auditor that the education is provided online, and completion of the class is documented once completed. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(b). Medical staff at the facility do not perform forensic examinations. Any incarcerated individual who would require the forensic medical examination due to a sexual assault will be transported to a local hospital if the examination was necessary. Therefore, the facility medical staff do not receive training related to these exams. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(c). In the PAQ, the agency provided the training curriculum, *PREA: Medical Health Care for Sexual Assault Victims in a Confinement Setting*, which is provided by the National Institute of Corrections. The agency also provided copies of completion certificates for the agency’s two nurses and the contracted physician. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(d). The medical staff are employed by the corrections department and the physician is a contractor. All three confirmed completion of the basic PREA education as well as the required specialized medical PREA education.

Through interviews with both medical staff members, the auditor confirmed their completion of the basic education and the specialized education. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. BCSO Policy 50.02 Classification 3. BCSO Department of the Jail Initial PREA Screening 4. Initial Classification Form 5. Screening records 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff

2. Random incarcerated individuals
3. Site Review Observations:
 1. Intake/Booking
 2. Classification

Findings (by provision):

115.41(a). The facility supplied a copy of BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. This policy states, "All inmates/detainees entering the facility are immediately screened and classified by facility staff. Screening will be completed during the booking process and the recommendations will be reviewed by a first line supervisor for completeness and accuracy. When an inmate/detainee reports having been a victim of sexual assault/abuse staff shall refer the inmate/detainee to PREA review committee. They will assess the inmate/detainee's needs during incarceration and discuss available options when appropriate. Every inmate/detainee will complete the PREA Education and Screening questionnaire during the booking process to determine those inmate/detainees that may be at risk of being victimized."

During the onsite phase of the audit, the auditor met with the intake deputy and walked through the intake process as any incarcerated individual would. Near the end of the process, the deputy provided the auditor with the *BCSO Department of the Jail Initial PREA Screening* form and asked the auditor to complete the form and ask him questions if there were any. These steps were just as stated in the policy. The auditor confirmed with the intake deputy that this screening is completed for all newly incarcerated individuals when they enter the facility. The auditor interviewed 13 random incarcerated individuals and each incarcerated individual could recall being asked these specific questions during the intake process. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(b). BCSO *Policy 50.02 Classification* was provided in the PAQ. The policy states, "A PREA Education and Screening Checklist (BDCJ 50.02B) will be completed immediately during the booking process for all arrestees to determine the potential to be a sexual abuse victim or to engage in predatory behavior. The Booking Deputy indicates possible victim or predatory factors based on the inmate's age, appearance, stature, history or comments." Although the policy does not state this screening is to be performed within 72 hours, it does state that it is to be performed immediately, well before the 72-hour time period. In the PAQ, the facility stated that there were approximately 870 incarcerated individuals admitted to the facility whose length of stay was for at least 72 hours or more. Of those, all had completed the intake risk assessment.

The auditor reviewed several incarcerated individual files which all included the screening form during the onsite phase of the audit. Each of the forms reviewed were completed on the first day of the incarcerated individual's arrival in the facility.

During interviews with intake staff and the deputy assigned to assist with the risk screening process, it was confirmed that the screening of all incarcerated individuals is completed upon the incarcerated individual's arrival at the facility. Also, the auditor

interviewed 13 random incarcerated individuals and each incarcerated individual related that they completed the screening questionnaire on the day of their arrival in the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(c). The facility provided a copy of the screening tool to the auditor in the PAQ. The auditor reviewed the screening tool to determine if it was objective. The screening tool requires a simple yes or no answer to each of the questions and the scoring system is standard for everyone screened. Because the screening tool does not allow for subjective answers, the tool is objective. The outcome for potential to be victimized or become a predator is based on a standard scoring system. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(d). The facility provided a copy of the screening tool to the auditor in the PAQ. The screening tool lists each of the criteria listed in standard 115.41(d). Additionally, the screening tool provides space for the screener to add comments based on the observations of the screener regarding the incarcerated individual's potential for vulnerability. The tool asks the incarcerated individual for his or her feeling of safety while incarcerated. The tool also asks if the incarcerated individual shows unusual interest or focus on another incarcerated individual, is openly discriminatory of lesbian, gay, bisexual, transgender, or intersex, and if the incarcerated individual has a current criminal conviction of sexual violence or rape.

During the onsite phase of the audit, the auditor spoke with the deputy assigned to assist with the risk screening process. She explained that she speaks directly with the incarcerated individual to complete the screening tool and asks all the questions on the tool. She is encouraged to include comments regarding her observations regarding safety and vulnerability based on the conversation with the incarcerated individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(e). The screening tool provided to the auditor includes a section for the screener to note prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual abuse. These items are included to enable the screener to review those responses during the evaluation process. The screening tool provides space for the screener to add comments based on the observations of the screener regarding the incarcerated individual's potential for vulnerability. The tool asks the incarcerated individual for his or her feeling of safety while incarcerated. The tool also asks if the incarcerated individual shows unusual interest or focus on another incarcerated individual, is openly discriminatory of lesbian, gay, bisexual, transgender, or intersex, and if the incarcerated individual has a current criminal conviction of sexual violence or rape. The objective screening tool includes all the required items listed in the standard.

The auditor interviewed the deputy assigned to assist with the risk screening process during the onsite phase of the audit. She confirmed that the screening tool includes questions about an incarcerated individual's prior acts of sexual abuse, prior convictions for violent offenses and history of prior institutional violence or sexual

abuse. It was explained to the auditor that the screening process begins with the intake officer. The screening is completed in person with each incarcerated individual. The auditor was told that this is necessary to verify that incarcerated individuals with a potential to be a predator will not be housed with incarcerated individuals with a potential to be a victim. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(f). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided in the PAQ. The policy states, "All inmates will be reassessed for victimization or abusiveness within 30 days utilizing all available information since intake." The screening tool provided to the auditor includes a section for staff to complete during that reassessment.

The auditor interviewed the deputy assigned to assist with the risk screening process during the onsite phase of the audit. She confirmed that incarcerated individuals are reassessed within the 30-day time period, which is completed by the PREA compliance manager. The auditor was provided several completed screening forms for incarcerated individuals that were in custody and the auditor was able to confirm completion of the reassessment. The auditor interviewed the PREA compliance manager, and she confirmed tracking individuals' time in custody to ensure completing the reassessment within the 30 days. In the PAQ, the facility noted approximately 330 individuals admitted and still in custody for at least 30 days. Each of those individuals had been reassessed.

During interviews with 13 random incarcerated individuals, the auditor asked if they were asked additional follow-up questions from the risk screening, and each confirmed this reassessment. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(g). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Additionally inmates will be reassessed anytime additional information is received that bears on the inmates' risk of sexual victimization/abusiveness."

The auditor interviewed the deputy assigned to assist with the risk screening process during the onsite phase of the audit. She stated that they will reassess an incarcerated individual at any time based on information that is received from other staff, incarcerated individuals or through incident reports. During interviews with 13 random incarcerated individuals, the incarcerated individuals stated they were not familiar with this process, but they did recall being asked follow-up questions by medical, classification staff, and the PREA compliance manager. The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months during the onsite phase of the audit. Each file showed an assessment of the incarcerated individuals involved in the investigation. The auditor was not able to view additional documentation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(h). In the PAQ, the facility provided BCSO *Policy 50.02 Classification*. The policy states, "Inmates may refuse to answer and will not be disciplined for refusing

to answer or for not disclosing complete information concerning the following: if they have a mental, physical or development disability; whether or not they are or are perceived to be gay, lesbian, bisexual, transgender, intersex or gender non-conforming, whether or not they have previously experienced sexual victimization and their own perception of vulnerability.”

The auditor interviewed the deputy assigned to assist with the risk screening process during the onsite phase of the audit. She stated although she cannot recall a case where an incarcerated individual has refused to answer questions for the screening tool, they would not discipline the incarcerated individual if he or she chose not to answer the questions. Although the responses were important for staff to be able to safely house incarcerated individuals, the facility could still safely house an incarcerated individual without the responses, but with additional monitoring for incarcerated individual safety. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(i). In the PAQ, the facility provided *BCSO Policy 50.02 Classification*. The policy states, “Normally, most questions are answered by the arrestee when s/he fills out the Booking Information sheet or by reviewing Jail, MNI, and FCIC information. If follow-up questions are necessary for items marked on the Booking Information sheet, it is critical to show sensitivity and discretion. For example, have someone of the same gender ask the questions. Also, make sure no other inmates are present during the interview. It is equally important to tell arrestees before they begin the screening that they are not required to answer the questions. Some people are uncomfortable answering sexual orientation questions; do not press them for answers. Screening forms and information will be handled as discreetly as possible so that the information is not exploited to the inmate’s detriment by others.” The facility also provided *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. The policy states, “In order to control dissemination of sensitive information, inmate files will be kept in a secure location in the facility’s booking office and records office with only those staff who are conducting official duties having access to the contents.”

During the onsite phase of the audit, the auditor spoke with the PREA coordinator, PREA compliance manager and risk screening deputy. All confirmed that the information in the screening tool was only available for review by the PREA coordinator, the PREA compliance manager, the jail administrator, and classification staff. During the site review, the auditor asked several random staff members to provide the auditor with this information and no staff could provide the auditor with the information or access in the computer. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. BCSO Policy 50.02 Classification
 3. Screening records
2. Interviews:
 1. Specialized staff
 2. Targeted incarcerated individuals

Findings (by provision):

115.42(a). In the PAQ, the facility provided BCSO Policy 50.02 Classification. The policy states, "The Shift Supervisor will evaluate the information and designate "victim" or "predator" status (known, potential, or none) and list the initial bed assignment. If the bed assignment is anything other than "regular" a copy of form is sent to the Assistant Commander for review and follow-up. All information received from initial intake will be used to make informed decisions when dealing with all aspects of incarceration including bed assignment, work, education, and program assignments with the goal of keeping separate those who are a high risk of being sexually victimized from those at high risk of being sexually abusive."

During the onsite phase of the audit, the auditor interviewed the risk screening deputy and the PREA compliance manager. They both confirmed that housing assignments, classification, and access to programs are all impacted by the information derived from the risk screening. The auditor reviewed several completed screening assessments and could see the final determination for housing was obtained through this document. Therefore, the outcome of the incarcerated individual screening is utilized to safely house, classify, and schedule incarcerated individual programs. The PREA coordinator also confirmed that incarcerated individual screening is utilized for housing and classification decisions. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(b). The facility provided BCSO Policy 50.02 Classification in the PAQ. This policy states, "Staff shall make individualized determinations about how to ensure the safety of each inmate/detainee."

During the onsite phase of the audit, the auditor interviewed the risk screening deputy and the PREA compliance manager. They both confirmed that housing assignments, classification, and access to programs are all impacted by the information derived from the risk screening. The auditor reviewed several completed screening assessments and could see the final determination for housing was obtained through this document. Therefore, the outcome of the incarcerated individual screening is utilized to safely house, classify, and schedule incarcerated individual programs. These housing decisions are determined on an individual basis. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(c). The facility provided *BCSO Policy 50.02 Classification* in the PAQ. This policy states, “Transgender or Intersex inmate/detainee should always be placed in isolation pending review of all factors relevant to the inmate/detainee by the PREA review committee who shall make any final recommendations for housing and program assignments on a case-by-case basis.”

During the onsite phase of the audit, the auditor interviewed the PREA compliance manager, who confirmed that transgender incarcerated individuals are reviewed on a case-by-case basis, which is consistent with the policy. During the risk screening process, they would take into account the transgender incarcerated individual’s own perceptions regarding his or her own safety and where he or she would feel safest for housing. Consideration for housing is not based strictly on genitalia. The auditor was able to review the risk screening for three transgender incarcerated individuals. The auditor was unable to interview any transgender individuals regarding this provision, as there were no transgender individuals housed in the facility at the time of the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(d). The auditor interviewed the risk screening deputy and the PREA compliance manager during the onsite phase of the audit. Both confirmed that this review would be performed at least twice per year for the safety of any transgender person or intersex incarcerated individual. The auditor was unable to interview any transgender individuals regarding this provision, as there were no transgender individuals housed in the facility at the time of the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(e). The auditor interviewed the risk screening deputy and the PREA compliance manager during the onsite phase of the audit. Both confirmed that incarcerated individuals are reviewed on a case-by-case basis, which is consistent with the policy. They would take into account the transgender incarcerated individual’s own perceptions regarding his or her own safety and where he or she would feel safest for housing. Consideration for housing is not based strictly on genitalia. The auditor was able to review the risk screening for three transgender incarcerated individuals. The auditor was unable to interview any transgender individuals regarding this provision, as there were no transgender individuals housed in the facility at the time of the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(f). The auditor interviewed the risk screening deputy and the PREA compliance manager during the onsite phase of the audit. Both confirmed that all transgender incarcerated individuals are provided the opportunity to shower separately from the general incarcerated individual population.

The auditor was unable to interview any transgender individuals regarding this provision, as there were no transgender individuals housed in the facility at the time of the onsite audit. The PREA coordinator was asked about showers, and he confirmed that transgender or intersex incarcerated individuals would be provided a shower separate from the other incarcerated individuals. Based on this analysis, the

	<p>auditor finds the facility in compliance with this provision.</p> <p>115.42(g). The auditor interviewed the PREA compliance manager and the PREA coordinator during the onsite phase of the audit. Both stated that the facility does not have a housing unit dedicated for lesbian, gay, or transgender individuals. They also confirmed that there is no consent decree or legal determination in place that would allow the facility to designate a housing specifically for lesbian, gay, and transgender individuals.</p> <p>During the onsite audit, the auditor confirmed that there were no housing units specifically assigned to incarcerated individuals in the LGBT community. The auditor interviewed four homosexual individuals during the onsite audit. All four confirmed that they are housed in general population and are not housed in separate LGBT housing. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. BCSO Policy 50.03 Housing 3. Screening records 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Segregated housing units <p>Findings (by provision):</p> <p>115.43(a). In the PAQ, the facility provided BCSO Policy 50.03 Housing. The policy states, “Depending on the circumstances, the Jail Administration, medical staff or PREA Review Committee will develop a plan for housing and supervising other special needs inmates including those at high risk for sexual victimization or who have alleged to have suffered sexual abuse. Inmates/detainees in this group will not be housed long term in involuntary segregation unless a determination has been made that there is no available alternative means for separation and safety.” In the PAQ, the facility indicated that six (6) individuals were housed in segregated housing for their safety for a period less than 24 hours while the agency completed assessment</p>

to determination housing.

During the onsite phase of the audit, the auditor reviewed screening records for several incarcerated individuals who were assessed to be at a high risk for victimization. None of the incarcerated individuals were housed involuntarily in a segregation housing unit. The auditor was unable to identify any incarcerated individual housed in segregation due to their high risk for sexual victimization. The auditor interviewed the jail administrator who confirmed that the facility would not place incarcerated individuals in involuntary segregation to keep the incarcerated individuals safe in custody. The auditor was told that incarcerated individuals may request protective custody to remain safe, and if this is approved, the placement is documented properly. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(b). During the onsite phase of the audit, the auditor interviewed a staff member that works in the segregated housing unit. It was confirmed that the facility provides segregated incarcerated individuals full access to programs and services, just as any other incarcerated individual. The auditor spoke with incarcerated individuals that were housed in segregation and learned that incarcerated individuals can receive mail, have visitation, go to programs, and receive commissary. There were no incarcerated individuals currently in custody who had been placed in involuntary segregation based on their high risk for sexual victimization. The auditor could not confirm their access to services and programs. During the site review, the auditor walked through segregated housing units and verified incarcerated individual access to telephones and mailboxes. The auditor also located grievance forms available on the kiosk. The PREA coordinator confirmed that use of segregation is limited and used as a last resort. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(c). *BCSO Policy 50.03 Housing* states, "A review of the inmate/detainee's continued housing in involuntary segregation will be reviewed every 30 days to determine if there is a continuing need for separation from the general population." In the PAQ, the facility indicated that there were no individuals held in segregation for at least 30 days during the 12 months prior to the onsite audit.

During the onsite phase of the audit, the auditor interviewed the PREA coordinator and the jail administrator. Both confirmed that incarcerated individuals in segregation were reviewed at least once per month to determine if they would remain in segregated housing or if other alternatives were available. There were no incarcerated individuals in custody who were at high risk for sexual victimization and, consequently, none housed in segregation. The auditor interviewed a deputy who works in the segregated housing unit. He stated that the agency reviews individuals in segregation monthly to determine if they should remain in segregation and, if so, what restrictions of facility programs, privileges, and education is necessary. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(d). The auditor reviewed the files for six (6) individuals held in segregation for up to 24 hours while the agency made a determination for their safe housing. The

file indicated the reason for the housing in segregation. There were no notations for restrictions of programs and privileges because the individuals were all moved to general population within 24 hours. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(e). In the PAQ, the auditor was provided BCSO *Policy 50.03 Housing*. The policy states, “A review of the inmate/detainee’s continued housing in involuntary segregation will be reviewed every 30 days to determine if there is a continuing need for separation from the general population.”

During the onsite phase of the audit, the auditor interviewed the PREA coordinator and the jail administrator. Both confirmed that incarcerated individuals in segregation were reviewed at least once per month to determine if they would remain in segregated housing or if other alternatives were available. There were no incarcerated individuals in custody who were at high risk for sexual victimization and, consequently, none housed in segregation. The auditor interviewed a deputy who works in the segregated housing unit. He stated that the agency reviews individuals in segregation monthly to determine if they should remain in segregation and, if so, what restrictions of facility programs, privileges, and education is necessary. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. <i>Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center</i> 2. Interviews: <ol style="list-style-type: none"> 1. Random staff 2. PREA coordinator 3. Random incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Housing units <p>Findings (by provision):</p> <p>115.51(a). In the PAQ, the auditor was provided BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i>. This policy states, “The Bradford County Jail County shall</p>

provide multiple internal ways (request form, grievance form, verbal reporting to staff) for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse/sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.”

During the onsite phase of the audit, the auditor completed a site review and visited all housing units. Signs informing incarcerated individuals of the multiple reporting ways were clearly posted, in two languages, in each housing unit. The auditor asked an incarcerated individual to make a test complaint on the kiosk during the site review. The individual immediately pushed the PREA Alert button on the kiosk and the supervisors escorting the auditor were immediately notified on their cell phones.

The auditor interviewed 13 random incarcerated individuals and all incarcerated individuals could easily tell the auditor several ways that they could report abuse, harassment and concerns regarding staff neglect or lack of responsibility. The auditor interviewed 10 random staff members. All staff could list at least four different ways that incarcerated individuals could report abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51(b). In the PAQ, the auditor was provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. This policy states, “The Bradford County Jail shall also provide inmate/detainees a way to report abuse or harassment to a public or private entity or office that is not part of the agency, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. Our facility has a Memorandum of Understanding with Alachua County Victim Services and Rape Crisis Center. Contact information for the Crisis Center is posted in all housing areas and provided on the Information for New Inmates /Information for Transient Inmates forms which are given during intake.” The policy also states, “Detainees shall be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.” The facility provided a copy of a *Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center (MOU)* in the PAQ. This MOU notes the availability of an outside reporting source for incarcerated individuals to report sexual abuse. The calls are taken by on-call staff at the Alachua Rape Crisis Center, as they do calls from the public. The auditor contacted the program director at the Alachua Rape Crisis Center, who confirmed the MOU is in place and center staff do take calls if an incarcerated individual were to contact them directly. If they receive a hotline call alleging sexual abuse or sexual harassment, they log the call, document the information received, then contact the PREA coordinator or a shift supervisor to provide the call information. Signs posted in the facility provide incarcerated individuals with the hotline number. The facility does house incarcerated individuals solely for civil immigration and the policy directs those individuals to contact the Department of Homeland Security.

During the onsite phase of the audit, the auditor interviewed the PREA compliance manager, who confirmed the existence of the MOU and that all calls from incarcerated individuals to report sexual abuse are directed to the Alachua Rape

Crisis Center. The auditor interviewed 13 random incarcerated individuals and they all stated that they were able to call the center to report abuse. Based on this analysis, the auditor finds the facility in compliance with this standard.

115.51(c). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. This policy states, “Reports may be made verbally, in writing, anonymously, or from third parties. Staff shall promptly prepare an incident report to document all reports, including verbal reports, of sexual abuse/harassment. The incident report should be completed as soon as possible, but no later than the end of the shift.”

During the onsite phase of the audit, the auditor interviewed 10 random staff members. All staff interviewed were aware of their responsibility to take verbal reports of abuse and immediately contact a supervisor to file that report. There was one staff member that reported having received a verbal allegation from an incarcerated individual. The officer reported to the auditor that he immediately contacted the shift supervisor, separated the victim from the abuser, secured the crime scene, ensured that each incarcerated individual was unable to destroy potential evidence, then immediately wrote an incident report of the verbal report from the incarcerated individual. Each of the 13 random incarcerated individuals interviewed were aware that they could report sexual abuse directly to any staff member. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51(d). In the PAQ, the auditor was provided with BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. This policy states, “Bradford County Jail County staff members may privately report sexual abuse and sexual harassment of inmates directly to a BCSO Investigator or Corrections Bureau Chief verbally, in writing, or email.”

The auditor interviewed 10 random staff members. All 10 deputies easily described the avenues available to privately report incidents sexual abuse and sexual harassment. Each deputy said they would just go directly to their immediate supervisor or to PREA compliance manager. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	<ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>)

1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. BCSO Inmate Handbook
 3. Sexual Abuse Investigation Files
2. Interviews:
 1. Specialized staff
 2. Targeted incarcerated individuals

Findings (by provision):

115.52(a). The agency is not exempt from this standard, as it does have in place an administrative grievance procedure for incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(b). In the PAQ, the auditor was provided with BCSO Policy 40.11 Prison Rape Elimination Act (PREA). This policy states, "An inmate/detainee who alleges sexual abuse may submit a grievance without submitting it to the staff member who is the subject of the complaint, and such grievance will not be referred to the staff member who is the subject of the complaint to respond back to the inmate. The inmate may submit the grievance at any time regardless of when the incident is alleged to have occurred." Information regarding the institution's policy for grievances is listed clearly in the *BCSO Inmate Handbook*.

During the onsite phase of the audit, the auditor spoke with several staff members during the site review. Staff were aware that incarcerated individuals could file a grievance in order to make an allegation of sexual abuse. The paper grievances were easily accessible to all incarcerated individuals by asking a deputy to provide one. The auditor also spoke with several incarcerated individuals during the site review. All the incarcerated individuals stated clearly that they could file a grievance for an allegation of sexual abuse. They all knew how to access the incarcerated individual kiosk and how to locate the grievance. The auditor interviewed the PREA compliance manager, and she described the process for grievances in the facility. Paper grievances are placed in locked boxes in each housing unit. They are collected daily and sorted then logged in with a short description of the subject of the grievance. Any grievance that mentions sexual abuse or sexual harassment is immediately pulled for investigation and marked as emergency grievances. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(c). The auditor was provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA) in the PAQ. The policy states, "An inmate/detainee who alleges sexual abuse may submit a grievance without submitting it to the staff member who is the subject of the complaint, and such grievance will not be referred to the staff member who is the subject of the complaint to respond back to the inmate."

During the site review, the auditor completed an interview with the PREA compliance manager, who confirmed that incarcerated individual grievances referencing sexual abuse would never be referred to the subject staff member, would not be held to a time frame for filing the grievance, and could be submitted to any staff member other than the subject of the grievance. Based on this analysis, the auditor finds the facility

in compliance with this provision.

115.52(d). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, “Grievances concerning sexual abuse/sexual harassment will be responded within 90 days of the filing date of the grievance.”

The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months during the onsite phase of the audit. The auditor identified three (3) allegations submitted by an incarcerated individual grievance. Each of the investigations was completed timely and responses to the grievances were provided within the required time frame. There were no requests for additional time to complete the investigation. The auditor interviewed one individual who had filed an allegation of sexual abuse during the onsite audit. The individual reported his allegation verbally and not by submitting a grievance. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(e). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, “The inmate is allowed assistance from third parties (fellow inmates, staff, family member, attorney, outside advocates) in preparing the grievance request.” In the PAQ, the facility indicated there were no such grievances submitted during the 12 months prior to the onsite audit.

The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months during the onsite phase of the audit. The auditor identified three (3) allegations submitted by an incarcerated individual grievance. None of the grievances were submitted by a third party. Therefore, the auditor was not able to confirm this process. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(f). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, “However, an emergency grievance may be submitted by the inmate if they feel they are subject to substantial risk of imminent sexual abuse. Such cases will be resolved immediately upon receipt by staff and the emergency grievance answered no later than 48 hours. The PREA Review Committee will review the issue and reach a final decision on resolution of the issue within 5 days.” In the PAQ, the facility indicated there were no such grievances submitted during the 12 months prior to the onsite audit.

The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months during the onsite phase of the audit. The auditor identified three (3) allegations submitted by an incarcerated individual grievance. None of the grievances indicated that the individual was at imminent substantial risk of sexual abuse. Therefore, the auditor was not able to confirm this process. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(g). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “For the purpose of disciplinary actions, a report/grievance of sexual abuse made in good faith based upon a reasonable believe

that the alleged conduct occurred shall not constitute a false report of an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. Disciplinary action will only be taken only at the direction of the Assistant Commander based on demonstration that the report/grievance was filed in bad faith.”

The auditor reviewed the facility’s six (6) sexual abuse investigation files from the previous 12 months during the onsite phase of the audit. The auditor noted no discipline for incarcerated individuals for filing allegations that are found to be unfounded. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.53 Inmate access to outside confidential support services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center
 3. BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet
 4. Inmate Rules
2. Interviews:
 1. Specialized staff
 2. Random incarcerated individuals
 3. Targeted incarcerated individuals
3. Site Review Observations:
 1. Housing units
 2. Kiosks

Findings (by provision):

115.53(a). The facility provided information from BCSO Policy 40.11 Prison Rape Elimination Act (PREA) in the PAQ. The policy states, “The facility shall provide inmate/detainees with access to outside victim advocate services for emotional support related to sexual abuse by giving inmate/detainees mailing addresses and telephone numbers for such services available. Communication with advocate services will be in as confidential a manner as possible.” In the PAQ, the facility also provided the auditor with a copy of the *Memorandum of Understanding Between*

Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center (MOU).

This MOU clearly identifies that the Alachua Rape Crisis Center will provide emotional support services for those incarcerated individuals that may need it. It provides the opportunity for incarcerated individuals to either write to or call advocates at the center and receive a written response or talk directly with an advocate. The MOU discusses the limitations on confidentiality and the requirements to notify the facility regarding safety and indications of self-harm or if the incarcerated individual is attempting to file an allegation rather than seeking support services.

During the onsite phase of the audit, the auditor interviewed 13 random incarcerated individuals. All but one of the 13 incarcerated individuals were able to explain to the auditor what the emotional support services were and how to obtain those services.

They knew that it was posted on the signs in the housing unit and in the other material provided at intake. The other incarcerated individual had been in the facility for a lengthy time period, and he stated that he may have been told and may have forgotten. The auditor also interviewed two incarcerated individuals who had reported prior sexual abuse during the risk screening. Both incarcerated individuals were aware of the available support services, as it was posted on the signs in the housing unit. Neither of them needed to use the services, but they knew they could either call or write to them. During the site review, the auditor located the zero tolerance signs in each of the housing units. At the bottom of each of the signs, emotional support services were clearly outlined for all incarcerated individuals to see. The signs explain the service, the mailing address, and the phone number in an easy-to-read manner. Several incarcerated individuals were able to show the auditor the same information on the kiosk in the housing unit, where it was explained the limitations regarding privacy and confidentiality. This information was also found in the BCSO Sexual Assault Prevention and Reporting Offender Information Leaflet.

Based on this analysis, the auditor finds the facility in compliance with this provision.

115.53(b). The facility provided information from BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. The policy states, "The facility shall inform inmate/detainees, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws." The MOU discusses the limitations on confidentiality and the requirements to notify the facility regarding safety and indications of self-harm or if the incarcerated individual is attempting to file an allegation rather than seeking support services. These limitations are also listed in the *Inmate Rules*.

During the onsite phase of the audit, the auditor interviewed 13 random incarcerated individuals. All but one of the 13 incarcerated individuals were able to explain to the auditor what the emotional support services were and how to obtain those services.

They knew that it was posted on the signs in the housing unit and in the other material provided at intake. They also knew the limitations to privacy and understood that the center staff were required to report certain information back to the facility. The auditor also interviewed one individual who reported an allegation of sexual abuse. He was informed following the incident about the availability of the

emotional support services and elected not to contact them for assistance. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.53(c). In the PAQ, the facility provided the auditor with a copy of the *Memorandum of Understanding Between Bradford County Sheriff's Office Department of the Jail and Alachua County Board of County Commissioners, on Behalf of Victim Services and Rape Crisis Center*. This MOU clearly identifies that the Alachua Rape Crisis Center will provide emotional support services for those incarcerated individuals that may need it. It provides the opportunity for incarcerated individuals to either write to or call advocates at the center and receive a written response or talk directly with an advocate. The MOU had been in place for several years and has been renewed annually several times. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.54 Third-party reporting

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. Online reporting form

Findings (by provision):

115.54(a). The facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. The policy states, “. The Bradford County Jail County shall provide multiple internal ways (request form, grievance form, verbal reporting to staff) for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse/sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Reports may be made verbally, in writing, anonymously, or from third parties.” Zero tolerance signs posted throughout the facility inform incarcerated individuals that a third party may file an allegation of sexual abuse on their behalf. There are also signs in the facility lobby for members of the public to see as well as those people coming to the facility for visitation. On the Bradford County Sheriff’s Office website, on the web page dedicated to PREA information, there is an online reporting form, which can be found at https://www.bradfordsheriff.org/wp-content/uploads/Prison_Rape_Elimination_Act_notice-1.pdf. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Random staff <p>Findings (by provision):</p> <p>115.61(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). This policy states, “Once an inmate/detainee or other person has alleged sexual assault/abuse or retaliation due to reporting sexual assault/abuse to a Deputy, verbally or in writing, the Deputy must immediately inform an on-duty Supervisor so that proper assessment and reporting procedures can begin. Staff shall immediately report any knowledge, suspicion, or information regarding an incident of sexual abuse/ harassment that occurred in a facility, even if not part of BCJ and/or retaliation against inmates or staff who reported such an incident; and/or any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.”</p> <p>During the onsite phase of the audit, the auditor interviewed 10 random staff members. Every person interviewed clearly stated that they were required to immediately report all allegations of sexual assault or sexual harassment, regardless of the type of allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.61(b). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “Apart from reporting to designated supervisors or investigators, staff shall not reveal any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency guidelines, to make treatment, investigation, and other security and management decisions.”</p> <p>Random staff interviewed clearly understood the requirement to maintain confidentiality of sexual assault and sexual harassment cases. Each of the 10 random staff members interviewed reported that they were only allowed to discuss these cases with people who needed to know the information for official business. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.61(c). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “Unless otherwise precluded by Federal,</p>

State, or local law, medical and mental health practitioners shall be required to report sexual abuse and to inform inmate/detainees of the practitioner’s duty to report, and the limitations of confidentiality, at the initiation of services.” The State of Florida requires mandatory reporting of incidents of sexual abuse of an incarcerated individual under Florida State Statute 944.35(3)(d). This law does not provide an exception for medical and mental health practitioners and all staff members of the jail are required to immediately report all incidents.

During the onsite phase of the audit, the auditor interviewed two staff members from the medical department, both nurses. Both confirmed that they are mandatory reporters of sexual abuse of incarcerated individuals. Staff did confirm that they would inform the incarcerated individual of their duty to report and limits to the confidentiality of information learned from the incarcerated individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(d). BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, “If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable person statute, the Corrections Bureau Chief shall ensure a report of the allegation is made to any designated State or local services agency as may be applicable and in compliance with any mandatory reporting laws.” In the State of Florida, staff are required to report allegations of sexual abuse of a person under the age of 18 to the Florida Department of Children and Families (DCF).

The auditor interviewed the jail administrator and the PREA coordinator. They both confirmed that DCF would immediately be notified of any allegation of sexual abuse of a youthful offender housed in the facility. The auditor was told the detective investigating the allegation would make the notification, as he would for any person under the age of 18 in the community. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(e). In the PAQ, BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* states, “All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, will be reported to the Assistant Commander, Commander and/or Corrections Bureau Chief for review and investigation or the report will be forwarded by the Corrections Bureau Chief to the BCSO Investigative Division.”

The auditor interviewed the jail administrator who confirmed that the facility investigates all allegations of sexual abuse and sexual harassment. All allegations are forwarded to the investigators at the Sheriff’s Office or will be assigned to professional standards if the alleged abuser is a staff member. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Random staff <p>Findings (by provision):</p> <p>115.62(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states “When staff is made aware that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect that inmate/detainee.” In the PAQ, the facility noted there were no such notifications that an individual was at a substantial risk of imminent sexual abuse.</p> <p>The auditor interviewed the PREA coordinator and the jail administrator during the onsite phase of the audit. They made it clear that all staff members are directed to immediately take action to protect any incarcerated individual if they become aware that he or she is in imminent danger of being abused. The auditor interviewed 10 random staff members. All stated that they always react immediately if they see someone in imminent danger. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Interviews: <ol style="list-style-type: none"> 1. Agency head 2. Specialized staff <p>Findings (by provision):</p> <p>115.63(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape</p>

Elimination Act (PREA). The policy states, "Upon receiving an allegation that an inmate/detainee was sexually abused while confined at another facility, the Corrections Bureau Chief or his designee shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred." In the PAQ, the facility stated that there were no such notifications in the previous 12 months prior to the audit.

115.63(b). In the PAQ, the facility provided *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Such notification shall be provided as soon as possible, but no later than 72 hours after receiving the allegation."

115.63(c). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* states, "Documentation shall be maintained stating that such notification has been made."

The auditor was unable to verify such notifications, as there were none during the previous 12 months prior to the PREA audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.63(d). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)*, provided to the auditor in the PAQ, states, "Upon notification from a different confinement facility to the Bradford County Jail that a sexual assault has occurred in the Bradford County Jail, the Corrections Bureau Chief shall ensure that the allegation is investigated in accordance with PREA standards." In the PAQ, the facility stated that there were no such notifications from another agency in the previous 12 months prior to the audit.

During the onsite phase of the audit, the auditor interviewed the jail administrator. Asked about the next steps if she received an allegation from another facility, she stated clearly that it would be immediately forwarded to the PREA coordinator to begin an investigation. She also stated that there had not been such a notification over the previous 12 months. The PREA coordinator confirmed that he was unaware of any such notifications from another facility in the previous 12 months preceding the audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. Interviews:

1. Targeted incarcerated individuals
2. Specialized staff
3. Random staff

Findings (by provision):

115.64(a). The facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. The policy states, “Upon learning of an allegation that an inmate/ detainee was sexually abused, the first security staff member to respond to the report shall be required to: 1. Separate the alleged victim and abuser; 2. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; 3. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating; 4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking or eating.” In the PAQ, the facility indicated that there were eight (8) allegations of sexual abuse reported where the first responder took the appropriate actions. There were no cases that were reported within a time frame that would allow for the collection of evidence.

The auditor interviewed 10 random staff members during the onsite phase of the audit. Each person interviewed easily provided the auditor with these initial first responder steps. The auditor interviewed one staff member who was a first responder to an allegation of abuse. He confirmed that the required steps were taken to protect the crime scene, separate the two incarcerated individuals and preserve physical evidence. The auditor also interviewed one incarcerated individual who had filed an allegation of sexual abuse. The incarcerated individual recalled being separated from all incarcerated individuals in the housing unit and being asked to avoid doing things to destroy potential evidence. The auditor reviewed the investigation file from his allegation and was able to confirm documentation of the steps taken following the incarcerated individual’s allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.64(b). In the PAQ, the auditor reviewed BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “If the first staff responder is not a security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff.” In the PAQ, the facility indicated that there were no allegations of sexual abuse reported where the first responder was a non-security staff member.

During the onsite phase of the audit, the auditor talked with several staff members during the site review. Every individual easily recited these initial steps to take as a first responder, including non-security staff members. The auditor interviewed 10 random staff members and all staff knew the first response steps to ensure safety for incarcerated individuals and proper investigations. Based on this analysis, the

	auditor finds the facility in compliance with this provision.
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>Bradford County Corrections Bureau Coordinated Sexual Abuse Response Team Protocol</i> 2. <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency head <p>Findings (by provision):</p> <p>115.65(a). The facility provided <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> in the PAQ. The policy states, “If an inmate/detainee alleges sexual assault/abuse, a swift and coordinated response is necessary. Investigations, (criminal or administrative), will be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.” The auditor was provided with the <i>Bradford County Corrections Bureau Coordinated Sexual Abuse Response Team Protocol</i>. The Protocol is detailed and lists the specific responsibilities for the first responder, the jail supervisor or administrator, the jail medical staff, the rape crisis center and victim advocate, and the law enforcement investigator. The protocol also outlines immediate steps to take for several incidents, including when someone is reported to be at risk of imminent sexual abuse and following an alleged incident of sexual abuse with or without the need for a forensic medical examination, as well as the follow-up to such an incident.</p> <p>During the onsite phase of the audit, the auditor reviewed the steps of the coordinated response plan with the jail administrator and the PREA coordinator. It was confirmed that all areas of the facility work together in response to any incident, including sexual abuse allegations. The PREA coordinator stated that the coordinated response plan is referenced for any response to a sexual abuse allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard

	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. None 2. Interviews: <ol style="list-style-type: none"> 1. Agency head <p>Findings (by provision):</p> <p>115.66(a). The Bradford County Jail does not participate in collective bargaining with their staff. It was confirmed through an interview with the jail administrator during the onsite portion of the audit that there was no collective bargaining agreement in place for staff. The auditor did confirm, however, that the agency would allow for the PREA provision if the agency moved toward a collective bargaining agreement for staff in the future. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.66(b). The auditor is not required to audit this provision.</p>
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115.67	Agency protection against retaliation
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Targeted incarcerated individuals 2. Agency head 3. Specialized staff <p>Findings (by provision):</p> <p>115.67(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states, "The facility will protect all inmates and staff who report sexual abuse/ sexual harassment, or cooperate with sexual abuse/ sexual harassment investigations, from intimidation or retaliation by other inmate/ detainees or staff. Classification will be responsible for the monitoring the conduct or</p>

treatment of inmates/detainees or staff who report sexual abuse or inmates who were reported to have suffered sexual abuse, for possible intimidation/retaliation.” The Classification Sergeant is the individual who is charged with monitoring individuals for potential retaliation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(b). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “Protection measures may include but are not limited to: housing changes or transfers for inmate/detainee victims or abusers, removal of alleged staff or inmate/detainee abusers from contact with the victims, and emotional support services.”

Through interviews with the Classification Sergeant, the auditor was able to confirm the use of these measures to protect incarcerated individuals and staff from retaliation. The auditor interviewed the jail administrator, who stated that they would take advantage of every opportunity to protect reporters of abuse from potential retaliation. The auditor also interviewed one incarcerated individual who had filed an allegation of sexual abuse. The incarcerated individual was able to recall being asked about retaliation after the initial investigation. He reported no issues with retaliation. The auditor reviewed his sexual abuse investigation file during the onsite audit and located the retaliation monitoring records. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(c). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) states, “Monitoring will last for a period of (90) days to include: any inmate disciplinary reports, housing changes, program changes, or any negative performance reviews or reassignments of staff. Any finding of intimidation/retaliation shall be reported to the Corrections Bureau Chief who will ensure prompt actions are taken to remedy the issue.

Monitoring shall include periodic status checks. Monitoring may be continued beyond (90) days if the initial monitoring indicates a continued need for such.” The facility indicated there were no incidents of reported retaliation during the 12 months prior to the onsite audit.

During the onsite phase of the audit, the auditor interviewed the Classification Sergeant, who stated that she meets with incarcerated individuals as needed to verify there are no concerns. She could not recall a time when an incarcerated individual expressed a concern regarding retaliation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(d). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) states, “Monitoring shall include periodic status checks.”

During the onsite phase of the audit, the auditor interviewed the Classification Sergeant. The Sergeant confirmed periodic checks of incarcerated individuals to verify their safety and well-being. These checks are documented and placed in the incarcerated individual’s investigations file. The auditor also interviewed one incarcerated individual who had filed an allegation of sexual abuse. The incarcerated individual was able to recall being asked about retaliation after the initial investigation. He reported no issues with retaliation. The auditor reviewed his sexual

	<p>abuse investigation file during the onsite audit and located the retaliation monitoring records, which showed the periodic checks. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.67(e). BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> states, “If any other individual who cooperates with an investigation expresses a fear of retaliation, the agency shall take appropriate measures to protect that individual against retaliation.”</p> <p>During the onsite phase of the audit, the auditor interviewed the jail administrator. She confirmed that the facility would take immediate action against any incarcerated individual or staff member if it was proven they had retaliated against another person due to their participation in sexual abuse investigations. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.67(f). The auditor is not required to audit this provision.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. BCSO <i>Policy 50.03 Housing</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Random staff 3. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Segregated housing <p>Findings (by provision):</p> <p>115.68(a). In the PAQ, the facility provided BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i>. The policy states, “Inmate/detainees who are placed in Administrative or Protective custody may have this as a permanent status if it is determined that they have been sexually assaulted and assessment of all available alternatives determines there are no additional options for separation from likely abusers.” The auditor was also provided with BCSO <i>Policy 50.03 Housing</i> in the PAQ. The policy states, “Depending on the circumstances, the Jail Administration, medical staff or PREA Review Committee will develop a plan for housing and supervising other</p>

special needs inmates including those at high risk for sexual victimization or who have alleged to have suffered sexual abuse. Inmates/detainees in this group will not be housed long term in involuntary segregation unless a determination has been made that there is no available alternative means for separation and safety.”

During the onsite review, the auditor interviewed several people to review this standard. The PREA coordinator confirmed the availability of administrative confinement that can be utilized to keep an individual safe following the filing of an allegation of sexual abuse. The auditor interviewed one incarcerated individual that had filed an allegation of sexual abuse. He was currently housed in general population, but he had been offered the opportunity to be housed in administrative confinement. He rejected it, stating that he did not feel unsafe in general population. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

- 1. Documents: (*Policies, directives, forms, files, records, etc.*)
 - 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 - 2. Sexual Abuse Investigation Files
 - 3. Grievance records
- 2. Investigations:
 - 1. Specialized staff

Findings (by provision):

115.71(a). In the PAQ, the Jail provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states, “If an inmate/detainee alleges sexual assault/abuse, a swift and coordinated response is necessary. Investigations, (criminal or administrative), will be done promptly, thoroughly, and objectively for all allegations, including third-party and anonymous reports.”

During the onsite phase of the audit, the auditor interviewed the security lieutenant. The lieutenant was clear that they respond immediately upon notification of an allegation of sexual abuse. If needed, they will contact an on-call detective, who would respond immediately to the facility and evaluate the victim and the allegations. The lieutenant stated that investigations are well documented, objective, and timely. The PREA compliance manager confirmed that detectives are contacted for all incidents that involve physical contact between incarcerated individuals. Incidents of sexual abuse between a staff member and an incarcerated individual are investigated

by the professional standards division. The auditor reviewed the facility's grievances submitted during the previous 12 months. Also reviewed were the sexual abuse investigation files from the previous 12 months. The auditor confirmed through this review that all allegations were investigated beginning on the day of notification of the allegation of sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(b). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided in the PAQ. The policy states, "Where sexual abuse is alleged, the agency shall use investigators who have received special training in sexual abuse investigations." The auditor had previously reviewed the written documentation submitted for standard 115.34, which references the requirements for specialized investigation training. The auditor was provided with written proof of completed training for each detective at the Sheriff's Office, as well as the supervisors in the facility.

During the onsite phase of the audit, the auditor met with the security lieutenant. He confirmed that he had completed the specialized training class from the NIC. This training focused on the need to understand the difficulties for a victim in a correctional facility and the techniques that can be employed to thoroughly investigate and gather information. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(c). In the PAQ, BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor. The policy states, "Investigators shall gather and preserved direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims; suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator."

During the onsite phase of the audit, the auditor interviewed the security lieutenant. He explained that every investigation inside the facility is treated like an investigation outside the facility, where each investigation would include everything expected in this provision of the standard. He explained that a review of facility video evidence, telephone calls, and available DNA evidence would be a standard part of every sexual abuse investigation. He stated that the current protocol is to have the incarcerated individual victim transported to the hospital, where a SANE nurse would perform the forensic medical examination. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(d). In the PAQ, BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor. The policy states, "When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution."

During the auditor's interview with the security lieutenant, the auditor talked with the lieutenant about coordinating investigative efforts with the professional standards unit if an investigation involves a staff member. He confirmed that this is something already done when investigating allegations from the public for road patrol deputies.

The agency's standard practice is to suspend administrative investigations while the criminal investigation is completed. If it is needed, professional standards will not conduct compelled interviews from staff until the completion of the criminal investigation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(e). The agency provided a copy of *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ. The policy states, "The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate/detainee or staff. Inmate/detainees who allege sexual abuse shall not be required to submit to a polygraph examination or other truth-telling devices as a condition for proceeding with the investigation of such an allegation."

During the onsite phase of the audit, the auditor interviewed the security lieutenant. He explained to the auditor that the agency would never utilize truth-telling efforts to determine if any victim of sexual abuse was telling the truth. That is something that is forbidden and would never be done by any investigator. He also confirmed that the agency would always review evidence from their investigation on its own and not allow the incarcerated individual victim's status as an incarcerated individual to affect the outcome of the investigation. The auditor interviewed one incarcerated individual who had reported sexual abuse. The incarcerated individual confirmed that he was not asked or required to submit to a polygraph examination. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(f). The auditor interviewed the security lieutenant during the onsite phase of the audit. The lieutenant discussed investigative reviews of agency staff members. One major part of all such investigations includes a review to determine if there were any violations of policy and violations of law. He confirmed that he is required to write a report at the completion of all investigations. The report will include the allegation, evidence collected and reviewed, summary of interviews and the reasoning behind his final determination. He stated that all substantiated allegations would be referred for criminal prosecution.

The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. The auditor reviewed the investigation files and noted the review of the staff members' actions or inactions in each of the incidents. The investigation reports included a description of the incarcerated individual interviews, staff interviews, and physical evidence and how the investigator made the decision on his findings. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(g). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was provided to the auditor in the PAQ. The policy states, "Criminal investigations shall be documented in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible."

The security lieutenant was interviewed by the auditor, and he confirmed that he is

required to write a report at the completion of all investigations. The report will include the allegation, evidence collected and reviewed, summary of interviews and the reasoning behind his final determination. The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. Each of the files contained a final report and evaluation of evidence, interviews, and final determination. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(h). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was included in the PAQ. The policy states, "Substantiated allegations of conduct that appears to be criminal shall be referred for prosecution."

The security lieutenant was interviewed by the auditor, and he confirmed that all substantiated allegations of sexual abuse would be referred for potential prosecution to the State Attorney's Office. The lieutenant stated that there were no substantiated cases of sexual abuse against an incarcerated individual. However, in one case, the investigator determined that although sexual abuse of the alleged victim had not occurred, the alleged abuser had committed an offense of misdemeanor battery.

That charge was filed and submitted to the local State Attorney's Office and the office had declined to file a charge of battery against the abuser. The auditor interviewed the PREA coordinator. He agreed that the agency would refer all substantiated cases for prosecution, as the PREA standards required it, and it would also assist the agency in education for incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(i). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was included in the PAQ for the auditor's review. The policy states, "The agency shall retain all written reports for as long as the alleged abuser is incarcerated in the facility or employed by the agency, plus five years."

The PREA compliance manager confirmed that the facility maintains their sexual abuse investigation files for at least ten years and provided the auditor with a review of the investigation files as far back as 2012. The agency did not complete investigations in this manner prior to the passage of the PREA standards. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(j). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was included in the PAQ and states, "The departure of the alleged abuser or victim from the employment or control of the agency shall not provide a basis for terminating an investigation."

The auditor interviewed the security lieutenant during the onsite phase of the audit. The lieutenant stated that once an investigation was opened, the agency would continue with that investigation even if the alleged abuser or victim is no longer employed or housed in the facility. The lieutenant stated clearly that this is their normal procedure for any investigation, regardless of where it occurred. The PREA coordinator stated that the facility would continue with the investigation and prosecute, when possible, even if the individual was not employed or released from the facility. Based on this analysis, the auditor finds the facility in compliance with

	<p>this provision.</p> <p>115.71(k). The auditor is not required to audit this provision.</p> <p>115.71(l). BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> was included in the PAQ and states, “When an outside agency investigates a case of sexual abuse, the facility shall cooperate with outside investigators and shall endeavor to remain informed about the progress of the investigation.”</p> <p>The agency does not employ outside agencies to perform their criminal or administrative investigations. They are completed internally. The auditor completed several interviews related to this standard. The security lieutenant stated that if an outside agency were investigating something related to sexual abuse, or any crime, in the facility, they would cooperate with the investigation. He stated that they would also maintain communication and stay informed. The auditor interviewed the PREA coordinator, and he stated that they would communicate with any outside agency investigating sexual abuse complaints in the facility. This would ensure the outside agency receives cooperation to assist in the investigation and will keep open lines of communication regarding the outcome. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.72(a). The facility provided BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> in the PAQ. The policy states, “The agency shall impose no standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.”</p> <p>The auditor interviewed a security lieutenant during the onsite phase of the investigation. The lieutenant confirmed that the preponderance of evidence is the standard utilized for all sexual abuse and sexual harassment investigations in the facility. The auditor reviewed the facility’s eight (8) sexual abuse investigation files</p>

	<p>from the previous 12 months and determined that the facility uses this standard for all investigations. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.73	Reporting to inmates
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals <p>Findings (by provision):</p> <p>115.73(a). In the PAQ, the auditor was provided a copy of BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i>. The policy states, “Following an investigation into an inmate/detainee’s allegation that he or she suffered sexual abuse in the detention facility, the agency shall inform the inmate/detainee as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded.”</p> <p>During the onsite phase of the audit, the auditor interviewed several staff members in reference to this standard. The jail administrator agreed that this is standard procedure. The security lieutenant was aware that the facility would notify the incarcerated individual after the final investigative report is provided to the PREA coordinator. The PREA coordinator stated that they would always notify the incarcerated individual as the policy states. The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months and was able to easily locate the written notification of the investigative findings to the incarcerated individual. The auditor was able to interview one incarcerated individual who had filed an allegation of sexual abuse during his incarceration. He stated that he received notification of the outcome of the investigation. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.73(b). This provision does not apply, as the facility performs their own investigations of sexual abuse and sexual harassment allegations. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.73(c). The auditor was provided information from BCSO <i>Policy 40.11 Prison</i></p>

Rape Elimination Act (PREA) in the PAQ for this provision. The policy states, "Following an inmate/detainee's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate/detainee (unless the agency has determined that the allegation is unfounded) whenever: 1. The staff member is no longer posted within the inmate/detainee's unit; 2. The staff member is no longer employed at the facility; 3. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or 4. The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility."

During the onsite phase of the audit, the auditor interviewed one incarcerated individual who had filed an allegation of sexual abuse against another incarcerated individual. He was unable to provide additional information related to this provision, although he did confirm receiving written notification of the outcome of the investigation. The auditor was unable to review any additional information regarding this provision through interviews with staff and incarcerated individuals, as there have been no substantiated allegations against a staff member. There were no notations in any of the investigation files regarding separation of an incarcerated individual from an alleged staff member abuser, as it was not required. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(d). The auditor was provided information from *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* in the PAQ for this provision. The policy states, "Following an inmate/detainee's allegation that he or she has been sexually abused by another inmate, the agency shall subsequently inform the alleged victim whenever: 1. The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or 2. The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility."

During the onsite phase of the audit, the auditor interviewed one incarcerated individual who had filed an allegation of sexual abuse against another incarcerated individual. The individual was unable to answer additional questions related to this provision since the outcome of his investigation was unfounded. There were no charges and, therefore, no notifications required. The facility had no substantiated allegations of incarcerated individual vs. incarcerated individual sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(e). In the PAQ, the auditor was provided a copy of *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "All such notifications or attempted notifications are documented."

During the onsite phase of the audit, the auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. All such notifications were easily found in the investigation file for each file. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(f). The auditor is not required to audit this provision.

115.76	Disciplinary sanctions for staff
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 1267 412">The following evidence was analyzed in making the compliance determination:</p> <ol data-bbox="320 490 1251 680" style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized interviews <p data-bbox="256 725 639 759">Findings (by provision):</p> <p data-bbox="256 792 1481 1128">115.76(a). In the PAQ, the facility provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA). The policy states, “When a staff member is alleged to be the perpetrator of inmate/detainee sexual assault/abuse, the Corrections Bureau Chief shall be advised immediately. The Corrections Bureau Chief shall refer the incident directly to the BCSO Investigative Unit. The timely reporting of all incidents and allegations is of paramount importance. Staff will be subject to significant disciplinary sanctions for sustained violations of sexual abuse or harassment, including and up to dismissal and criminal charges.”</p> <p data-bbox="256 1162 1481 1442">The auditor reviewed the facility’s eight (8) sexual abuse investigation files for the previous 12 months. There were no substantiated allegations against a staff member for either sexual misconduct or sexual harassment. Therefore, the facility was unable to provide any additional documentation related to this provision. The auditor confirmed through conversations with the PREA coordinator that there have been no substantiated incidents of staff sexual abuse over the last five years. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p data-bbox="256 1487 1449 1688">115.76(b). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided in the PAQ. The policy states, “Notwithstanding prosecution, if the agency finds that a member has violated prohibitions against sexual misconduct against inmates, this constitutes sufficient cause for dismissal of the violator and such person may not again be employed in any capacity in connection with the correctional system.”</p> <p data-bbox="256 1733 1481 2013">The auditor reviewed the facility’s eight (8) sexual abuse investigation files for the previous 12 months. There were no substantiated allegations against a staff member for either sexual misconduct or sexual harassment. Therefore, the facility was unable to provide any additional documentation related to this provision. The auditor confirmed through conversations with the PREA coordinator that there have been no substantiated incidents of staff sexual abuse over the last five years. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p data-bbox="256 2047 1433 2080">115.76(c). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided in</p>

the PAQ. The policy states, “Sanctions for violations (other than actually engaging in sexual abuse) will be commensurate with the nature and circumstances of the acts committed, staff members’ disciplinary history, and sanctions imposed for comparable offenses by other staff with similar histories.”

The auditor reviewed the facility’s eight (8) sexual abuse investigation files for the previous 12 months. There were no substantiated allegations against a staff member for either sexual misconduct or sexual harassment. Therefore, the facility was unable to provide any additional documentation related to this provision. The auditor confirmed through conversations with the PREA coordinator that there have been no substantiated incidents of staff sexual abuse over the last five years. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.76(d). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided in the PAQ. The policy states, “Terminations for violations of agency sexual abuse/sexual harassment policies or resignations of staff that would have been terminated if not for the resignation will be reported to the appropriate licensing body.”

The auditor reviewed the facility’s eight (8) sexual abuse investigation files for the previous 12 months. There were no substantiated allegations against a staff member for either sexual misconduct or sexual harassment. Therefore, the facility was unable to provide any additional documentation related to this provision. The auditor confirmed through conversations with the PREA coordinator that there have been no substantiated incidents of staff sexual abuse over the last five years. The auditor interviewed the administrative assistant, who confirmed that there have been no terminations or resignations of a staff member related to sexual abuse or sexual harassment allegations. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator 2. Specialized staff <p>Findings (by provision):</p>

	<p>115.77(a). In the PAQ, the facility provided BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i>. The policy states, “Additionally any contractor, volunteer, or other person who has contact with inmate/detainees and engages in sexual abuse/sexual harassment will be prohibited from any future contact with inmate/detainees and will be reported to relevant licensing bodies, regardless of any criminal charges.”</p> <p>During the onsite phase of the audit, the auditor interviewed the PREA coordinator. He confirmed that there have been no cases of misconduct by a volunteer or contractor during the previous 12 months. The auditor reviewed the facility’s eight (8) sexual abuse investigation files for the previous 12 months and did not find any allegations made against a volunteer or contractor. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.77(b). The auditor interviewed the PREA coordinator during the onsite phase of the audit and learned that the agency will automatically remove a volunteer or contractor involved in sexual abuse from incarcerated individual contact. The auditor also interviewed the jail administrator, who stated that the agency would take swift action to remove any volunteer or contractor from incarcerated individual contact and immediately restrict access to the secure facility. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. BCSO <i>Policy 70.01 Discipline Procedures</i> 3. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.78(a). In the PAQ, the facility provided BCSO <i>Policy 40.11 Prison Rape Elimination Act (PREA)</i>. The policy states, “Inmate/detainees shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate/detainee engaged in inmate/detainee-on-inmate/detainee sexual abuse following a criminal finding of guilt for inmate/detainee-on-inmate/detainee sexual abuse.” In the PAQ, the facility stated there were no cases where the incarcerated individual was found responsible for an allegation of</p>

sexual abuse against another individual and, therefore, disciplined internally.

During the onsite phase of the audit, the auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. There were no substantiated allegations of incarcerated individual vs. incarcerated individual sexual abuse that led to an administrative disciplinary sanction for the incarcerated individual abuser. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(b). In the PAQ, the auditor was provided *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Sanctions shall be commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmate/detainees with similar histories."

During the onsite phase of the audit, the auditor confirmed through interviews with the PREA coordinator that administrative sentences for incarcerated individuals are based on the policy, the nature of the incident, incarcerated individual history, and prior sanctions imposed for similar offenses. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(c). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* states, "The disciplinary process shall consider whether an inmate/detainee's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed."

The PREA coordinator confirmed that the facility would take into account the incarcerated individual's mental illness or mental disabilities before imposing any sanctions for sexual abuse or sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(d). During the onsite phase of the audit, the auditor met with the medical staff, who confirmed that the facility may offer counseling or mental health therapy for all incarcerated individuals with mental health disorders, but they do not provide any programs specific to those who commit sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(e). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was provided in the PAQ. The policy states, "Inmate/detainees may be disciplined for sexual contact with staff only upon a finding that the staff member did not consent to such contact."

The PREA coordinator was interviewed and stated that there have been no such incidents of sexual contact between staff and incarcerated individuals. The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months, and there are no cases where the staff member did not consent to physical contact with an incarcerated individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(f). *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)* was provided in

the PAQ. The policy states, “For the purpose of disciplinary actions, a report/ grievance of sexual abuse made in good faith based upon a reasonable believe that the alleged conduct occurred shall not constitute a false report of an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. Disciplinary action will only be taken only at the direction of the Assistant Commander based on demonstration that the report/grievance was filed in bad faith.”

The auditor reviewed the facility’s eight (8) sexual abuse investigation files during the onsite phase of the audit. The auditor did not find any incidents of incarcerated individual discipline due to the finding of false allegations. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(g). In the PAQ, the facility provided BCSO *Policy 70.01 Discipline Procedures*. This policy prohibits incarcerated individuals from participating in any sexual contact inside the facility. In the list of *Disciplinary Charges*, Charge 10-7 reads, Sex Acts, Indecent Exposure or Sexual Propositions/Threats. With this internal rule, the facility will not deem this activity to constitute sexual abuse, as long as they determine the activity to not be coerced. Charge 1-5 reads, Sexual Battery, which is the internal disciplinary rule that would be utilized if the determination is that the activity was coerced. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO <i>Policy 100.01 Medical Services</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Computer systems 2. Medical services <p>Findings (by provision):</p> <p>115.81(a). The Bradford County Jail is a county jail facility, and this provision does not apply. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.81(b). The Bradford County Jail is a county jail facility, and this provision does not apply. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81(c). In the PAQ, the facility provided BCSO *Policy 100.01 Medical Services*. The policy states, "All inmates who disclose any prior sexual victimization during screening will be offered a follow-up meeting with medical within 14 days of the intake screening." The policy goes on to state, "A physical examination shall be performed within fourteen (14) days of booking... The physician reviews all screenings, health appraisals and inmates under medical observation weekly. In addition, s/he conducts clinic and initiates follow-up and other action as appropriate."

During the onsite phase of the audit, the auditor interviewed the deputy who conducts the risk screening, who confirmed that incarcerated individuals are asked questions regarding prior sexual victimization, and whether it occurred in another correctional setting or in the community. The auditor interviewed two incarcerated individuals who reported prior sexual victimization on the risk screening. Both incarcerated individuals confirmed to the auditor that they were seen by medical within the first week in the facility. One incarcerated individual stated that he said he did not need to talk with someone but was seen by medical anyway. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81(d). In BCSO *Policy 100.01 Medical Services*, provided to the auditor in the PAQ, the facility addresses this standard. The policy states, "Information related to sexual victimization/abusiveness, which occurred within the facility, including treatment plans, that is shared with other staff is strictly limited to informing security and management for decisions that may relate to investigations, housing, bed, work, education, and program assignments or otherwise required by federal, state, or local law."

During the onsite phase of the audit, the auditor talked with several staff members while performing the site review. Staff members were asked about the screening of incarcerated individuals and how to access the screening information in the computer. The auditor was told they were unable to access that information in the computer. The auditor asked three officers to access the computer and show him the screening information and they were unable to do so. The auditor was assured by the PREA coordinator and the PREA compliance manager that access to the screening tool's data was restricted to staff that required access to the information. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81(e). The facility provided the auditor BCSO *Policy 100.01 Medical Services* in the PAQ. The policy states, "Medical shall obtain informed consent from inmates/ detainees before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18."

During the onsite phase of the audit, the auditor met with the medical staff. They stated that all medical staff obtain informed consent from incarcerated individuals. They all understand the requirement to disclose to incarcerated individuals the needs

of the facility and the reasoning behind such disclosures. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 100.01 Medical Services
 2. Sexual Abuse Investigation Files
2. Interviews:
 1. Specialized staff
 2. Targeted incarcerated individuals

Findings (by provision):

115.82(a). In the PAQ, the auditor was provided with BCSO *Policy 100.01 Medical Services*. The policy states, "Inmate/detainee victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services as deemed necessary by the medical staff. The nature and scope of such services will be determined by medical and mental health practitioners."

During the onsite phase of the audit, the auditor interviewed the medical staff, two nurses. Both confirmed that all appropriate services would be provided to all sexual abuse victims. Other than any emergent medical care, if law enforcement determines the incarcerated individual victim should have a forensic medical examination performed, the victim would be transported to a local hospital for the examination. Upon return to the facility, the nurse and the contract physician would coordinate follow-up care with the SANE nurse recommendations. The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. Each record included a notation that the incarcerated individual victim was seen by medical and cleared of any potential injury. Notes also show a referral to the mental health counselor. The auditor interviewed one incarcerated individual who had reported an allegation of sexual abuse. He told the auditor that he was seen immediately by a nurse after reporting his allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82(b). The auditor interviewed the medical staff, two nurses, during the onsite phase of the audit. Both confirmed that staff are on duty during regular daytime hours. The nurses take turns being on call and the contracted physician is also available by telephone after hours. If a sexual assault were to take place after hours,

the staff on duty would make an immediate evaluation and call emergency medical services for transport to a hospital if the situation warranted. The auditor also interviewed staff members who were asked about the steps to take upon discovering or learning of a sexual assault of an incarcerated individual. Each staff member confirmed that the incarcerated individual would be evaluated by medical as soon as possible. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82(c). BCSO *Policy 100.01 Medical Services* was provided to the auditor in the PAQ. The policy states, “Inmate/detainee victims of sexual abuse while incarcerated will be offered timely information about, and timely access to, emergency contraception and sexually transmitted infections prophylaxes.”

During the onsite phase of the audit, the auditor interviewed the medical staff, two nurses. Both confirmed that all appropriate services would be provided to all sexual abuse victims. Other than any emergent medical care, if law enforcement determines the incarcerated individual victim should have a forensic medical examination performed, the victim would be transported to a local hospital for the examination. Upon return to the facility, the nurse and the contract physician would coordinate follow-up care with the SANE nurse recommendations. The treatment would include any testing needed, providing prophylactic medications for sexually transmitted infections (STIs), and complete any necessary pregnancy testing. The auditor interviewed one incarcerated individual who had reported an allegation of sexual abuse. He told the auditor that he was seen immediately by a nurse after reporting his allegation. He did not report physical contact that required such testing or prophylactic medications.

The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months. There were no investigations that contained an allegation of sexual abuse that led to the need for a forensic examination. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82(d). BCSO *Policy 100.01 Medical Services* was provided to the auditor. The policy 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 investigation arising out of the incident.”

During the onsite phase of the audit, the auditor interviewed the PREA coordinator. He stated that all incarcerated individual victims would receive these services at no cost. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 100.01 Medical Services
 2. Sexual Abuse Investigation Files
2. Interviews:
 1. Specialized staff
 2. Targeted incarcerated individuals

Findings (by provision):

115.83(a). The facility provided BCSO Policy 100.01 Medical Services in the PAQ. The policy states, "Ongoing medical and mental health care will be offered, as appropriate, for inmate/detainees victimized in any facility."

During the onsite phase of the audit, the auditor confirmed through interviews with the medical staff that incarcerated individuals who report prior victimization are provided services, treatment, and counseling by medical staff. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(b). The auditor interviewed the medical staff, two nurses, during the onsite phase of the audit. Both confirmed that the facility works with community healthcare providers for follow-up and treatment of incarcerated individuals upon release. The auditor interviewed one incarcerated individual who reported an allegation of sexual abuse during his incarceration. He stated that he had been seen by the medical provider. They offered care, but he refused additional care. He told the auditor that he was fine and did not require additional services. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(c). During the onsite phase of the audit, the auditor met with the medical staff, two nurses. Both made it clear that all incarcerated individuals do receive care and services that are consistent with what is available outside the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(d). BCSO Policy 100.01 Medical Services was provided in the PAQ. This policy states, "Female victims of sexual abuse while incarcerated that included vaginal penetration will be offered a pregnancy test."

The auditor interviewed the medical staff, two nurses, who confirmed this policy. There were no medical records available for an incarcerated individual who was victimized in the facility that could be reviewed by the auditor, as there have been no female incarcerated individuals sexually abused in this manner. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(e). BCSO Policy 100.01 Medical Services was provided for review by the auditor. This policy states, "If positive the victim will receive comprehensive

	<p>information about, and timely access to, all lawful pregnancy related medical services.”</p> <p>The auditor interviewed the medical staff, two nurses, who confirmed this policy. There were no medical records available for an incarcerated individual who was victimized in the facility that could be reviewed by the auditor, as there have been no female incarcerated individuals sexually abused in this manner. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.83(f). BCSO Policy 100.01 Medical Services was provided for review by the auditor. This policy states, “All inmate/detainee victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.”</p> <p>The auditor interviewed the medical staff, two nurses, who confirmed this policy. There were no medical records available for an incarcerated individual who was victimized in the facility that could be reviewed by the auditor, as there have been no female incarcerated individuals sexually abused in this manner. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.83(g). BCSO Policy 100.01 Medical Services was provided to the auditor. The policy 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 investigation arising out of the incident.”</p> <p>During the onsite phase of the audit, the auditor interviewed the PREA coordinator. He stated that all incarcerated individual victims would receive these services at no cost. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.83(h). The Bradford County Jail is a county jail facility, and this provision does not apply. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA) 2. Sexual Abuse Investigation Files 2. Interviews:

1. Specialized staff
2. Incident review team

Findings (by provision):

115.86(a). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Sexual abuse incident reviews will be conducted at the conclusion of every sexual abuse investigation, including those where the allegation was not substantiated, unless the allegation has been determined to be unfounded."

The PREA coordinator provided the auditor with the sexual abuse investigation files from the previous 12 months. Each of the eight (8) files reviewed contained written proof that an incident review took place. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(b). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Reviews will ordinarily be conducted within 30 days of the conclusion of the investigation by a review team comprised of the Captain and/or Assistant Commander, the PREA Retaliation Monitor, the Investigator, a Shift Supervisor, and the BCJ Nurse."

The PREA coordinator provided the auditor with the sexual abuse investigation files from the previous 12 months. Each of the eight (8) files reviewed contained written proof that an incident review took place and each was completed within 30 days. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(c). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Reviews will ordinarily be conducted within 30 days of the conclusion of the investigation by a review team comprised of the Captain and/or Assistant Commander, the PREA Retaliation Monitor, the Investigator, a Shift Supervisor, and the BCJ Nurse."

During the onsite phase of the audit, the auditor interviewed the jail administrator. She confirmed that the facility takes all incidents of sexual abuse seriously and conducts the incident review at the conclusion of the investigation. The auditor reviewed the facility's eight (8) sexual abuse investigation files from the previous 12 months. Each file showed a completed sexual abuse incident review meeting document and those that participated in the meeting. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(d). In the PAQ, the facility provided BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, "Reviews shall: 1. Consider whether the allegation or investigation indicated a need to change guideline or practice to better prevent, detect, or respond to sexual abuse; 2. Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; 3.

Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; 4. Assess the adequacy of staffing levels in the area during different shifts; 5. Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and 6. Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to this paragraph and any recommendations for improvement and submit such report to the Corrections Bureau Chief and PREA Coordinator.”

The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months. Each file contained a written report from the incident review, which listed the five points from this provision. The report was complete with the assessment and any recommendations for improvement. The auditor interviewed the PREA compliance manager, who confirmed attendance at incident review meetings and the need to identify any issues behind the allegations. The auditor also interviewed the PREA coordinator. He was clear that recommendations from these incident reviews were taken seriously by the agency. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(e). In the PAQ, the facility provided *BCSO Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “The facility shall implement the recommendations for improvement or shall document reasons for not doing so.”

The auditor was not provided written proof of implementation for improvement that was spurred by incident reviews. The PREA coordinator confirmed that the facility was unable to provide such documentation due to having no incidents with recommendations for improvement noted. The auditor reviewed the facility’s eight (8) sexual abuse investigation files from the previous 12 months. There were no notations made of recommendations due to the findings in the incident review. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. <i>BCSO Corrections Division Annual Comparison Report for 2021 and 2022</i> <p>Findings (by provision):</p>

115.87(a). The facility provided the auditor with BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “The Assistant Commander shall collect accurate, uniform data for every allegation of sexual abuse reported.”

The auditor was provided with the *BCSO Corrections Division Annual Comparison Report for 2021 and 2022*. The set of definitions utilized for the data collection and listed in the report are in line with the definitions listed on the *Survey of Sexual Violence* conducted by the Department of Justice (DOJ). Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(b). This provision is included in BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “The agency shall aggregate the sexual abuse data at least annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(c). This provision is included in BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “The data collected shall 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.”

The auditor was provided with the *BCSO Corrections Division Annual Comparison Report for 2021 and 2022*. The set of definitions utilized for the data collection and listed in the report are in line with the definitions listed on the *Survey of Sexual Violence* conducted by the Department of Justice (DOJ). Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(d). This provision is included in BCSO *Policy 40.11 Prison Rape Elimination Act (PREA)*. The policy states, “The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(e). The agency does not contract with any outside facilities for the housing of incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(f). The agency stated in the PAQ that the Department of Justice has not requested completion of the *Survey of Sexual Violence (SSV)* in the last three years. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. BCSO Policy 40.11 Prison Rape Elimination Act (PREA)
 2. BCSO Corrections Division Annual Comparison Report for 2021 and 2022
2. Interviews:
 1. Specialized staff

Findings (by provision):

115.88(a). The auditor was provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA) in the PAQ. The policy states, "The agency shall aggregate the sexual abuse data at least annually in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions."

The auditor reviewed a copy of the *BCSO Corrections Division Annual Comparison Report for 2021 and 2022* and confirmed that the report contains information related to this provision. The auditor interviewed the PREA coordinator during the onsite phase of the audit. He confirmed that the agency reviews annual data to determine if there is a need to take corrective action to prevent additional sexual abuse incidents. The jail administrator was also interviewed and confirmed that these annual reviews are completed. Information obtained through these reviews is written in the agency's annual report. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88(b). The auditor was provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA) in the PAQ. The policy states, "Such reports shall include a comparison of the current year's data and corrective actions with those from prior years and shall provide an assessment of the agency's progress in addressing sexual abuse."

The auditor reviewed a copy of the *BCSO Corrections Division Annual Comparison Report for 2021 and 2022* and confirmed that the report contains information related to this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88(c). The auditor was provided BCSO Policy 40.11 Prison Rape Elimination Act (PREA) in the PAQ. The policy states, "The agency's report, including aggregate data, shall be approved by the agency head and made readily available to the public through the Bradford County Sheriff's Office website at least annually."

The auditor reviewed the agency's website and found the agency's annual report posted on the page dedicated to the Prison Rape Elimination Act. The auditor interviewed the jail administrator during the onsite phase of the audit. The jail administrator confirmed that she reads and approves the annual report. Based on

	<p>this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.88(d). The auditor was provided <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> in the PAQ. The policy states, “The agency will redact specific material from reports when publication would present a clear and specific threat to the safety and security of the facility but must indicate the nature of the material redacted. Before making aggregated sexual abuse data publicly available, the agency shall remove all personal identifiers.”</p> <p>The auditor reviewed a copy of the <i>BCSO Corrections Division Annual Comparison Report for 2021 and 2022</i> and confirmed that the report contains information related to this provision. There are no redactions on the annual report because the report does not contain any personal information. The PREA coordinator confirmed that any reports written and posted to their website would only contain unidentified information regarding aggregated sexual abuse data. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator <p>Findings (by provision):</p> <p>115.89(a). <i>BCSO Policy 40.11 Prison Rape Elimination Act (PREA)</i> was provided to the auditor in the PAQ. The policy states, “The agency shall ensure that data collected is securely retained. Sexual abuse data collected shall be maintained for at least 10 years after the date of initial collection unless required otherwise by federal, state, or local law.”</p> <p>During the onsite phase of the audit, the auditor interviewed the PREA compliance manager. She provided the auditor access to her office, where the sexual abuse data is secured and maintained for at least 10 years. The auditor located files from as far back as 2012, when the agency began filing investigations based on the PREA standards. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.89(b). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “The agency’s report, including aggregate data, shall be approved by the agency head and made readily available to the public through the Bradford County Sheriff’s Office website at least annually.”

The auditor reviewed the agency’s website and found the agency’s annual report posted on the page dedicated to the Prison Rape Elimination Act. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.89(c). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “The agency shall ensure that data collected is securely retained. Sexual abuse data collected shall be maintained for at least 10 years after the date of initial collection unless required otherwise by federal, state, or local law.”

The auditor reviewed the agency’s website and found the agency’s annual report posted on the page dedicated to the Prison Rape Elimination Act. There are no redactions on the annual report because the report does not contain any personal information. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.89(d). BCSO Policy 40.11 Prison Rape Elimination Act (PREA) was provided to the auditor in the PAQ. The policy states, “Sexual abuse data collected shall be maintained for at least 10 years after the date of initial collection unless required otherwise by federal, state, or local law.”

During the onsite phase of the audit, the auditor interviewed the PREA compliance manager. She provided the auditor access to her office, where the sexual abuse data is secured and maintained for at least 10 years. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: <i>(Policies, directives, forms, files, records, etc.)</i> <ol style="list-style-type: none"> 1. Agency website 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator <p>Findings (by provision):</p>

	<p>115.401(a). This was the third audit completed by the Bradford County Jail. The auditor confirmed with the PREA coordinator that the Jail had completed two prior PREA audits for the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(b). This is the first year of the fourth PREA audit cycle. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(h). During the onsite phase of the audit, the auditor was given the opportunity to complete a full site review. This included full access to all areas of the facility, so the auditor could assess all operations and talk with staff and incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(i). During the onsite phase of the audit, the auditor was provided with all documentation requested in order to properly review and verify all operations related to the PREA standards. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(m). During the onsite phase of the audit, the auditor requested to interview a total of 25 incarcerated individuals. The facility provided a private room for the auditor to meet with each incarcerated individual for the interview, without interruption. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(n). The facility posted the required audit notice in every housing unit, on colored paper, printed in two languages. The notices were also seen in public areas throughout the facility, in the public lobby and in the visitation room. The audit notice included the auditor’s contact information and explained the process to send confidential information or correspondence. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (Policies, directives, forms, files, records, etc.) <ol style="list-style-type: none"> 1. Agency website 2. Interviews: <ol style="list-style-type: none"> 1. PREA coordinator <p>Findings (by provision):</p>

	<p>115.403(f). This was the third audit completed by the Bradford County Jail. The auditor confirmed that the Jail had posted the previous audit reports on the agency website. The PREA coordinator confirmed the requirement in this standard to post the completed audit report on the agency website and agreed that the report will be posted to the website after it is received. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
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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 harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of 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.)	na
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	na

	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

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).)	yes
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 strip or cross-gender visual body cavity searches, except in 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-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	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	yes

	facility does not have female inmates.)	
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)?	yes
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 English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to 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 English proficient	
	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	yes

	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?	
	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 before enlisting the services of any contractor who may have 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)	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.)	na
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 investigations	

	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	
	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).)	na
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 that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written 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	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	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	yes

	suspicious 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.)	
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	yes

	screening instrument?	
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 non-conforming 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)	no

	Whether the inmate is detained solely for civil immigration purposes?	
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	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
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 by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	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 by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
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	yes

	present management or security problems?	
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 decree, 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 decree, 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	yes

	solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	
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 the facility hold the inmate in involuntary segregated housing for 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	yes

	anonymous upon request?	
	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.)	yes
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.	no
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	yes

	this standard.)	
	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 behalf, does the agency document the inmate's decision? (N/A if 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 services	
	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,	yes

	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.)	
	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 the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	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	yes

	abuse or sexual harassment or retaliation?	
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	yes

	response to an incident of sexual abuse?	
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?	no
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	yes

	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?	
	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	yes

	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).)	
	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 (l)	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).)	yes
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 she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

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
115.73 (c)	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
115.73 (d)	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	yes

	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
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?	no
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	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
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).	na
115.81 (b)	Medical and mental health screenings; history of sexual 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.)	na
115.81 (c)	Medical and mental health screenings; history of sexual 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).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (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	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
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 services	
	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 services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (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 abuse victims and abusers	
	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.)	yes
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.)	yes
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.)	na

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.)	na
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.)	na
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	yes

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

(f)		
	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