

PREA Facility Audit Report: Final

Name of Facility: Madison Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/26/2018

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" 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 checked="" type="checkbox"/>
Auditor Full Name as Signed: Dave Andraska	Date of Signature: 12/26/2018

AUDITOR INFORMATION	
Auditor name:	Andraska, Dave
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Start Date of On-Site Audit:	11/07/2018
End Date of On-Site Audit:	11/09/2018

FACILITY INFORMATION

Facility name:	Madison Correctional Institution		
Facility physical address:	382 Southwest MCI Way, Madison, Florida - 32340		
Facility Phone	850-973-5300		
Facility mailing address:			
The facility is:	<input type="radio"/> County <input type="radio"/> Federal <input type="radio"/> Municipal <input checked="" type="radio"/> State <input type="radio"/> Military <input type="radio"/> Private for profit <input type="radio"/> Private not for profit		
Facility Type:	<input checked="" type="radio"/> Prison <input type="radio"/> Jail		

Primary Contact

Name:	Shelley Bearden	Title:	Assistant Warden
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Warden/Superintendent

Name:	Darryl Collins	Title:	Warden
Email Address:	darryl.collins@fdc.myflorida.com	Telephone Number:	850-973-5547

Facility PREA Compliance Manager

Name:		Email Address:	
Name:	Shelley Bearden	Email Address:	Shelley.Beaarden@fdc.myflorida.com

Facility Health Service Administrator

Name:	Lynne King	Title:	Health Service Administrator
Email Address:	lking@centurionoffl.com	Telephone Number:	850-973-5519

Facility Characteristics

Designed facility capacity:	1484	
Current population of facility:	1567	
Age Range	Adults: 19-86	Youthful Residents:
Facility security level/inmate custody levels:	Community, Minimum, Medium, Close	
Number of staff currently employed at the facility who may have contact with inmates:	292	

AUDIT FINDINGS

Narrative:

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

The Prison Rape Elimination Act (PREA) Audit for the Madison Correctional Institution and adjacent Work Camp (Madison CI) was conducted on November 7-9, 2018. This was the second PREA audit for this facility. The PREA Audit was coordinated through the Florida Department of Corrections (FDC) and 3D PREA Auditing & Consulting, LLC upon notification of being awarded the contract. Department of Justice (DOJ) Certified PREA Auditor David Andraska was assigned to conduct the audit. A line of communication was developed between the FDC PREA Coordinator and the 3D President to schedule the PREA Audit. The Auditor was in contact, by phone and email with the PREA Correctional Services Consultant and facility regarding the Pre-Audit Questionnaire (PAQ), posting of audit notice and logistics.

The auditor's pre-audit preparations consisted of a thorough review of all documentation and materials submitted by the facility utilizing by the Online Automated System (OAS). The documentation reviewed by the auditor included the PAQ which had links to State Statutes, Administrative Code agency and facility procedures, forms, posters, pamphlets, brochures, handbooks, educational materials, training curriculums, organizational charts, and other PREA related materials the facility provided to demonstrate compliance with each PREA standard. The auditor contacted Just Detention International (JDI) in reference to any information submitted by inmates and also reviewed the FDC website. Prior to the on-site audit, FDC conducts a Pre-audit evaluation to prepare for the PREA audit. Results of the evaluation were discussed with the auditor prior to the start of the audit. The Agency and Madison CI also prepares annual PREA Corrective Action Plans based on incident reviews and PREA audits of facilities. The 2017 plans indicated; continuous improvements made to policies and procedure, physical plant modifications and installation of additional cameras and that FDC has executed Memorandum of Agreements, (MOA) with local Rape Crisis Centers and additional inmate education. In addition FDC is continuously making improvements to policies and procedures per recommendations from PREA audits conducted in 2018 of its facilities.

The audit began on Wednesday afternoon, November 7, 2018 with an entrance meeting with the Warden, Assistant Warden of Operations, Assistant Warden/PREA Compliance Manager, Major, Agency PREA Correctional Services Consultant and Secretary Specialist to discuss any concerns regarding the audit process and finalize the facility tour and interview schedule. The site visit consisted of conducting a full tour of the facility and work camp, a thorough review of documentation, and formal and informal interviews with staff and inmates. Areas visited during the tour included the main lobby, all inmate housing areas, intake, laundry, kitchen, Industry building, recreation areas, visiting room, medical and mental health area, all program areas, the monitoring station and all buildings at the work camp.

During the tour, the auditor reviewed staffing; logs; physical plant; sight lines; camera coverage; and tested the inmate phone system for reporting PREA allegations and for requesting emotional support services. PREA posters and the notification of the PREA audit were observed posted throughout all areas accessible to inmates. The notification of the PREA audit visit was documented as posted on October 3,

2018. A photograph of the posted notice was provided to the auditor.

Madison CI has 292 staff that may have contact with inmates. The security staff is assigned to three 8 hour shifts. A total of 24 staff members were interviewed during the course of this audit. These interviews consisted of: ten randomly selected correctional security staff (officers, sergeants and lieutenants) covering all shifts, four non-security, contract and volunteer staff, and ten specialized staff members that have multiple roles that encompass all specialized staff interviews. All staff at Madison CI is trained as first responders and those interviewed were well versed in their areas of responsibility regarding responding to PREA allegations. The Agency Head, Agency Contract Administrator and PREA Coordinator interviews were previously been conducted by another auditor and were utilized as part of this audit.

On the first day of the audit there were 1,582 Inmates (1,317 males at Madison and 265 males at the work camp). Forty-one inmates were interviewed. Twenty-one inmates were randomly selected and twenty were in the targeted group. The target group included three inmates with a physical disability, four inmates that are LEP, five inmates that self-identified as Gay, Bi-sexual or Transgender, one inmate that was identified as being potentially vulnerable to sexual victimization and seven inmates who reported sexual abuse or prior sexual victimization. No inmates contacted the auditor prior to the audit. Most inmates interviewed stated they felt safe and all inmates demonstrated a good understanding of PREA and reporting options.

Investigative files were reviewed during the on-site visit and appeared to thoroughly document the investigation process per agency procedure. There were twenty-two allegations of sexual abuse and eight allegations of sexual harassment received in the past 12 month. There were 12 alleged staff on inmate sexual abuse and/or sexual harassment investigations. There were 18 inmate-on-inmate sexual abuse and/or harassment investigations. There were no substantiated allegations that were referred for criminal prosecution.

The auditor examined a random sampling of personnel files and staff, volunteer and contractor training files that are maintained at the facility. New hires, volunteers and contractors are not allowed entrance into the facility until a thorough background check is completed. The training records were complete and included written documentation that staff received the required PREA training. The auditor viewed the signed "Training Acknowledgement Form" documenting that all staff understood the PREA training received. The auditor selected and examined a random sample of inmate case files and reviewed documentation, indicating by their signature, the inmates received and understood the PREA information. The auditor also reviewed documentation associated with initial risk screenings and reassessments.

In summary, the auditor had been provided with extensive files prior to the audit for review. While at the facility; the auditor reviewed a sufficient sampling of records based on the size of the facility which included inmate case records, personnel files, training records, investigative reports, additional program information and documents. The auditor interviewed the required number of staff and inmates based on the population and all were knowledgeable regarding PREA.

At the conclusion of the on-site visit an exit meeting was held to discuss the audit findings with the Warden and staff. The auditor thanked the Warden and PREA staff for their hospitality and cooperation during the audit. The facility staff was found to be cooperative and professional. All areas of the facility were clean and well maintained. The auditor explained the audit report process and what would follow the on-site visit. The auditor thanked the Warden and staff for their hard work, dedication and

commitment to comply with PREA standards.

AUDIT FINDINGS

Facility Characteristics:

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

Madison Correctional Institution is an adult male facility located near Madison, Florida which is approximately 55 miles east of Tallahassee, Florida. Madison CI was established in 1989 and is a level four Institution and has a design capacity of 1,189 offenders. It houses close, medium, minimum and community custody inmates. The facility has 45 buildings on 36 acres within the perimeter fence. The compound is divided into three sections separated by cross fences (Programs and Services, Housing and Recreation). The Programs and services section includes the gate house which has Security Operation Offices, the visiting park and intake office, the Chapel, Vocational building, Culinary Arts, Laundry building and Pride. There are two multipurpose buildings; the first building consists of a Library, Education, Substance abuse programs, and staff canteen. The second multipurpose building includes Medical, Dental, Psychology, and Classification, Food service and a secure housing unit.

In the housing section of the compound are (6) open bay housing units (Echo, Foxtrot, Golf, India, Hotel, Juliet, Kilo) and one secure housing unit. There is a tower at the Center gate that is armed with 1 armed officer who controls the opening of all gates between secured areas on the compound.

The third section of the compound is the Recreation Yard which has the wellness department. There is also a tower with 1 armed officer who controls the gates between the 2 sections of housing and Rec Yard.

Outside of the East Sally Port Entrance/Exit is the Warehouse (Shipping and Receiving, Mailroom,) Maintenance and Automotive building.

Inmates can also take educational courses in which they can earn their GED or adult basic education. The facility also offers ESL (English as a Second Language), Mavis Beacon Typing Program, Ready to Work Program and a culinary arts vocational program. The facility offer a variety of betterment programs that include a substance abuse treatment in an outpatient program, Alcoholics Anonymous/Narcotics Anonymous, Anger Management Program, Great Dads Seminars, Commercial Driver License, Compass 100, Domestic Violence, Victim Impact Class and Faith Based Programs. This facility participates in the Prison Rehabilitative Industries and Diversified Enterprises (P.R.I.D.E) program that allows inmates to work in a textile and shoe factory.

The Work Camp is adjacent to the main unit and was opened in 1987. It consists of four (4) open bay dormitories with a maximum capacity of 295 inmates. Approximately 100 inmates are assigned to to work in the community each day. There are four (4) FDC supervised public work squads, six (6) non-FDC supervised Inter-agency work squads and one (1) DOT work squad providing community support. The Education Department holds a GED program for the Work Camp inmates during the evening hours.

AUDIT FINDINGS

Summary of Audit Findings:

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

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

Number of standards exceeded:	2
Number of standards met:	43
Number of standards not met:	0

Number of Standards exceeded: Two (2)

Standard 115.42 Use of screening information

Standard 115.54 Third-party reporting

The remaining 43 Standards were found to meet standards.

No corrective action was required.

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response (revised 7/31/2018) and the FDC and Madison CI Organization Charts were reviewed and address the requirements of this standard. The written procedure mandate zero tolerance towards all forms of sexual abuse and sexual harassment and outline the approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The procedure include definitions of prohibited behaviors regarding sexual assault and sexual harassment of inmates with sanctions for those found to have participated in these prohibited behaviors.</p> <p>FDC employs an upper-level, agency-wide PREA Coordinator who is an Operations Manager in the Bureau of Security Operations. She is knowledgeable of PREA standards and has the authority to develop, implement and oversee PREA compliance. She supervises two Correctional Services Consultant in her office and trains and indirectly supervises 49 PREA Compliance Managers throughout the State. Madison CI PREA Compliance Manager is the Assistant Warden of Programs. Per interviews with the PREA Coordinator and PREA Compliance Manager, both stated they have sufficient time and authority to manage their PREA-related responsibilities.</p> <p>The Procedure identifies the Agency's and facility's strategies and responsibilities to detect, reduce and prevent sexual abuse and sexual harassment of inmates. During interviews with the selection of random staff and specialty staff, each confirmed receiving PREA training and was knowledgeable of their responsibilities. PREA training is provided to staff during initial training and annually as outlined in policy. Those individuals interviewed shared their understanding of the agency's zero tolerance toward sexual abuse and sexual harassment. Interviews with inmates indicated they felt safe, received PREA information and were aware of the zero tolerance policy and how to report sexual abuse and harassment allegations. PREA posters and literature describing the agency's zero tolerance toward sexual abuse and sexual harassment were observed by the auditor to be strategically located and accessible throughout the facility for staff and inmate awareness.</p> <p>Based on the review of the established procedure, staff PREA training, inmate PREA education and information, interviews with staff and inmates, observation of bulletin boards, posters and PREA material during the tour of the facility, the designation of an Agency- wide PREA Coordinator and facility PREA Compliance Manager, Madison CI is compliant with this standard.</p>

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 205.002 and the FDC contracts with the private providers were reviewed and address the requirements of this standard. The procedure requires all new and renewed contracts to comply with PREA standards. An interview with the Agency PREA Coordinator, who also oversees all the operational practices, contract practices, and day to day operations of each contracted facility, is responsible to monitor to make sure that each of these contracted facilities is PREA compliant and following FDC Policies and Procedures. While the agency contracts with private facilities for the confinement of inmates, Madison CI does not contract.</p> <p>Review of the procedure, contacts and interview with the Agency PREA Coordinator, Madison CI is compliant with this standard.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Procedure 602.030 Staffing Utilization, Madison CI Staffing Plan, PREA Staffing review and Shift Supervisor Post Orders were reviewed and address the requirements of this standard. The FDC, Office of Institutions in conjunction with each Institution develops and documents a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse. The staffing plan revised on 4/11/2018 uses the criteria found in Standard 115.13 (a), to include generally accepted correctional practices; any judicial findings of inadequacy; any findings of inadequacy from Federal investigative agencies; any findings of inadequacy from internal or external oversight bodies; all components of the institution's physical plant (including "blind-spots" or areas where staff or inmates may be isolated); composition of the inmate population; number and placement of supervisory staff; institution programs occurring on a particular shift; any applicable State or local laws, regulations, or standards; prevalence of substantiated and unsubstantiated incidents of sexual abuse; and other relevant factors to develop and review the staffing plan. The staffing plan was based on maximum design capacity of each facility.</p> <p>The auditor also reviewed the Madison CI Annual PREA Staffing Review which was signed by the Agency PREA Coordinator on 4/4/2018. FDC created a form to conduct the annual review to ensure all eleven criteria per the Standard are properly reviewed and addressed.</p> <p>Madison CI staffing plan is adequate although staff available to fill position is limited. Madison CI only maintains Level 1 staffing and reported that during 2017 they fell below level I staffing 690 times. By procedure, the facility documents and justifies all deviations to the plan by completing an incident report. The most common reasons for deviating from the staffing plan are; training, extended sick leave (FMLA), unscheduled absences and special assignments. The facility authorizes overtime to fill all positions when possible, FDC has requested resources from the legislature to fill all positions at Madison CI.</p> <p>Intermediate and higher level supervisors are required to conduct and document unannounced PREA rounds on all shifts to deter and identify staff sexual abuse and sexual harassment. The auditor interviewed staff, reviewed housing logs and confirmed supervisors were conducting unannounced PREA rounds</p> <p>Based on a review of procedures, incident reports, housing unit logs, staffing plan and annual PREA Staffing Review, as well interviews with the Warden and staff, observation while on-site of camera and mirror placement, Madison CI is compliant with this standard.</p>

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 601.211 Designation of Youthful Offenders, Young Adult Offenders and Youthful Offender Facilities was reviewed and addresses the requirement of this standard. The Procedure establish guidelines for designating youthful offenders and young adult offenders and to provide guidelines for their placement in youthful offender facilities, units, and programs to ensure safety and security. The Procedure also identifies the facilities that are designated to house youthful offenders.</p> <p>Madison CI does not house youthful Inmates, it is only designated to house adult male inmates. Based on the review of the established procedure and interview with the Warden, the facility is compliant with this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedures 602.053, 602.018 Contraband and Searches of Inmates, 602.036 Gender Specific Security Positions, Shifts, Posts and Assignments, the PREA Lesson Plan on searches and staff training records were reviewed and address the requirements of this standard. Staff and inmate interviews and direct observation determined the facility does not allow cross-gender viewing and searches. Madison CI does not conduct cross-gender strip searches or cross-gender visual body cavity searches and staff members are prohibited from and do not search transgender or intersex residents to determine an inmates' genital status. The facility reported there were no cross gender strip searches or cross gender visual body cavity searches conducted in the past 12 months.</p> <p>Based on interviews with staff and inmates and personal observation, it was determined inmates are able to shower, perform bodily functions and change clothes without non-medical staff observing their genitalia or buttocks, except in exigent circumstances or when such viewing is incidental to routine cell checks. However interviews with inmates found that not all staff were consistent in making opposite gender announcements. This issue was brought to the attention of the Warden and PREA Compliance Manager. They took immediate action to reinforce the announcement and all staff were reminded about making opposite gender announcements when entering a housing unit.</p> <p>Review of training records and lesson plans demonstrated staff had been trained on how to conduct cross-gender pat-down searches and searches of transgender and intersex residents, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. Prior to the audit, training documents were provided to the auditor demonstrating staff had been trained on searches of transgender and intersex residents, additional training records were reviewed during the onsite audit. Interviews with staff members identified some misunderstanding regarding proper procedures to conduct pat down searches of transgender and intersex residents. This was discussed with the PREA Compliance Manager and as a result all security staff were reminded of the proper technique. There was one self identified transgender inmate at Madison CI during the on-site audit.</p> <p>Based on review of policy, documentation, observation and training documents, along with interviews with PREA Compliance Manager ,staff and inmates, Madison CI is compliant with this standard.</p>

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Procedure 604.101 American with Disabilities Act Provision for Inmates and the PREA lesson plan-ADA were reviewed and address the requirements of this standard. The procedure ensure inmates with disabilities and who are limited English proficient (LEP) have access to PREA information and programs. Madison CI has taken appropriate steps to ensure that inmates who are limited English proficient or disabled 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. FDC has a contract with Language Line Services Inc. to provide foreign language translation. A listing of staff translators is also available. The Sexual Abuse Awareness brochure is available in 7 different languages. PREA posters are posted throughout the facility for inmates, staff and visitors. Per Procedure, PREA lesson plans and staff interviews, inmates are not used as interpreters, when addressing sexual abuse and sexual harassment allegations.</p> <p>Informational and educational materials for inmates with physical and mental disabilities are provided in ways that will enable the inmates to understand the PREA zero tolerance policy, related material and how to report allegations of sexual abuse or sexual harassment. Inmates with limited vision are assisted by some of the posters having been printed in larger print. Inmates with a mental disability, are afforded extra time by staff to explain and ensure they understand the PREA basics, to include definitions and reporting information. The inmate phone system provided by contract with Securus provides prompts in both English and Spanish. Interviews with four LEP inmates and three inmates with hearing and/or vision disabilities indicated PREA information was provided in a format they could understand.</p> <p>The review of procedure, PREA brochures and posters, resources available and supporting documentation, as well as staff and inmate interviews, confirm Madison CI is compliant with this standard.</p>

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 208.049 Background Investigation and Appointment of Certified Officers, Florida Statutes Chapter 435 Employment Screening, Florida Statute 408 Health Care Administration and FAC Chapter 33-601.202 Use of Inmates in Public Works were reviewed and address the requirements of this standard. These procedures and rules ensure staff and contractors are not hired or promoted who have engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile, or other penal type institutions; or who have been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or been civilly or administratively adjudicated to have engaged in sexual activity facilitated by force, overt or implied threats of force, or coercion.</p> <p>FDC uses a "live scan" law enforcement reporting system that alerts the agency to any arrest of staff. The agency also requires staff to "self report" misconduct. Applicants may also be disqualified based on the Department's "moral character and background guidelines," in 11-088. Contractors, volunteers, and non-departmental supervisors are also required to submit to background checks, including annual NCIC/FCIC background checks.</p> <p>The policies require the facility to consider any incidents of sexual abuse/sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates. The documentation and interviews also demonstrated FDC and the facility considers incidents of sexual abuse/sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates.</p> <p>The policies also require background checks for staff and contractors prior to hiring or enlisting services for a contractor and again every five years. All employees are fingerprinted. All applicants and employees who may have contact with inmates are directly asked about previous sexual misconduct as described in PREA Standard 115.17 (a) in written applications or interviews for hiring or promotions and in any interviews or written self-evaluations conducted as part of reviews of current employees. Procedures states material omissions regarding sexual misconduct, or the provision of materially false information, shall be grounds for termination. FDC will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work.</p> <p>Based on a review of procedures and rules, documentation and employee personnel files, as well as an interview with the Business Manager/Human Resource staff, Warden, Agency PREA Coordinator and PREA Compliance Manager, Madison CI is compliant with this standard.</p>

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>There has been no substantial expansion or modification at Madison CI during the last three years. As a result Madison CI Pre-audit evaluation, cameras were added to the dorm, laundry, food service and PRIDE in the past 12 months to enhance the facility's ability to protect inmates from sexual abuse. There currently are 167 cameras at the facility.</p> <p>Based on the tour of the facility and interview with the Warden and PREA Compliance Manager, Madison CI is compliant with this standard.</p>

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 and 108.015 Sexual, Battery, Sexual Harassment, and Sexual Misconduct Investigations were reviewed and address the requirements of this standard. The Office of Inspector General (OIG) conducts all criminal investigations and administrative investigations involving sexual abuse. This is a division within the Florida Department of Correction. The auditor interviewed one of the OIG Investigators and he stated that each and every administrative and criminal investigation at Madison CI must adhere to the investigative and evidence protocols 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. He stated that investigators are required to follow uniform evidence protocols that maximizes the potential for obtaining usable physical evidence for criminal prosecutions as required by policy. Madison CI does not house inmates under the age of 18.</p> <p>Madison CI does not send inmate victims of sexual assault out for forensic exams. Instead they have a Memorandum of Understanding (MOU) with Sexual Assault Response Team. This private contract provider responds to the facility Medical Unit with a SANE/SAFE nurse who conducts the examination. If there is not one a SANE/SAFE Nurse available the examination is conducted by a qualified medical practitioner. There were no forensic exams conducted by SANEs/SAFEs during the past 12 months. Emergency healthcare as well as forensic examinations by SANEs/SAFEs are provided at no cost to the inmate.</p> <p>If requested by the victim, a qualified victim advocate from a qualified community based organization supports the victim through the forensic medical examination process and investigatory interviews providing emotional support, crisis intervention and referrals. This is outlined in Procedure 602.053, the Inmate Handbook, and the FDC Sexual Awareness pamphlet for Inmates. FDC has a contract with Safe Place and Rape Crisis Center, Inc. to provide advocacy services to victims of sexual abuse. Madison CI makes available to the victim a victim advocate from a rape crisis center. In the past 12 months, there were no requests for victim advocacy services.</p> <p>The review of policies and procedures, as well as interviews with the Warden, OIG Investigator and a SANE provider, Madison CI is compliant with this standard.</p>

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedures 602.053, 108.001 Authority of the Inspector General, 108.003 Investigative Process, 108.015 Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations and the Agency website were reviewed and address the requirements of this standard. The procedures require an administrative or criminal investigation be completed for all allegations of sexual abuse and sexual harassment. The procedure and State Statues regarding investigations are posted on the agency website.</p> <p>The Office of Inspector General (OIG) has the legal authority to conduct criminal and administrative investigations within all prison in the State including the private facilities. All investigations are referred to OIG, and they are responsible for conducting all investigations involving sexual abuse and all criminal investigations. They can refer inmate-on inmate sexual harassment allegations back to the facility to investigate. The auditor interviewed one of the OIG Investigators and he stated that for each and every allegation of sexual abuse/harassment allegation received at Madison CI an administrative and criminal investigation was conducted. In the past 12 months there were 30 allegations of sexual abuse/harassment reported. All 30 allegations were referred to OIG. There were eleven (11) allegations of staff sexual misconduct and one (1) allegation of staff sexual harassment. Five (5) of the allegations were unfounded and the remaining seven (7) investigations remain open. There were eleven inmate-on-inmate sexual abuse allegations, three (3) of the investigations were closed with a finding of unfounded and the remaining eight (8) remain open. There were seven (7) allegations of inmate-on-inmate sexual harassment, four (4) of the investigations were closed with a finding of unsubstantiated and three (3) remain open.</p> <p>The review of procedures, PREA tracking logs and interviews with the PREA Compliance Manager and OIG Investigator confirm Madison CI is compliant with this standard.</p>

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, PREA Staff Training Curriculum and PREA Staff training records and acknowledgments were reviewed and address the requirements of this standard. The training curriculum demonstrated the training covered: zero-tolerance policy for sexual abuse and sexual harassment; how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; the inmate's right to be free from sexual abuse and sexual harassment; the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; the dynamics of sexual abuse and sexual harassment in confinement; the common reactions of sexual abuse and sexual harassment victims; how to detect and respond to signs of threatened and actual sexual abuse; how to avoid inappropriate relationships with inmates; how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities; and transgender and intersex searches. Training is described by the agency as gender neutral.</p> <p>Madison CI staff members receive initial PREA training as well as PREA training annually through scheduled mandatory training. Staff interviewed were versed in the zero tolerance policy; their responsibilities in reporting sexual abuse/sexual harassment; their first responder duties; evidence preservation; and transgender and intersex searches.</p> <p>Based on the review of policy, the staff training curriculum, rosters and signed training acknowledgments, as well as interviews with staff, Madison CI is compliant with this standard.</p>

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Training lesson plan, "Prison Rape Elimination Act Training for Interns, Volunteers and Contractors Read and Sign, and signed training acknowledgments were reviewed and address the requirements of this standard. The lesson plan was reviewed and found to be comprehensive, in that it included the objectives of the training to ensure volunteers and contractors are notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and are informed on how to report such incidents. Interviews with contractors and volunteers demonstrated their knowledge of the PREA, their responsibilities as it relates to the PREA and the agency zero tolerance policy. Signed training acknowledgements were also reviewed.</p> <p>Based on the review of policy, training lesson plan and supporting documentation and an interview with contractors and volunteers, Madison CI is compliant with this standard.</p>

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Procedure 601.210 Inmate Orientation, Inmate Handbook, PREA video, Sexual Abuse Awareness pamphlet and PREA Brochures, and signed inmate acknowledgement forms were reviewed and address the requirements of this standard. Procedures require that all inmates receive PREA information upon arrival and PREA education within 30 days of intake. During intake, inmates are provided information through a PREA Sexual Abuse Awareness brochure (available in 7 different languages) that explains the agencies zero tolerance policy regarding sexual abuse and sexual harassment; and how to report such incidents while at Madison CI. Staff members cover basic PREA information verbally. A PREA video is played during intake. During orientation, they receive additional information which expands on the previous information provided. Inmates acknowledge receiving the PREA information and watching the PREA video in writing. PREA information is continuously and readily available or visible to inmates. PREA posters and brochures are posted throughout the facility in formats accessible to all inmates to ensure that key information is continuously and readily available or visible to inmates. Information on the posters and in the handouts, include: the zero tolerance policy; inmate rights; how to report; what to expect after you report; and how to protect yourself against sexual assault. The policies require information be provided in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills.</p> <p>During interviews, inmates acknowledged the information being provided upon arrival and during orientation, and have seen posters displayed throughout the institution. The inmates interviewed knew the zero-tolerance policy; how and who to report to; and that they have the right to be free from retaliation for reporting such incidents. The auditor reviewed the signed inmate training acknowledgements, which demonstrated inmates received PREA information upon arrival and acknowledged, in writing, they received the education manual, watched the PREA video and understood the training.</p> <p>Based on the review of procedures and documentation and brochures and posters, as well as interviews with staff and inmates, Madison CI is compliant with this standard.</p>

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, PREA Specialized Investigation Training Lesson Plan, PREA basic training records and signed employee training acknowledgements were reviewed and address the requirements of this standard. The Procedure requires that investigators receive specialized training, in addition to the general education provided to all employees.</p> <p>The auditor reviewed the training curriculum developed by the Moss group, (Investigating Sexual Abuse in Confinement Setting: Training for Investigators) and it covered all requirements of the standard, to include techniques for interviewing sexual abuse victims; proper use of Miranda and Garrity warnings; sexual abuse evidence collection in confinement settings; and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Documentation was reviewed that indicates all investigators have received both the general and specialized investigation PREA training. Per an interview with an investigator, he stated he attended the two day specialized training as well as other investigative training and was able to articulate the information provided.</p> <p>Based on review of procedure, Interview with an investigator and the review of the training lesson plan and records confirms Madison CI is compliant with this standard.</p>

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 and FDC Health Services Bulletin 15.03.36 Post Sexual Battery Medical Attention were reviewed and address the requirements of this standard. The procedure requires all full time and part-time medical and mental health care practitioners receive the same training every employee receives on the agency zero tolerance policy. Madison CI contract for medical/mental health services with Centurion Health Service. The Health Service Bulletin 15.03.36 requires that all full time and part time medical/mental health practitioners also receive training on how to preserve physical evidence of sexual abuse, how to detect and assess signs of sexual abuse and sexual harassment how and to whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p>The auditor conducted interviews with medical and mental health practitioners during the site visit. These medical practitioners told the auditor that in addition to PREA training for all contractors, they are required to take additional training. This one time training requirement is documented at the facility. The auditor was also provided this documentation, showing the curriculum for this training and attendance records. All full time and part time medical and mental health staff currently employed at Madison CI has received this training.</p> <p>Based on procedures, lesson plan, training records and documents and interviews with medical and mental health staff, Madison CI is compliant with this standard.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>FDC Procedures 602.053, 601.210 and 601.209 Reception Process- Initial Classification were reviewed and address the requirements of this standard. The procedures require the facility to conduct a screening for risk of sexual victimization and abusiveness within 72 hours of an inmate's arrival; a follow-up screening for risk of sexual victimization and abusiveness within a set time period, not to exceed 30 days from the inmate's arrival at the facility; and reassessment of an inmate's risk level again when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness.</p> <p>Madison CI conducts initial and reassessments utilizing the Sexual Risk Indicators (SRI) which is an objective and standardized screening instrument by a trained Classification staff member. initial screenings are typically completed immediately upon arrival. The facility reassesses each inmate's risk of victimization or abusiveness, as directed, within 30 days of arrival. The assessment process is computerized and information obtained becomes part of the Agency Inmate Behavioral Assessment Scale (IBAS). The system has been designed to identify the potential risk each inmate presents for predatory behaviors or their potential risk to be preyed upon by other inmates. The intent is for this system to be designed as an integrated web application that pulls required information from the Offender Based Information System mainframe, calculates the IBAS and Sexual Risk Indicators (SRI) designations.</p> <p>The assessment begins by asking the inmate: (1) if he has a mental, physical, or developmental disability; (2) his age; (3) whether the inmate has previously been incarcerated; (4) whether the inmate's criminal history is exclusively nonviolent; (5) whether the inmate has prior convictions for sex offenses against an adult or child; (6) whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming; (7) whether the inmate has previously experienced sexual victimization; (8) for his own perception of his vulnerability; (9) and conducts an assessment of the physical build of the inmate. The staff member also assesses if the inmate is perceived to be gender nonconforming. Any inmate who may be at risk based on this screening has a Medical and/or Mental Health referral immediately completed and forwarded on his behalf.</p> <p>The auditor interviewed intake and classification staff and reviewed the computerized information. All the criteria referenced in the standard are on the current form. Staff interviews confirmed appropriate controls have been implemented to ensure that sensitive information is not released and exploited by staff or other inmates. Inmates are not disciplined for refusing to answer, or for not disclosing complete information in response to questions asked.</p> <p>Based on the review of procedures and documentation, as well as staff and inmate interviews, Madison CI is compliant with this standard.</p>

115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>FDC Procedures 602.053, 601.209 and 403.012 Identification and Management of transgender Inmates and Inmates Diagnosed with Gender Dysphoria and were reviewed and address the requirements of this standard. The procedures outline the use of the screening information, to include using the risk screening to determine housing, bed, treatment and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive; and making individualized determinations about how to ensure the safety of each inmate. These housing and program assignments are made on a case-by-case basis. All bed assignments made at Madison CI are processed through the CDC (Classification Data Center) that is part of the IBAS system. It utilizes all inmate data from the SRI and will not allow the double bunked cell assignment of: a victim and abuser, inmates with significant age differences and inmates with size differences. Should someone try and move an inmate when these differences are noted, the computer will not allow the cell change.</p> <p>There are no dedicated housing units based on sexual identity at Madison CI. This was confirmed during interviews with those inmates identifying as transgender, gay or bisexual. Each indicated they were not currently or ever housed on dedicated housing. Transgender and intersex inmates are given the opportunity to shower separately from other inmates.</p> <p>The procedures state the agency shall consider on a case-by-case basis where to assign a transgender or intersex inmate, housing and programming assignments, based on the inmate's health and safety, the inmate's own views with respect to his or her own safety, and whether the placement would present management or security problems. Additionally, the procedure requires placement and program assignments to be reviewed twice a year for each transgender or intersex inmate. There were no transgender inmates at Madison CI during the on-site audit.</p> <p>The review of procedures, supporting documentation, The IBAS system and interviews with the Warden, Classification staff, intake staff and LGBTI inmates confirm Madison CI exceeds the requirement of this standard.</p>

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 and Florida Administrative Code Chapter 33-602-220 Administrative Confinement were reviewed and meet the requirement of this standard. Inmates at high risk for sexual victimization are not placed in the 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. If an involuntary segregated housing placement is made the placement is reviewed on a weekly basis until other housing can be found. Segregated housing assignments will not exceed a period of thirty (30) days. Inmates placed in protective custody shall have access to program privileges, education, and work opportunities to the extent possible. If restrictions occur, the facility documents the restrictions, duration of the limitation, and reasons for the limitation. There were no inmates in involuntary segregation due to being at a high risk of sexual victimization in the past 12 months of the audit.</p> <p>The review of procedures and support documentation and interview with the Warden, Major and segregated housing staff confirm Madison is compliant with this standard.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Florida Administrative Code (FAC) Chapter 33-103.006 Formal Grievance, Sexual Abuse Awareness brochures and posters, the Inmate Handbook, PREA training lesson plan and the FDC website were reviewed and address the requirements of this standard. The inmate Handbook, PREA brochures, and multiple posters displayed throughout the facility provide specific internal and external ways for inmates to report sexual abuse, sexual harassment and retaliation by other inmates or staff. Interviews with inmates verified they were aware of multiple internal and external ways to report incidents of sexual abuse, sexual harassment and retaliation. Inmates can report verbally and in writing to staff; through a third party, by submitting a grievance, by calling the TIPS hotline or to an outside advocacy group. During the tour, the PREA reporting phone numbers were checked and found to be in working order.</p> <p>FDC employees may report Sexual Abuse or Sexual Harassment to the Chief of Security, Major, Warden or OIG privately, if requested. Staff members accept reports made verbally, in writing, anonymously and from third parties, and are required to promptly document any verbal reports.</p> <p>A review of procedures and PREA information provided to inmates, training material, FDC website, observation during the tour of the institution and interviews with staff and inmates confirm Madison CI is compliant with this standard.</p>

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FAC Chapter 33-103.006, Chapter 33-103.005 Informal Grievance and the Agency's website were reviewed and address the requirements of this standard. Madison CI does not impose a time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse; does not require an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse; ensures 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, and such grievance is not referred to a staff member who is the subject of the complaint; and issues 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.</p> <p>In the past 12 months there were ten (10) grievances filed and all ten (10) grievances received a final decision within the 90 days. There were zero (0) number of imminent risk grievances and zero (0) emergency grievances. Additionally, no extensions were required by the agency.</p> <p>Third parties, including other inmates, staff members, family members, attorneys, and outside advocates, are permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. The grievance procedure and form is available on the Agency web site for family and friends of any inmate to file a grievance on his behalf. The agency may discipline an inmate for filing a grievance related to alleged sexual abuse only where the facility demonstrates that the inmate filed the grievance in bad faith. Inmates are informed of grievance procedures in the Inmate Handbook and during orientation.</p> <p>A review grievance procedures and supporting documentation, Agency website, Inmate Handbook and interviews with staff and inmates confirm Madison CI is compliant with this standard.</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, Inmate Handbook and PREA posters and pamphlets were reviewed and address the requirements of this standard. The procedure states Inmates shall be provided access to outside victim advocates for emotional support services related to sexual abuse by giving inmates the mailing address and telephone number for Gulf Coast Children's Advocacy Center, and the facility shall enable reasonable communication between inmates and the Advocacy Center, in as confidential a manner as possible.</p> <p>The auditor tested the phone number to the Advocacy Center while on-site and found it to be working. Interviews with inmates found most inmates were aware of the confidential support services provided. FDC has a MOU with this agency which expires on February 29, 2020.</p> <p>The review of procedure, MOU, Inmate Handbook, PREA posters and pamphlets, along with interviews of staff and inmates, confirm Madison CI is compliant with this standard.</p>

115.54	Third-party reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, the FDC and OIG website and PREA posters were reviewed and address the requirements of this standard. The procedure establishes a method to receive third-party reports of sexual abuse and sexual harassment and to distribute publicly, information on how to report sexual abuse and sexual harassment on behalf of an inmate. The Agency website outlines methods to report sexual abuse and sexual harassment on behalf of an inmate. Third party grievance forms are available on the website and are sent to the facility's Warden. Inmates can accomplish third-party reporting by having a friend or family member contact the OIG Bureau of State investigations through the complaint form on the OIG's website. The electronic form will go directly to the OIG for review. Posters on display at the facility provide the visitors, staff and inmates with third party reporting options. Interviews with inmates demonstrated they knew how third-party reporting could be accomplished.</p> <p>A review of procedure, PREA posters, the Agency and OIGs website, as well as interviews with staff and inmates, confirm Madison CI exceeds the requirement of this standard.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 and the PREA training curriculum were reviewed and address the requirements of this standard. The procedure require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; requires all staff to report immediately any retaliation against inmates or staff who reported such an incident; requires all staff to report immediately any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation; and for staff not to reveal any information related to a sexual abuse report to anyone other than to the extent necessary. Madison CI does not house inmates under the age of 18. There were no incidents involving vulnerable adults that required mandatory reporting per State Statutes.</p> <p>Interviews with staff verified they were aware they must immediately report to the facility's designated staff any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment; and that they are prohibited from revealing information related to a sexual abuse report other than to people authorized to discuss the report. The contracted health care agency (Centurion) also requires its medical and mental health practitioners to report according to FDC policy/procedure and PREA law. Healthcare staff are required to reveal the limits of confidentiality at the initiation of services. All allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, are reported to OIG and investigated.</p> <p>A review of the procedure, documentation and the training curriculum and interviews with staff confirm Madison CI is compliant with this standard.</p>

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053, FAC 33-602.220 and the PREA training curriculum were reviewed and address the requirements of this standard. Policies and training require staff to take immediate action to protect any inmate they learn is subject to substantial risk of imminent sexual abuse. Interviews with staff demonstrate they know the steps to take to protect an inmate subject to risk of imminent sexual abuse. Security personnel immediately employ protection measures as the information is passed to the PREA Compliance Manager. Per interview with the Warden, immediate action includes separation; monitoring; changing the housing and/or work assignments; and placing the abuser in another facility or requesting a transfer. No inmates reported being at substantial risk of imminent sexual abuse, during the past twelve months.</p> <p>A review of the procedure, code and the training curriculum and interviews with the Warden and staff confirm Madison CI is compliant with this standard.</p>
115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 was reviewed and addresses the requirements of this standard. When an allegation is received that an inmate was sexually abused while confined at another institution, the procedure requires the Warden to notify the Warden, where the alleged abuse occurred within 72 hours after receiving the allegation. The procedure also requires that all sexual abuse allegations reported by another institution regarding any inmate that was confined at Madison CI be fully investigated. An interview with the Warden and PREA Compliance Manager confirmed their knowledge of the procedure and their responsibility to report and investigate any allegations that may have occurred at Madison CI. The Warden would forward an email to document the notification. There were no allegations reported that an inmate was sexually abused while confined at another institution in the past 12 months. Additionally, Madison CI did not receive information from another facility that an inmate alleged sexual abuse while housed at Madison CI in the past 12 months.</p> <p>A review of the procedure and interviews with the Warden and PREA Compliance Manager confirm Madison CI is compliant with this standard.</p>

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>FDC Procedure 602.053 and the PREA training lesson plan and records were reviewed and address the requirements of this standard. The Procedure directs how to respond to an allegation of sexual abuse for both security and non-security staff. Random interviews with security and non-security staff confirmed they were very knowledgeable about what to do upon learning an inmate was sexually abused, to include separating the alleged victim and abuser and to preserving and protecting the crime scene. If the abuse occurred within a time period that still allows for the collection of physical evidence, staff would request that the alleged victim and alleged abuser not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing their teeth, changing clothes, urinating, defecating, smoking, drinking or eating.</p> <p>A review of the procedure, PREA lesson plan and interviews with staff confirm Madison CI is compliant with this standard.</p>

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Madison CI has developed a written institutional plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership. The PREA Coordinated Response Plan is comprehensive in describing required actions by security and specialized staff. Interviews with staff (Warden, Shift Supervisors, PREA Compliance manager, first responders, medical/mental health, and investigators) confirmed staff members were knowledgeable about the Response plan and their specific responsibilities as they relate to responding to sexual abuse investigations the coordinated duties and collaborative responsibilities.</p> <p>A review of Madison CI Coordinated Response Plan and interviews with staff confirm Madison CI is compliant with this standard.</p>

115.66 Preservation of ability to protect inmates from contact with abusers

Auditor Overall Determination: Meets Standard

Auditor Discussion

The State of Florida Collective Bargaining Agreement with Teamsters Local Union 2011 was reviewed and addresses the requirements of this standard. FDC has the ability to protect inmates from contact with abusers; the agreement does not interfere with the ability of the FDC to remove alleged staff abusers from contact with inmates. The facility can remove alleged staff sexual abusers from contact with any offenders or place an employee on administrative leave pending the outcome of an investigation and is compliant with this standard.

Based on review of the agreement and interview with the Warden, Madison CI is compliant with this standard.

115.67 Agency protection against retaliation

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and Retaliation Monitoring logs were reviewed and address the requirements of this standard. Madison CI designated the Assistant Warden and Classification staff as responsible for monitoring retaliation (Assistant Warden monitor staff, Classification staff monitor inmates). The procedure also state facilities shall provide multiple protection measures for inmates or staff members who fear retaliation for reporting sexual abuse/sexual harassment or for cooperating with investigations. Monitoring will occur for at least 90 days following the report of the allegation and may go beyond the 90 days, if the monitoring indicates a continuing need.

Interviews with the Assistant Warden and Classification indicated Madison CI uses multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff members or inmate abusers from contact with the victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Per the PAQ and interview with the Assistant Warden, there were no incidents of retaliation in the past 12 months.

A review of the procedure and monitoring log and interviews with the Associate Warden and Classification Supervisor confirms Madison CI is compliant with this standard.

115.68 Post-allegation protective custody

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and FAC Chapter 33-602.220 were reviewed and address the requirement of this standard. The procedure prohibits the placement of inmates who alleged to have suffered sexual abuse in segregated housing unless an assessment of all available alternatives has been made and there is no available means of separation from the likely abuser (for no longer than 72 hours). The use of segregated housing to protect inmates who allege to have suffered sexual abuse is subject to those requirements outlined in 115.43.

In the past 12 months no inmates were placed in involuntary segregation from one hour to 24 hours. The auditor toured and confirmed no inmates were housed in the Segregation Unit for protection from sexual abuse.

A review of procedure, code and interviews with the Warden and segregated housing staff confirm Madison Ci is compliant with this standard.

115.71 Criminal and administrative agency investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedures 602.053 and 108.003 and the PREA Incident Tracking Log were reviewed and address the requirements of this standard. The procedures require that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment. Allegations reviewed by Madison CI are promptly reported to OIG and the Management Information Notification System (MINS). OIG conducts its investigations using uniform evidence protocols.

An interview with the OIG Investigator indicated that the credibility of an alleged victim, suspect, or witness is assessed on an individual basis and not determined by the person's status as an inmate or staff member. He also indicated that by procedure they do not require the inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling devices as a condition for proceeding with the investigation of such an allegation. The Investigator detailed the investigative process to the auditor. The typical case involves gathering and preserving direct and circumstantial evidence, including available physical and DNA evidence, available electronic monitoring data, conducted interview notes with alleged victims, suspected perpetrators, and witnesses, and also includes reviewing any prior complaints and reports of sexual abuse involving the suspected perpetrator. The departure of the alleged abuser or victim from the employment or control of Madison CI does not provide a basis for terminating any investigation. The auditor reviewed all closed case files for the past 12 months found the investigation report to include a description of the incident, the evidence collected, and summaries of interviews and findings.

In the past 12 months there were 30 allegations of sexual abuse/harassment reported. All 30 allegations were referred to OIG. There were eleven (11) allegations of staff sexual misconduct and one (1) allegation of staff sexual harassment. Five (5) of the allegations were unfounded and the remaining seven (7) investigations remain open. There were eleven inmate-on-inmate sexual abuse allegations, three (3) of the investigations were closed with a finding of unfounded and the remaining eight (8) remain open. There were seven (7) allegations of inmate-on-inmate sexual harassment, four (4) of the investigations were closed with a finding of unsubstantiated and three (3) remain open. There were no substantiated allegations that were referred for criminal prosecution.

The investigator provided documentation of annual PREA training and the specialized training for PREA investigators. When conducting administrative investigations, the investigators always decide whether staff actions or failures to act contributed to the abuse. FDC retains all written investigation reports for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

A review of procedures, the training curriculum, investigative file and interview with investigator confirm Madison CI is compliant with this standard.

115.72 Evidentiary standard for administrative investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 108.003 Investigative Process was reviewed and addresses the requirement of this standard. The procedure defines preponderance of the evidence and findings are based on this standard. Interviews with the OIG Investigator and Warden found that Madison CI does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.

A review of the procedure and interviews with the Warden and OIG Investigator confirm Madison CI is compliant with this standard

115.73 Reporting to inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedures 108.015 and 602.053 were reviewed and address the requirements of this standard. OIG is responsible for investigation of PREA incidents. The investigative procedures and processes include reporting to the inmates. Per the procedures, every allegation is investigated and every investigated allegation was reported to the inmate in writing with a finding of such an investigation as to whether it was substantiated, unsubstantiated or unfounded. if the allegation is against a staff member, the facility shall inform the inmate whenever the staff member is no longer posted within the inmate's unit, no longer employed at the facility, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the inmate allegation is against an inmate, the facility shall inform the inmate whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or has been convicted on a charge related to sexual abuse within the facility.

A review of the investigation file revealed that victims are notified of the outcome of investigations unless the victim had been released prior to the conclusion of the investigation. The notifications are documented on the OIC Complaint Review Report.

A review of procedures, investigative file and interview with the Warden and OIG Investigator confirm Madison CI is compliant with this standard.

115.76 Disciplinary sanctions for staff

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053, Procedure 208.038 Employee Counseling and Discipline, FAC Chapter 60L-36-005 Disciplinary Standards, FAC Chapter 33-208.003 Range of Disciplinary Actions and Florida Statute 944.35 were reviewed and address the requirements of this standard. Staff members are subject to disciplinary sanctions for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse; and disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. In the past 12 months, no staff members were terminated nor were there any instances requiring notification to a licensing body.

A review of procedures, codes and statutes and interviews with the Warden and PREA Coordinator confirm Madison CI is compliant with this standard.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and Procedure 205.002 Contract Penalties were reviewed and address the requirements of this standard. Procedures prohibit contractors or volunteers who engaged in sexual abuse to have contact with inmates and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

In the past 12 months there have been zero (0) number of contractors or volunteers who have been reported to law enforcement for engaging in sexual abuse of inmates. Additionally, in the past 12 months there have been no allegations by contractors or volunteers regarding sexual abuse or sexual harassment. Interviews with contractors and volunteers confirmed they were aware the punishment for engaging in sexual abuse or sexual harassment of inmates.

A review of procedures and interviews with the Warden, contract staff and volunteers confirm Jefferson CI is compliant with this standard.

115.78 Disciplinary sanctions for inmates

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053, FAC Chapter 33-601-301 Inmate Discipline, Chapter 33-601314 Prohibitive conduct were reviewed and address the requirements of this standard. Inmates are subject to disciplinary sanctions following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for inmate-on-inmate sexual abuse; sanctions are 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. The disciplinary process takes into consideration whether an inmate's mental disabilities or mental illness contributed to his or her behavior. The facility will only discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Policy states a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred will not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. In the past 12 months, there have been no inmate on inmate administrative or criminal sexual abuse findings. Madison CI prohibits all sexual activity between inmates and disciplines inmates for such activity. Interviews with mental health staff indicates the facility offers therapy and/or counseling to inmate sexual abusers.

A review of procedure, practice and code policies and interviews with the Warden, Major and Mental Health staff confirm Madison CI is compliant with this standard.

115.81 Medical and mental health screenings; history of sexual abuse

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 was reviewed and addresses the requirement of this standard. The procedure states if the results of an SRI assessment or medical assessment indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate shall be offered a follow-up meeting with a medical or mental health practitioner within fourteen (14) days of the screening.

Interviews with Classification staff indicated that while conducting risk assessment (SRI) if they becomes aware through other information or through the assessment that the inmate was ever victimized or ever perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening. The computerized SRI assessment automatically notifies medical and mental health once the individual performing the assessment checks prior victim or prior abuser. If medical staff makes a referral to mental health for a victim or perpetrator a paper copy of a referral is used.

The auditor interviewed mental health staff and confirmed a mental health screening evaluation is completed and documented. Informed consent is obtained for inmates who were victimized, not in an institutional setting. Madison CI does not house inmates under age 18. This informed consent is documented. A review of the mental health screening report indicates inmates are seen within 7 days of a referral. The auditor interviewed inmates who disclosed prior victimization either upon arrival at Madison CI or it was noted in their record. All of them indicated they were referred to medical or mental health.

The procedure mandates that information relating to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, state, or local law.

A review of procedure, documentation and interviews with classification, Medical/Mental Health staff and inmates confirm Madison CI is compliant with this standard.

115.82 Access to emergency medical and mental health services

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and Procedure 401.010 Co-payment Requirements for Inmate Medical Encounter were reviewed and address the requirements of this standard. Procedures state inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment; and inmate victims of sexual abuse while incarcerated shall be offered timely information about sexually transmitted infections prophylaxis, Madison CI is an all male facility. in accordance with professionally accepted standards of care, where medically appropriate. Treatment and forensic exams are contracted to be accomplished on site. Healthcare staff, when asked, all considered the level of care comparable to (or better than) the community level of care. The services are provided at no cost to inmates regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

A review of procedures and supporting documentation as well as interviews with Medical and Mental Health staff confirm Madison CI is compliant with this standard.

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

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedures 602.053, 401.01 and Florida Health Service Bulletin 15.03.36 Post Sexual Battery Medical Action were reviewed and address the requirements of this standard. Procedures and interviews with Medical and Mental Health staff indicate Madison CI offers medical and mental health evaluations and, as appropriate, follow-up services and treatment to all inmates who have been victimized by sexual abuse. Inmates will be offered prophylactic treatment and follow-up for sexually transmitted or other communicable diseases; counseling and testing; and will be referred to the mental health staff for crisis intervention as necessary. Madison CI does not house female inmates. Medical and Mental Health staff, when asked considered the level of care comparable to (or better than) the community level of care. Mental health evaluations are conducted on all known inmate-on-inmate abusers within 60 days of learning of such abuse. Victims are provided services without cost whether the victim names the abuser or cooperates with any investigation

A review of procedures and support documentation and interviews with medical and mental health staff confirm Madison CI is compliant with this standard.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 was reviewed and addresses the requirements of this standard. The Procedure identifies the minimum members of the review team and covers the process for sexual abuse incident reviews, to include the form the review team uses. The form addresses whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; 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 institution; whether physical barriers in the area may enable abuse; the adequacy of staffing levels in that area during different shifts; and whether monitoring technology should be deployed or augmented to supplement supervision by staff.

Madison CI conducted a sexual abuse incident review at the conclusion of every investigation that was substantiated or unsubstantiated. The review team is chaired by the PREA Compliance Manager, who is the Assistant Warden and includes the Chief of Security, Classification Supervisor, and is assisted by line supervisors, investigators, and medical or mental health practitioners. The auditor reviewed all the Sexual Abuse Incident Review Reports (SAIR) completed in the past 12 months. Incident review team members were interviewed and were knowledgeable of the process.

A review of the procedure, completed SAIRs and interviews with the incident review team members confirm Madison CI is compliant with this standard.

115.87 Data collection

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and the 2017 FDC PREA Corrective Action Plan were reviewed and address the requirements of this standard. Procedure requires uniform data be collected for every incident of sexual abuse alleged to have occurring at Madison CI using a standardized instrument and set of definitions. The PREA Compliance Manager at Madison CI is responsible for collecting specific PREA data and submitting it to the FDC central office. The Agency PREA Coordinator is responsible for collecting data from the agency institutions/facilities and ensuring that such data includes the information necessary to complete the Federal Bureau of Justice Statistics "Survey of Sexual Victimization (SSV) form.

The data is used to assist the department in prevention, detection, and response policies, practices, and training. Interview with the Agency PREA Coordinator indicated the data is aggregated and an annual report prepared and compared to prior year reports, thus assisting in identifying problem areas, and taking corrective actions.

A review of the procedure, 2017 FDC Annual PREA Report, as well as an interview with the Agency PREA Coordinator and PREA Compliance Manager, confirm Madison CI is compliant with this standard.

115.88 Data review for corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053, Agency website and the Agency and Facility Annual PREA Reports were reviewed and address the requirements of this standard. The procedure outlines that the Agency PREA Coordinator is responsible for compilation and reporting of data necessary to complete the PREA SSV survey administered by the Federal Bureau of Justice Statistics. The annual Prison Rape Elimination Act (PREA) Correction Action Plan is published on the Agency website. This plan, signed by the Secretary of the FDC was reviewed by the auditor. The plan emphasizes zero tolerance and focuses on a victim centered approach. The plan indicated that in 2017 improvements made to policies and procedures; physical plant modifications and installation of additional cameras,; FDC has executed several Memorandum of Agreements, (MOA) with local Rape Crisis Centers and additional inmate education.

A review of the procedure, Annual PREA Report and the agency website, as well as an interview with the PREA Coordinator, confirm Madison CI meets the requirement of this standard.

115.89 Data storage, publication, and destruction

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC Procedure 602.053 and the Annual PREA Report for 2017 were reviewed and address the requirements of this standard. All sexual abuse data collected pursuant to this procedure is maintained and properly stored and secured as follows: allegations of sexual abuse or sexual battery records shall be retained by the agency for ten (10) years after the date of the initial collection or for the incarceration of the victim or employment of the subject, +5 years, whichever is longer. The Institution PREA Compliance Managers are responsible for uploading documents into the electronic retention file once a PREA case is completed. Access to data is controlled. Aggregate data on all FDC facilities is available to the public through its website per the Annual Corrective Action Plan and SSV reports. Before making aggregated sexual abuse data publicly available, FDC removes all personal identifiers.

A review of the procedure, 2017 Annual PREA Report/Corrective Action Plan, the agency website and interview with the PREA Coordinator, confirm Madison CI is compliant with this standard.

115.401 Frequency and scope of audits

Auditor Overall Determination: Meets Standard

Auditor Discussion

FDC indicated there were PREA Audit conducted for all of their correctional facilities within the first cycle as required by the standard. However a final PREA audit report has not been received for all facilities. The Agency is now in the second year of the second cycle of conducting PREA audits for its facilities including private contracted facilities. Each contract permits contract monitoring and requires the Program to achieve and maintain PREA Compliance as well as a PREA Audit. The auditor has reviewed the agency website, and Agency Secretary and the Agency PREA Coordinator have been interviewed.

The auditor was given access to and an opportunity to tour and visit all areas of the facility. The auditor received copies of any relevant documents requested (including electronically stored information). The auditor was provided with an office that ensured privacy in conducting interviews with inmates and staff during the site visit. Notice of PREA audit was posted on October 3, 2018. Interviews with inmates stated they have seen the posting.

115.403 Audit contents and findings

Auditor Overall Determination: Meets Standard

Auditor Discussion

The auditor reviewed the agency website which contained 76 final audit reports from 2014 through 2018 which are either for the first or second audits cycle of a facility. The most recent final audit report issued was dated 8/24/2018 which was published within 90 days of issue. Per Interview with the Agency PREA Coordinator, the Agency places completed audit reports on the Agency web site as required. It has provided these documents since 2014 and continues to post them within 2 weeks of the documents being provided to them by the auditor. The previous audit report for Madison CI was conducted on September 9-10, 2015 and is was published on the Agency's website. This is the second audit of this facility.

Review of the agency website and interview with the Agency PREA Coordinator confirms Madison CI is compliant with this standard.

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 yes all forms of sexual abuse and sexual harassment?

Does the written policy outline the agency's approach to preventing, yes detecting, and responding to sexual abuse and sexual harassment?

115.11 (b) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

Has the agency employed or designated an agency-wide PREA yes Coordinator?

Is the PREA Coordinator position in the upper-level of the agency yes hierarchy?

Does the PREA Coordinator have sufficient time and authority to yes develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?

115.11 (c) Zero tolerance of sexual abuse and sexual harassment; PREA coordinator

If this agency operates more than one facility, has each facility yes designated a PREA compliance manager? (N/A if agency operates only one facility.)

Does the PREA compliance manager have sufficient time and authority yes to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)

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 yes 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.)

115.12 (b) Contracting with other entities for the confinement of inmates

Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".)

115.13 (a) Supervision and monitoring

Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?

Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?

Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into

consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring?

Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? yes

Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? yes

Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? yes

Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring ? yes

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.) yes

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).) na

115.14 (b) Youthful inmates

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).) na
- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).) na

115.14 (c) Youthful inmates

Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).) na

Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).) na

Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).) na

115.15 (a) Limits to cross-gender viewing and searches

Does the facility always refrain from conducting any cross-gender 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 in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) 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 here for facilities with less than 50 inmates before August 20,2017.) yes

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? yes

115.15 (d) Limits to cross-gender viewing and searches

Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks? yes

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 yes

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?

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 with inmates with disabilities including inmates who: Have intellectual disabilities? 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: 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 yes
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?

Do these steps include providing interpreters who can interpret yes
effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?

115.16 (c) Inmates with disabilities and inmates who are limited English proficient

Does the agency always refrain from relying on inmate interpreters, yes
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?

115.17 (a) Hiring and promotion decisions

Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? yes

Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? yes

Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? yes

Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? yes

Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? yes

Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above? yes

115.17 (b) Hiring and promotion decisions

Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or 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? 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 entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.) 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 such publication describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).) na

115.31 (a) Employee training

Does the agency train all employees who may have contact with inmates yes
on its zero-tolerance policy for sexual abuse and sexual harassment?

Does the agency train all employees who may have contact with inmates yes
on how to fulfill their responsibilities under agency sexual abuse and
sexual harassment prevention, detection, reporting, and response
policies and procedures?

Does the agency train all employees who may have contact with inmates yes
on inmates' right to be free from sexual abuse and sexual harassment

Does the agency train all employees who may have contact with inmates yes
on the right of inmates and employees to be free from retaliation for
reporting sexual abuse and sexual harassment?

Does the agency train all employees who may have contact with inmates yes
on the dynamics of sexual abuse and sexual harassment in
confinement?

Does the agency train all employees who may have contact with inmates yes
on the common reactions of sexual abuse and sexual harassment
victims?

Does the agency train all employees who may have contact with inmates yes
on how to detect and respond to signs of threatened and actual sexual
abuse?

Does the agency train all employees who may have contact with inmates yes
on how to avoid inappropriate relationships with inmates?

Does the agency train all employees who may have contact with inmates yes
on how to communicate effectively and professionally with inmates,
including lesbian, gay, bisexual, transgender, intersex, or gender
nonconforming inmates?

Does the agency train all employees who may have contact with inmates yes
on how to comply with relevant laws related to mandatory reporting of
sexual abuse to outside authorities?

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 such education? 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 have received training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes

115.34 (b) Specialized training: Investigations

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes
- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes
- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes
- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes

115.34 (c) Specialized training: Investigations

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) yes

115.35 (a) Specialized training: Medical and mental health care

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? 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? 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? yes
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? yes

115.35 (b) Specialized training: Medical and mental health care

If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams.) 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? 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? yes

Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? yes

115.41 (a) Screening for risk of victimization and abusiveness

Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? yes

Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? yes

115.41 (b) Screening for risk of victimization and abusiveness

Do intake screenings ordinarily take place within 72 hours of arrival at the facility? yes

115.41 (c) Screening for risk of victimization and abusiveness

Are all PREA screening assessments conducted using an objective screening instrument? yes

115.41 (d) Screening for risk of victimization and abusiveness

Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender 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) Whether the inmate is detained solely for civil immigration purposes?	yes

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when 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, when 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, when 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 a: Incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required 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 present management or security problems? yes

115.42 (d) Use of screening information

Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? yes

115.42 (e) Use of screening information

Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? yes

115.42 (f) Use of screening information

Are transgender and intersex inmates given the opportunity to shower separately from other inmates? yes

115.42 (g) Use of screening information

Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? 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? 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? yes

115.43 (a) Protective Custody

Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers? yes

If a facility cannot conduct such an assessment immediately, does 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 access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited?	yes
If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation?	yes
If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations?	yes

115.43 (c) Protective Custody

Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d) Protective Custody

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

115.43 (e) Protective Custody

In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? yes

115.51 (a) Inmate reporting

Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? yes

Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? yes

115.51 (b) Inmate reporting

Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? yes

Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? yes

Does that private entity or office allow the inmate to remain anonymous upon request? yes

Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? 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 this standard.) yes

Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) yes

115.52 (d) Exhaustion of administrative remedies

Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) yes

If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) yes

At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) yes

115.52 (e) Exhaustion of administrative remedies

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) yes
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) yes
- If the inmate declines to have the request processed on his or her 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
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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, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? yes

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 abuse or sexual harassment or retaliation? yes

115.61 (b) Staff and agency reporting duties

Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? yes

115.61 (c) Staff and agency reporting duties

Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? yes

Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? yes

115.61 (d) Staff and agency reporting duties

If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? yes

115.61 (e) Staff and agency reporting duties

Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? yes

115.62 (a) Agency protection duties

When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? yes

115.63 (a) Reporting to other confinement facilities

Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? yes

115.63 (b) Reporting to other confinement facilities

Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? yes

115.63 (c) Reporting to other confinement facilities

Does the agency document that it has provided such notification? yes

115.63 (d) Reporting to other confinement facilities

Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? yes

115.64 (a) Staff first responder duties

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser? yes
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? yes
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? yes
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? yes

115.64 (b) Staff first responder duties

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

115.65 (a) Coordinated response

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? yes

115.66 (a) Preservation of ability to protect inmates from contact with abusers

Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? yes

115.67 (a) Agency protection against retaliation

Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? yes

Has the agency designated which staff members or departments are charged with monitoring retaliation? yes

115.67 (b) Agency protection against retaliation

Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? yes

115.67 (c) Agency protection against retaliation

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? yes

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? yes

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? yes

115.67 (d) Agency protection against retaliation

In the case of inmates, does such monitoring also include periodic status checks? yes

115.67 (e) Agency protection against retaliation

If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation? yes

115.68 (a) Post-allegation protective custody

Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? yes

115.71 (a) Criminal and administrative agency investigations

When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) yes

Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).) yes

115.71 (b) Criminal and administrative agency investigations

Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? yes

115.71 (c) Criminal and administrative agency investigations

Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? yes

Do investigators interview alleged victims, suspected perpetrators, and witnesses? yes

Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? yes

115.71 (d) Criminal and administrative agency investigations

When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? yes

115.71 (e) Criminal and administrative agency investigations

Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? yes

Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? yes

115.71 (f) Criminal and administrative agency investigations

Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? yes

Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? yes

115.71 (g) Criminal and administrative agency investigations

Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? yes

115.71 (h) Criminal and administrative agency investigations

Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? yes

115.71 (i)	Criminal and administrative agency investigations	Does the agency retain all written reports referenced in 115.71(f) and (g) yes for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	
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).)	na
115.72 (a)	Evidentiary standard for administrative investigations	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	Following an investigation into an inmate's allegation that he or 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 abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? yes

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: yes
Law enforcement agencies (unless the activity was clearly not criminal)?

Is any contractor or volunteer who engages in sexual abuse reported to: yes
Relevant licensing bodies?

115.77 (b) Corrective action for contractors and volunteers

In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? yes

115.78 (a) Disciplinary sanctions for inmates

Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? yes

115.78 (b) Disciplinary sanctions for inmates

Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? yes

115.78 (c) Disciplinary sanctions for inmates

When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	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?	yes

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.) yes

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? 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 sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? yes

115.82 (a) Access to emergency medical and mental health services

Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment? yes

115.82 (b) Access to emergency medical and mental health 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.) na

115.83 (e) Ongoing medical and mental health care for sexual abuse victims and abusers

If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.) na

115.83 (f) Ongoing medical and mental health care for sexual abuse victims and abusers

Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? yes

115.83 (g) Ongoing medical and mental health care for sexual abuse victims and abusers

Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? yes

115.83 (h) Ongoing medical and mental health care for sexual abuse victims and abusers

If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) yes

115.86 (a) Sexual abuse incident reviews

Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? yes

115.86 (b) Sexual abuse incident reviews

Does such review ordinarily occur within 30 days of the conclusion of the investigation? yes

115.86 (c) Sexual abuse incident reviews

Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? yes

115.86 (d) Sexual abuse incident reviews

Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? yes

Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? yes

Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? yes

Does the review team: Assess the adequacy of staffing levels in that area during different shifts? yes

Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? yes

Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? yes

115.86 (e) Sexual abuse incident reviews

Does the facility implement the recommendations for improvement, or document its reasons for not doing so? yes

115.87 (a) Data collection

Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? yes

115.87 (b) Data collection

Does the agency aggregate the incident-based sexual abuse data at least annually? yes

115.87 (c) Data collection

Does the incident-based data include, at a minimum, the data necessary yes
to answer all questions from the most recent version of the Survey of
Sexual Violence conducted by the Department of Justice?

115.87 (d) Data collection

Does the agency maintain, review, and collect data as needed from all yes
available incident-based documents, including reports, investigation files,
and sexual abuse incident reviews?

115.87 (e) Data collection

Does the agency also obtain incident-based and aggregated data from yes
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.)

115.87 (f) Data collection

Does the agency, upon request, provide all such data from the previous yes
calendar year to the Department of Justice no later than June 30? (N/A if
DOJ has not requested agency data.)

115.88 (a) Data review for corrective action

Does the agency review data collected and aggregated pursuant to § yes
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?

Does the agency review data collected and aggregated pursuant to § yes
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?

Does the agency review data collected and aggregated pursuant to § yes
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.) no

If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.) yes

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 (f) Audit contents and findings

The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) yes