

PREA Facility Audit Report: Final

Name of Facility: Florida Women's Reception Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 06/12/2022

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: Brian Sutherland	Date of Signature: 06/12/2022

AUDITOR INFORMATION	
Auditor name:	Sutherland, Brian
Email:	bcsuther@gmail.com
Start Date of On-Site Audit:	04/26/2022
End Date of On-Site Audit:	04/28/2022

FACILITY INFORMATION	
Facility name:	Florida Women's Reception Center
Facility physical address:	3700 Northwest 111th place, Ocala, Florida - 34482
Facility mailing address:	

Primary Contact	
Name:	Patricia Rodgers
Email Address:	patricia.rodgers@fdc.myflorida.com
Telephone Number:	3522392135

Warden/Jail Administrator/Sheriff/Director	
Name:	Carol Casimir
Email Address:	carol.casimir@fdc.myflorida.com
Telephone Number:	3522991405

Facility PREA Compliance Manager	
Name:	Alexandria Barron
Email Address:	Alexandria.Barron@fdc.myflorida.com
Telephone Number:	M: (352) 840-7944
Name:	Alexandria Rogers
Email Address:	alexandria.rogers@fdc.myflorida.com
Telephone Number:	O: (352) 840-7944
Name:	Patricia Rodgers
Email Address:	patricia.rogers@fdc.myflorida.com
Telephone Number:	O: (352) 840-8008

Facility Health Service Administrator On-site	
Name:	Karen Proctor
Email Address:	aproctor@teamcenturion.com
Telephone Number:	3528407927

Facility Characteristics	
Designed facility capacity:	1110
Current population of facility:	901
Average daily population for the past 12 months:	870
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	19-100
Facility security levels/inmate custody levels:	community, minimum, medium, and close
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	379
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	80
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	75

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

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

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

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
0	
Number of standards met:	
45	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-04-26
2. End date of the onsite portion of the audit:	2022-04-28

Outreach

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

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1110
15. Average daily population for the past 12 months:	870
16. Number of inmate/resident/detainee housing units:	8
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1082
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	5
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	5
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	5

41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	2
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	8
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	6
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	3
45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	2
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	3
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	The facility reported the following physical plant characteristics: 18 buildings, 8 housing units, 2 multiple occupancy units, 6 open bay dormitories, and 216 segregation cells. The facility does not house youthful offenders, and males.
Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit	
49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	331
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	75
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	91
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	The staff count on the first day of the audit was 331 and 91 contractors. Volunteers have had limited authorized to enter the facility in the past 12 months due to the COVID-19 Virus.
INTERVIEWS	
Inmate/Resident/Detainee Interviews	
Random Inmate/Resident/Detainee Interviews	

53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	20
54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input checked="" type="checkbox"/> Other <input type="checkbox"/> None
If "Other," describe:	Requested at random the fifth inmate on the housing roster based on the selected criteria and include inmates from all housing units.
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	The auditor attempted to select inmates from each housing unit to ensure the sample size demonstrated a diverse mix of the population.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The auditor was able to interview a sample of inmates from all housing units as the facility was not experiencing a quarantine due to the effects of the COVID-19 Virus.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	20
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	2

<p>61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The interview with the medical staff, facility staff, and inmate population did not indicate any reference to inmates that may be experiencing a cognitive disability.</p>
<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>3</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>6</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>
<p>67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>3</p>
<p>68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>

69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The auditor conducted interviews with the staff that supervise segregated housing, the facility PREA Compliance Manager, and facility Warden and all confirmed no inmates have been housed in segregation for high-risk victimization in the past 12 months. During the on-site review the auditor spoke with inmates in segregated housing, reviewed samples of segregation forms and did not identify any inmates under this category.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	All interviews were conducted using COVID-19 safety protocols such as social distancing, both the auditor and interviewees wearing masks, and safety barriers.

Staff, Volunteer, and Contractor Interviews

Random Staff Interviews

71. Enter the total number of RANDOM STAFF who were interviewed:	13
72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	The random sample of staff included selecting the fifth staff member on the daily duty roster, utilizing staff availability, minimizing scheduling conflicts, and ensuring the samples were selected from all shifts.

Specialized Staff, Volunteers, and Contractor Interviews

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

75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	20
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

<p>80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input checked="" type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input checked="" type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other
<p>81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?</p>	<ul style="list-style-type: none"> <input checked="" type="radio"/> Yes <input type="radio"/> No
<p>a. Enter the total number of VOLUNTEERS who were interviewed:</p>	<p>1</p>

<p>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input checked="" type="checkbox"/> Religious</p> <p><input type="checkbox"/> Other</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>1</p>
<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input checked="" type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>The interviews with the specialized staff attempted to assist the auditor to determine whether or not particular roles and responsibilities are being completed. The facility is prohibiting access for volunteers into the facility due to the effects of the COVID-19 Virus. Once the agency has lifted the restriction on access for volunteers to the facility, all volunteers will have to complete the biometric clearance process and PREA training before being allowed authorization into the facility.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

<p>84. Did you have access to all areas of the facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
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Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
88. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).	<p>During the site review, the auditor verified the cross-gender presence of staff as announcements were made while entering the housing units. The auditor verified the use of the language line services, tested the outside reporting mechanisms, identified areas of signage that may need to be posted, received positive feedback from the victim advocate, and inspected all areas for blind spots and cross-gender viewing capabilities.</p>

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="radio"/> Yes <input type="radio"/> No
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91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).	<p>During the on-site review the auditor reviewed 20 employee files for PREA questions, criminal history checks, and reference checks. The auditor reviewed 20 employee training files for initial and annual PREA training. The auditor reviewed 20 contract clearance documents, 4 investigative files, and 27 inmate files for initial intake screenings, 30-day reassessments, initial PREA information, and 30-day comprehensive PREA education. The auditor reviewed the intake packet for clarity, and observed the intake and reassessment processes. The auditor observed the PREA video, and reviewed all video monitoring equipment for cross-gender viewing.</p>
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SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	5	5	5	5
Staff-on-inmate sexual abuse	20	20	20	20
Total	25	25	25	25

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	4	0	4	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	5	0	5	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	0	0	0	0	0
Staff-on-inmate sexual abuse	13	0	0	0	0
Total	13	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	5	0
Staff-on-inmate sexual abuse	13	6	1	0
Total	13	6	6	0

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	1	0
Staff-on-inmate sexual harassment	0	0	1	0
Total	0	0	2	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:	4
99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	0
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101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input type="radio"/> Yes <input type="radio"/> No <input checked="" type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	2
104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
Sexual Harassment Investigation Files Selected for Review	
106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	2
107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1

<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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Staff-on-inmate sexual harassment investigation files

<p>111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
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<p>112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)</p>
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<p>114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.</p>	<p>The auditor selected 4 investigative files to review during the onsite review. The auditor reviewed additional investigative files during review of the facility PAQ.</p>
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SUPPORT STAFF INFORMATION

DOJ-certified PREA Auditors Support Staff

<p>115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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Non-certified Support Staff

<p>116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p>
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AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?	<p><input type="radio"/> The audited facility or its parent agency</p> <p><input type="radio"/> My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)</p> <p><input checked="" type="radio"/> A third-party auditing entity (e.g., accreditation body, consulting firm)</p> <p><input type="radio"/> Other</p>
Identify the name of the third-party auditing entity	PREA Auditors of America, LLC

Standards**Auditor Overall Determination Definitions**

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.11 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1340 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detention, and Response, pages 1-9, September 7, 2021 3. Agency Organizational Chart 4. Facility Organizational Chart <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 902 552 987" style="list-style-type: none"> 1. PREA Coordinator 2. PREA Compliance Manager <p data-bbox="240 1077 509 1104">Site Review Observations:</p> <ol data-bbox="240 1133 1043 1274" style="list-style-type: none"> 1. Staff performing cross-gender announcements upon entry to all housing units. 2. Supervisory staff documenting unannounced security rounds in the post logs. 3. Signs and posters indicating zero tolerance posted throughout the facility. <p data-bbox="240 1364 483 1391">Findings (By Provision):</p> <p data-bbox="240 1420 1474 1783">115.11 (a) - Agency PREA policy 602.053, page 2, mandates a zero tolerance toward all forms of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. The agency policy 602.053, page 6-12, describes the approach toward prevention, detection, reporting, and response to all forms of sexual abuse and sexual harassment. This includes facility preventive measures necessary to reduce and prevent sexual abuse and sexual harassment of inmates such as, architectural design, security supervision, video monitoring equipment, inmate orientation procedures, medical screening within 24 hours of arrival, housing considerations, separate showers, classification screenings, 30-day reassessments, facility staffing plan, staff referrals, supervisory notifications, mental health screenings, unannounced supervisory rounds, opposite gender housing announcements, community corrections procedures, and training. During the on-site review, the auditor identified staff performing opposite gender housing announcements, and unannounced supervisory rounds. The rounds were documented as unannounced in the unit logbooks. The auditor noted postings throughout the facility indicating zero tolerance toward all forms of sexual abuse, sexual battery, and sexual harassment.</p> <p data-bbox="240 1812 1485 2141">This policy includes definitions of prohibited behaviors in 602.053, page 2-5, and these definitions include sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. Policy 602.053, page 15 explains the presumptive approach toward staff who engage in sexual abuse will be termination and prosecution referral. This was also confirmed in policy 33-208.002, page 3 of the Rules of Conduct, and policy 33-208.003, page 3 of the Range of Disciplinary Actions. Policy 602.053, page 15 describes the sanctions for contractors, volunteers, and referrals to law enforcement. Facility policy 602.053, page 15, includes disciplinary sanctions for inmates found to have participated in all forms of sexual abuse or sexual harassment. Training is provided for all inmates, staff, volunteers, and contractors for the education of the duties and responsibilities toward prevention, detection, reporting, and response procedures. Facility policy 602.053, page 8-9, provides employee, volunteer, contractor, and inmate training regarding zero tolerance for sexual abuse and sexual harassment. This policy also informs the staff how to fulfill their responsibilities toward prevention, detection, reporting, and response</p>

procedures.

115.11 (b) – Policy 602.053, page 17-18, explains the agency employs an upper-level, agency wide PREA Coordinator and designates a PREA Compliance Manager for each facility. The PREA Coordinator position reports directly to the Director of Institutions and this position is in the facility organizational chart (Operations Manager). The auditor reviewed an appointment letter from the Florida Department of Corrections, Deputy Director of Institutional Operations, recognizing the appointment of the Statewide PREA Coordinator in November 2018.

115.11 (c) – The PREA Compliance Manager reports directly to the facility Warden and communicates with the agency wide PREA Coordinator. This position is in the facility organizational chart (Assistant Warden of Programs). There is a total of 57 agency wide PREA Managers that report to the agency wide PREA Coordinator. Interviews conducted with the PREA Coordinator and the PREA Compliance Manager confirmed sufficient time and authority to develop, implement, and oversee the efforts toward PREA compliance. Communication between this auditor, PREA Coordinator, and the PREA Compliance Manager was professional, timely, and knowledgeable. Interviews conducted with staff, inmates, volunteers, and contractors indicated knowledge regarding the facilities zero tolerance policy toward all forms of sexual abuse and sexual harassment. The PREA Coordinator and the PREA Compliance Manager was always accessible throughout the auditing process, responded to emails and phone calls immediately, and provided adequate responses during the on-site review.

Conclusion: The auditor confirmed an agency policy mandating zero tolerance of all forms of sexual abuse and sexual harassment. The facility has a documented implementation plan outlining the facilities approach to preventing, detecting, and responding to sexual abuse and sexual harassment. Based on the evidence provided the auditor has determined the facility meets this standard and no further action is required.

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Standard 115.12 Analysis</p> <p data-bbox="242 385 1000 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="242 499 371 528">Documents :</p> <ol data-bbox="242 557 1340 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detention, and Response, pages 1-9, September 7, 2021 3. Memo to the Auditor, January 4, 2022 4. Updated 2022 Spreadsheet for Contract Monitoring with 75 Listings <p data-bbox="242 844 352 873">Interviews:</p> <ol data-bbox="242 902 576 1043" style="list-style-type: none"> 1. Agency Contract Administrator 2. Agency PREA Coordinator 3. Facility Warden <p data-bbox="242 1131 464 1160">Findings by Provision:</p> <p data-bbox="242 1189 1461 1317">The Florida Women's Reception Center does not contract with other entities for the confinement of inmates. The auditor confirmed this statement during the facility Warden interview and referenced the 2019 PREA audit report. The auditor also reviewed a signed memo from the facility PREA Compliance Manager confirming the facility does not contract with other entities for the confinement of inmates.</p> <p data-bbox="242 1346 1474 1473">Conclusion: Based upon the review and analysis of all evidence provided, the auditor has determined that the facility is fully compliant with this standard. Florida Women's Reception Center has not entered any contracts in the last 12 months for the confinement of inmates. The agency level does require all contract participants to comply with the PREA standards. No further action is required for this standard as the auditor determined standard 115.12 meets the expectations.</p>

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.13 Analysis</p> <p data-bbox="240 387 1026 414">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1222 1043" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. 2021 Facility Staffing Plan 3. Agency policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 4. Annual PREA Staffing Review 5. Facility Logbook entries 6. Post Order #1, General Orders, November 19, 2001 7. Post Order #3, Shift Supervisor, June 1, 2000 8. Staff Post Vacancies, Incident Reports for two deviations in the past 12 months 9. Agency Policy 602.030 Staffing, page 9 <p data-bbox="240 1133 352 1160">Interviews:</p> <ol data-bbox="240 1189 703 1503" style="list-style-type: none"> 1. Facility Warden 2. Intermediate and Higher-Level Facility Staff 3. Agency PREA Coordinator 4. Facility PREA Compliance Manager 5. Informal Staff Interviews 6. Random Staff Interviews <p data-bbox="240 1592 512 1619">Site Review Observations:</p> <ol data-bbox="240 1648 1126 1738" style="list-style-type: none"> 1. Viewed video camera footage, monitors, and storage 2. Inspected facility identified blind spots for locking devices, staff patrols, and log entries <p data-bbox="240 1827 483 1854">Findings (By Provision):</p> <p data-bbox="240 1883 1493 2107">115.13 (a) – The Auditor conducted a review of the documented 2021 facility-staffing plan. This plan indicates 331 positions allocated for the facility. Policy 602.030, page 9, indicates a Level I operating status as staffing of posts that are critical for the daily operation of a shift. The Florida Bureau of Security Operations established the Level I staffing to ensure the continued security and safety of staff, visitors, and inmates. The institutional staffing plan is reviewed quarterly by the facility Warden and the staffing plan is reviewed annually by the PREA Coordinator. The auditor reviewed the Florida Women's Reception Center Annual PREA Staffing Review signed by the PREA Coordinator and reviewed by the Facility Warden. The auditor reviewed the daily operation data during the on-site visit and the total staff on day one was 331.</p> <p data-bbox="240 2136 1385 2163">The facility utilizes video monitoring equipment, positioned in specific locations for the operators to view. The video</p>

monitoring is recorded with Pelco/Ever focus cameras. Each camera has its own specific DVR. The facility reported 217 total cameras. The retention rate for each camera recording is 30 days. The current staffing plan and video monitoring system is adequate for the protection of inmates from sexual abuse, and no blind spots recognized. There are adequate security levels for each shift, support staff, administrative staff, maintenance staff, and management.

The factors considered in the development of this staffing plan includes, accepted detention and correctional practices, no judicial findings of inadequacy from Federal, internal, or external bodies. The composition of the inmate population averaged 1050 inmates and the facility staffing plan predicated to include 1235 inmates. The staffing plan provides adequate supervisory coverage in correlation with the inmate and staff compositions. All programming activities are during dayshift hours and the facility provides additional staff to accommodate these needs with the addition of the Level II and Level III staffing requirements. This is currently being provided by overtime authorization, and newly hired staff. This auditor verified this process during the site inspection as the staffing levels were consistent with the daily roster report. The elements of State, Local Laws, Regulations, Standards, and other relevant factors are considered when developing the staffing plan. There were no substantiated and 5 unsubstantiated incidents considered prior to the review of the current staffing plan.

115.13 (b) - The agency developed the Roster Management System (RMS) that documents all security personnel, and which post staff members are assigned. All deviations from the post chart are documented in an incident report. The auditor reviewed 2 incident reports indicating deviations within the staffing plan. The most common deviations consisted of FMLA status, sick leave, annual leave, and training.

115.13 (c) - The PREA Coordinator and the facility Warden interviews confirmed the staffing plan is discussed numerous times throughout the year and changes are necessitated as required. The interview indicated full compliance with the provisions of this standard. The agency attempts to utilize PREA grant funds to purchase additional cameras and DVR for installation enhancements to cover any additional blind spots throughout facilities. The facility Warden interview indicated additional cameras have been requested to improve the overall coverage throughout the facility.

115.13 (d) - Facility Post Order 3, Shift Supervisor, page 2, informs staff regarding supervisor unannounced rounds must be made throughout the facility to deter sexual abuse or sexual harassment on each shift. Facility Post Order 1, General Orders, page 10, also includes staff are prohibited from alerting other staff members regarding the supervisor rounds and disciplinary action is the standard result of these actions. The on-site review indicated the supervisory rounds are being conducted and documented on the unit logs. The auditor reviewed variable dates for the Duty Warden records for special housing, housing unit logs, and inspections conducted by the OIC. These documents indicated rounds being conducted during day and night shift activities for the Main Unit, Annex, and the Work Camp at random intervals.

Conclusion: Based upon the review and analysis of all evidence provided, the auditor has determined that the facility is fully compliant with this standard requiring the development and review of a facility staffing plan, intermediate or higher-level supervisors conducting documented unannounced rounds, and the facility has developed a policy that prohibits staff from alerting other staff of the rounds occurring.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.14 Analysis</p> <p>The following evidence was analyzed in making the compliance determination:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detention, and Response, September 7, 2021 3. Facility Memo – January 4, 2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Line Staff Who Supervise Youthful Inmates 2. Youthful Inmates 3. Education and Program Staff 4. PREA Compliance Manager <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the daily inmate rosters and housing reports 2. Reviewed the facility intake process and classification questionnaire 3. Reviewed the Agency Web Site <p>Results Based on the Following Provisions:</p> <p>The Florida Women's Reception Center has not housed any youthful offenders. Agency policy states, a youthful offender will never enter the Florida Women's Reception Center as all female youthful offenders are housed at the Lowell Correctional Institution. This practice was confirmed during the interview process by the education and program staff and verified by the facility population analysis of age ranges for the past 12 months. The auditor reviewed a memo provided by the PREA Compliance Manager dated January 4, 2022, that specified, "Florida Women's Reception Center does not house any inmate who is classified as a youthful offender". Agency policy 601.211, page 5, does not list the Florida Women's Reception Center as a housing location for youthful offenders throughout the State. The facility is listed on the Florida Department of Corrections website as an adult female facility.</p> <p>Conclusion: The auditor did not find any non-compliance with this standard as all female youthful offenders are housed at Lowell Correctional Institution. No further action is required regarding this standard.</p>

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.15 Analysis</p> <p data-bbox="240 387 1026 414">The following evidence was analyzed in making the compliance determination:</p> <p data-bbox="240 504 363 530">Documents:</p> <ol data-bbox="240 560 1393 817" style="list-style-type: none"> 1. Florida Women's Reception Center Responses to the Pre-Audit Questionnaire 2. Agency Policy 602.018, Contraband and Searches of Inmates, July 21, 2021 3. Agency Policy 602.036, Gender Specific Security Positions, Shifts, Posts, and Assignments, December 23, 2020 4. 2021 Electronic Training Data 5. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <p data-bbox="240 907 352 934">Interviews:</p> <ol data-bbox="240 963 986 1220" style="list-style-type: none"> 1. Non-Medical Staff Involved in Strip Searches = 0 2. Random Sample of Staff/Inmates = 12 Random Staff 3. 7 Informal Staff, and 2 Informal Inmates Interviewed 4. Transgender/Intersex population = 3 Transgender on-site, 3 interviewed 5. 20 Random Inmate Interviews <p data-bbox="240 1310 507 1337">Site Review Observations:</p> <ol data-bbox="240 1366 991 1563" style="list-style-type: none"> 1. Confirmation of gender specific posts compared to the daily duty rosters. 2. Intake Risk Screening and Classification Review. 3. 3 - Transgender inmates observed during the on-site review 4. Opposite gender intercom announcements entering housing units. <p data-bbox="240 1653 483 1680">Findings (By Provision):</p> <p data-bbox="240 1709 1477 1865">115.15 (a) Policy 602.053 indicates the facility shall not conduct cross-gender strip searches or cross-gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. The facility has not conducted any cross-gender strip or visual body cavity searches of inmates in the last 12 months. This includes no searches that involved exigent circumstances or performed by non-medical staff. This was confirmed through random and informal interviews with inmates and staff.</p> <p data-bbox="240 1899 1485 1989">115.15 (b) The Florida Women's Reception Center does house female inmates as it is an all-female facility. The facility Warden confirmed this statement during the on-site review. No male inmates were observed by the auditor during the on-site review.</p> <p data-bbox="240 2022 1490 2150">115.15 (c) Policy 602.036 confirms the facility shall document all cross-gender strip searches, cross gender-visual body cavity searches, and cross-gender pat down searches of female inmates. The Florida Women's Reception Center does house female inmates as it is an all-female facility. The facility Warden confirmed this statement during the on-site review. No male inmates were observed by the auditor during the on-site review. The Florida Women's Reception Center has not</p>

performed any cross-gender strip searches or cross-gender body cavity searches and this was confirmed during the facility Warden interview.

115.15 (d) Policy 602.036, page 3 explains the facility shall implement policies and procedures that enable 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. This policy mandates gender specific staff are assigned to special housing units. The site review did not indicate any areas of the facility that allow staff of the opposite gender to view inmates within these listed capacities. The facility offers inmate shower curtains that do not create blind spots, saloon doors to protect from viewing during restroom functions, and mirrors that do not affect privacy. Policy 602.036, page 4 indicates a procedure for staff of the opposite gender to announce their presence when entering an inmate housing unit. This practice was observed throughout the facility site review as staff announced their presence and documented this action in the unit logbooks.

115.15 (e) Policy 602.053, page 6 forbids staff to examine inmates for the sole purpose of determining the inmate's genital status. This policy includes transgender and intersex inmates, and if the genital status is unknown, the information will be obtained during the inmate conversations, medical records, or by performing a broader examination conducted by a medical practitioner. The Health Services Administrator confirmed this practice is prohibited during the interview process. The auditor confirmed this through random staff and inmate interviews. The classification supervisor confirmed all inmate information is utilized to ensure this process is adhered to.

115.15 (f) Policy 602.053, page 8 indicates all sworn staff are trained to conduct proper pat down searches on inmates to include cross-gender searches. The training curriculum consists of a Power Point provided by the National PREA Resource Center, The Moss Group, Inc., and the Bureau of Justice Assistance U.S. Department of Justice titled, "Guidance in Cross Gender and Transgender Pat Searches". The lesson plan is monitored by the ETRAIN program and includes the course code PREA 001. This is a mandated training for all employees. The section of the training specific to conducting proper pat down searches is page 14 of the lesson plan. This auditor reviewed 20 staff training files and found no discrepancies within these documents. Formal and informal interviews with staff indicated knowledge of the training and verbal demonstrations regarding proper conduct such as utilizing the back of the hand to conduct the pat-down search.

Conclusion: Based upon the review and analysis of all the available evidence, interviews, on-site observations, and policy, procedure, and practice considerations, the auditor has determined that the facility is fully compliant with this standard. No corrective action is required.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.16 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1244 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. PREA Orientation Documents for Inmates with Disabilities 3. Agency Policy 604.101, Americans with Disabilities Act Provisions for Inmates, December 6, 2021 4. Memo to Auditor, January 11, 2022 <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 902 671 1272" style="list-style-type: none"> 1. Agency Head (Designee) 2. Inmates with a Physical Disability 3. Inmate with a Hearing Disability 4. Inmates with Limited English Proficiency 5. Inmate with Cognitive Disabilities 6. 12 Random Staff Interviews 7. 7 Informal Staff Interviews <p data-bbox="240 1361 512 1388">Site Review Observations:</p> <ol data-bbox="240 1417 1244 1563" style="list-style-type: none"> 1. Sign Language Interpreter Service 2. Signs and posters indicating zero tolerance posted throughout the facility English/Spanish formats 3. The unit phones are available with a TTY service and Spanish options <p data-bbox="240 1653 467 1680">Findings by Provision:</p> <p data-bbox="240 1709 1489 1832">115.16 (a) Policy 602.053, page 8 indicates the agency has established procedures to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The policy includes language associated with deaf or hard of hearing inmates, blind or having low vision, inmates who have intellectual disabilities, psychiatric disabilities, speech disabilities, and limited English proficient.</p> <p data-bbox="240 1865 1489 2123">115.16 (b) The inmate handbooks are written in both English and Spanish format. The PREA and Americans with Disabilities Act provisions are documented in policy 602.053, page 9 and indicate the following resources are available for the inmates: closed captioning, large print material, reading of materials to inmates by staff, department translator lists, and the language line services. Inmates are provided the PREA education pamphlet in their primary language and this auditor reviewed the following languages: Creole, Chinese, Portuguese, German, French, Spanish, and Russian. This auditor reviewed a memo completed by the PREA Compliance Manager on January 11, 2022, explaining the description and methods of education for Limited English Proficient and impaired or disabled inmates. The auditor reviewed the intake process and observed the closed captioning included within the television and the intake staff reading the PREA pamphlet to the inmates.</p>

115.16 (c) The facility provides interpreter services with a language line service known as Language Line Services, Inc. This company also requires its interpreters to undergo a medical interpreter credentialing process. A PREA hotline number is available on the inmate phone lines and this service is available for inmates with limited reading skills in both English and Spanish. This auditor evaluated the number during the on-site review and an immediate response was provided. Email notifications were also received by the PREA Compliance Manager, and this auditor reviewed the confirmations. Posters and signs are available throughout the facility in both English and Spanish relating to reporting mechanisms, and prevention techniques. Staff training files reviewed indicated training received for managing inmates at risk of sexual abuse. Staff formal and informal interviews did not reveal any reports of utilizing inmate interpreters for incidents of sexual assault and sexual harassment. Interviews conducted with inmates with documented physical disabilities, sensory disabilities, limited English proficiencies, and cognitive disabilities did not reveal concerns regarding this standard.

Conclusion: The evidence reviewed by the auditor reveals a significant level of facility importance regarding inmates with disabilities or inmates with limited English proficiency having the ability to communicate effectively with staff, and be included in each facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility has taken an above average approach to accommodate steps to communicate effectively with inmates who are deaf or hard of hearing, have speech disabilities, are blind or low vision, intellectual disabilities, limited reading skills, psychiatric disabilities, or limited English proficient. The inmate and staff interviews did not indicate concerns regarding the use of inmate interpreters, readers, or assistants during sexual abuse or sexual harassment investigations. The agency has a policy in a written format and the on-site review indicated the facility practice aligns with the written policy. The facility meets the expectation of this standard.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.17 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1337 875" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 33-601.202, Use of Inmates in Public works, October 28, 2010 3. 20 Random Staff Personnel Files 4. Agency Policy 208.049, Background Investigations and Appointment of Certified Officers, January 25, 2021 5. Florida Statute, 435.03, Level I Screening Standards, November 11, 2022 6. Florida Statute, 435.04, Level II Screening Standards, November 11, 2022 <p data-bbox="240 965 352 992">Interviews:</p> <ol data-bbox="240 1021 576 1216" style="list-style-type: none"> 1. 1 Human Resource Staff 2. PREA Compliance Manager 3. 7 Informal Interviews with Staff 4. Contract Staff Interview <p data-bbox="240 1305 509 1332">Site Review Observations:</p> <ol data-bbox="240 1361 762 1503" style="list-style-type: none"> 1. 20 Random Staff Personnel Files 2. Biometric Screening Equipment and Identification 3. 20 Contractor Background Screenings Confirmed <p data-bbox="240 1592 464 1619">Findings by Provision:</p> <p data-bbox="240 1648 1489 1776">115.17 (a) Policy 208.049, page 10 prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who has engaged in, been convicted of, or civilly/administratively adjudicated in sexual abuse in a prison, jail, lockup, community confinement facility, or other institution. This was confirmed during the interview with Human Resources.</p> <p data-bbox="240 1805 1477 1901">115.17 (b) Policy 208.049, page 10 requires the facility to 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. This was confirmed during the interview with Human Resources.</p> <p data-bbox="240 1930 1493 2159">115.17 (c) The 2018 Florida Statutes, Title XXXI, Chapter 435.03 indicates a Level I screening is required by law prior to hiring. This includes the following: employment history checks, criminal history, and the Dru Sjodin National Sex Offender Public Website. Prior to hiring new employees who may have contact with inmates, criminal background records checks and 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 is completed. The auditor spoke with the human resources staff and determined 101 criminal background checks completed in the past 12 months. These record checks were through the Florida Criminal Information Network, and all current staff background checks are performed prior to</p>

employment.

115.17 (d) In addition, 20 background checks were completed for staff covered under contracts for services that may have contact with inmates.

115.17 (e) Policy 208.049, page 11 indicates criminal background checks conducted on all current employees, volunteers, and contractors, at least every 5 years. This was confirmed during the human resources staff interview. This is captured within the agency reporting mechanism and discussed during the human resources interview.

115.17 (f) All applicants and employees, who may have contact with inmates, will be asked about previous misconduct in all written applications, interviews for hiring or promotion, or during written evaluations. This was confirmed during the review and interview with the background and fingerprinting staff interview.

115.17 (g) Employees must disclose any such misconduct and any material omission or false information regarding misconduct will be grounds for termination. The 2018 Florida Statutes 435 explains failure to report criminal charges and convictions may result in disciplinary action, demotion, and termination. In addition, 20 staff files were reviewed, and no issues determined regarding this practice.

115.17 (h) The facility tracking mechanism is documented on the applicant summary form and includes a criminal records check, valid driver's license, personal interview, proper documentation provided, Local Inmate Data System Review, social security number compliance, certification verification, correctional reference checks to include prior employers, resignations, and substantiated allegations. The PREA Compliance Manager provided documentation demonstrating a criminal history and driver history inspection was previously conducted for all staff. The PREA Compliance Manager confirmed a criminal background check is conducted prior to offering promotional opportunities and the auditor verified this process during the employee file review.

Conclusion: Based on the evidence reviewed by the auditor to include: 20 staff personnel files, interviews with 1 human resource staff, agency, and facility policy, 20 contractor reviews, and 7 informal staff interviews, the auditor finds no discrepancies within this standard required for corrective action. The steps considered by the facility to ensure the safety of the inmates with qualified staff is impressive.

115.18	Upgrades to facilities and technologies
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 502 300">Standard 115.18 Analysis</p> <p data-bbox="242 385 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="242 499 371 528">Documents :</p> <ol data-bbox="242 557 1225 645" style="list-style-type: none"> <li data-bbox="242 557 976 586">1. Florida Women's Reception Center Pre-Audit Questionnaire responses <li data-bbox="242 613 1225 642">2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <p data-bbox="242 728 352 757">Interviews:</p> <ol data-bbox="242 786 552 929" style="list-style-type: none"> <li data-bbox="242 786 507 815">1. Agency Head Designee <li data-bbox="242 842 426 871">2. Facility Warden <li data-bbox="242 898 552 927">3. PREA Compliance Manager <p data-bbox="242 1014 509 1043">Site Review Observations:</p> <ol data-bbox="242 1072 804 1274" style="list-style-type: none"> <li data-bbox="242 1072 804 1102">1. Camera and monitor placement throughout the facility <li data-bbox="242 1128 721 1158">2. Video and storage areas and camera footage <li data-bbox="242 1184 611 1214">3. Gender Specific post assignments <li data-bbox="242 1240 804 1270">4. Cross-gender viewing on video monitoring equipment <p data-bbox="242 1359 464 1388">Findings by Provision:</p> <p data-bbox="242 1417 1477 1547">115.18 (a) Agency policy 602.053, page 16 indicates when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The facility Warden confirmed no substantial expansions were performed within the last 12 months.</p> <p data-bbox="242 1576 1490 1771">115.18 (b) Agency policy 602.053, page 16 indicates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. The facility performed modifications and upgrades to the video monitoring equipment within the last 12 months. However, the facility has requested an additional 70 cameras to upgrade the existing concerns for blind spots. Each camera has a DVR recording support and all these modern additions were provided to assist in preventing, detecting, and responding to sexual abuse and sexual harassment allegations.</p> <p data-bbox="242 1800 1481 1897">Conclusion: The facility has implemented a policy and a program to monitor the effects of upgrades, camera placement, and video monitoring equipment throughout the facility. The efforts provided by the facility meets the requirements of this standard and no further action is required.</p>

115.21	Evidence protocol and forensic medical examinations
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Standard 115.21 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Evidence Protocol for Sexual Battery Document, pages 1-8 3. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 4. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 5. Florida Department of Corrections Sexual Abuse Awareness Brochure 6. Reviewed 0 investigations involving a Sexual Assault Nurse Exam Referral 7. Sexual Assault Nurse Examiner Training Certificates 8. Reviewed a MOU with Creative Services, for outside confidential support services, February 6, 2018 <p>Interviews:</p> <ol style="list-style-type: none"> 1. 12 Random Staff 2. Sexual Assault Nurse Examiner 3. PREA Compliance Manager 4. Inmates who Reported Sexual Abuse 5. Victim Advocate 6. 7 Informal Staff Interviews <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. The Creative Services, Mailing Address posted in all Living Units 2. Signs and Posters in all areas of the facility 3. Medical staff observed during the onsite review <p>Findings by Provision:</p> <p>115.21 (a) The Florida Department of Corrections utilizes the Office of Inspector General for conducting administrative sexual abuse and sexual harassment investigations and has the responsibility for conducting criminal abuse investigations. The Office of Inspector General utilizes Florida Statute 944.31 and policy 108.003 as the uniform evidence protocol when conducting sexual assault investigations and forensic medical examinations. The facility policy 108.015 is the standard utilized when conducting sexual harassment and discrimination investigations.</p> <p>115.21 (b) The Florida Women's Reception Center does not house youthful offenders, and this was confirmed by the agency website, onsite interviews conducted with staff, and population statistical data. Policy 108.015, page 5 explains whenever sexual abuse, sexual harassment, sexual misconduct, or voyeurism occurs the Emergency Action Center will be notified</p>

without delay. This action is an immediate reporting method to the Management Information Notification System (NIMS).

115.21 (c) The facility offers all inmates who experience sexual abuse access to forensic medical examinations and without financial cost to the victim. Policy 602.053, page 14 advises the facility shall offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without cost, where evidentiary or medically appropriate. The Florida Women's Reception Center has an on-site medical staff that are specifically trained to conduct forensic exams. A total of 18 forensic medical exams were performed by qualified medical practitioners during the past 12 months. The number performed by a SAFE or SANE was 0, and the number performed by a qualified medical practitioner was 18. This auditor spoke with 1 qualified medical practitioner during the on-site review. The staff indicated they would provide the necessary support at the Florida Women's Reception Center during the sexual assault examination and confirmed efforts toward providing advocacy services during the sexual assault exam. This was also confirmed by the PREA Compliance Manager and the Health Services Administrator during the on-site review. The Florida Women's Reception Center also provides on-site mental health treatment through their crisis stabilization and transitional care units. This includes activities groups, social skills training, group therapy, and medication management groups.

115.21 (d) The Florida Women's Reception Center medical staff complete the Florida Council Against Sexual Violence, Sexual Assault Nurse Examiner training curriculum regarding forensic nursing. Training certificates were reviewed for medical staff and all training was verified. The victim advocate poster was identified in all housing units, intake, and medical sections of the facility. The poster identified the 24-hour services offered by the agency, advocacy and case management, and hospital accompaniment. A 24-hour hotline number is included for all inmate access and is also included in the inmate handbook, intake PREA information, and the facility sexual abuse awareness pamphlet. The auditor observed this pamphlet was provided to inmates during the intake process.

115.21 (e) The PREA Compliance Manager interview confirmed a victim advocate would be present during the sexual assault medical exam. The Creative Services information would be provided and the sexual abuse awareness pamphlet. Policy 602.053, page 11 explains any inmate who alleges sexual abuse or sexual battery shall be given a copy of the notification of rights to have crisis intervention services. This was confirmed during the PREA Compliance Manager interview, and the auditor reviewed the MOU with Creative Services.

115.21 (f) The Florida Department of Corrections utilizes the Office of Inspector General for conducting administrative sexual abuse and sexual harassment investigations and has the responsibility for conducting criminal abuse investigations.

115.21 (g) N/A

115.21 (h) The auditor reviewed a training certificate for the PREA Coordinator indicating training received as a Victim Services Practitioner and policy 602.053, page 11 indicates the advisement of rights shall be documented on a DC6-210 form.

Conclusion: Based on the evidence provided by the facility, all provisions were met within standard 115.21 and no further corrective action is required.

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="240 147 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 273 502 300">Standard 115.22 Analysis</p> <p data-bbox="240 385 999 412">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 501 371 528">Documents :</p> <ol data-bbox="240 560 1453 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 4. Reviewed the Facility Website <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 904 552 1043" style="list-style-type: none"> 1. Agency Head Designee 2. 1 Facility Investigator 3. PREA Compliance Manager <p data-bbox="240 1133 509 1160">Site Review Observations:</p> <ol data-bbox="240 1191 839 1388" style="list-style-type: none"> 1. Reviewed the facility website for Investigative information 2. Reviewed Shift Commander Checklist 3. Reviewed Investigative Files 4. Case Management Log Entry System <p data-bbox="240 1478 464 1505">Findings by Provision:</p> <p data-bbox="240 1536 1477 1765">115.22 (a) Florida Women's Reception Center reported 30 allegations of sexual abuse and sexual harassment in the last 12 months. There were 12 total allegations resulting in an administrative investigation, and 18 cases referred for criminal investigation. There are a total of 13 cases reported that are considered relative to sexual abuse, sexual assault, or sexual harassment that remain open and pending. The Florida Women's Reception Center reported 7 cases determined to be unfounded complaints, no cases were ruled as substantiated, 5 cases were determined to be unsubstantiated, and 5 allegations did not meet the definition of PREA. All 30 allegations have been reviewed and placed in an assigned category and the auditor reviewed the allegations spreadsheet for compliance.</p> <p data-bbox="240 1796 1493 1890">The investigative reports indicated several reporting mechanisms utilized by the inmates such as notifying the staff, grievance mechanisms, facility KIOSK, medical staff, and the PREA tip line. The interviews conducted with the PREA Compliance Manager, and Investigator determined no allegations reported as substantiated or required prosecution referral.</p> <p data-bbox="240 1921 1493 2145">115.22 (b) The agency policy 602.053, page 12-13 requires all allegations of sexual abuse and sexual harassment to be investigated and referred for administrative review or criminal prosecution. Policy 602.053, page 12 ensures the allegation of sexual abuse or sexual harassment is referred to an agency with the legal authority to conduct criminal investigations. Florida Statute 944.31 indicates the inspector general, and inspectors shall be responsible for criminal and administrative investigations in matters relating to the Department of Corrections. This notification policy is posted on the agency website and the procedures for reporting allegations. Policy 108.003 and 108.015 indicates once an allegation is referred to the Office of the Inspector General the Sexual Assault Response Team is notified, the case is assigned a number, and the information</p>

is documented in the Case Management Log Entry System. This auditor reviewed documentation indicating all 30 cases were entered into the Case Management Log Entry System. This information was provided and explained by the PREA Compliance Manager.

115.22 (c) Policy 602.053, page 12 indicates the Office of the Inspector General shall conduct all investigations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment pursuant to Florida Statute 944.31. The information provided by the agency and facility indicates compliance within this standard.

115.22 (d) N/A

115.22 (e) N/A

Conclusion: Based on the evidence provided by the facility, the agency has a policy governing the investigations of allegations of sexual abuse and sexual harassment. The facility has a documented investigative policy and investigates all reports of sexual abuse and sexual harassment. The facility provided the auditor with documentation of the investigations, including full investigative reports with findings. The facility provided evidence of referrals of allegations of sexual abuse and sexual harassment. The agency policy is posted on the website, and it describes the investigative responsibilities of the agency as the OIG conducts the criminal investigations on its behalf. The facility meets the provisions of this standard and no further action is required.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.31 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 9, 2021 3. PREA In-service Training Curriculum, June 28, 2021 4. PREA Training Lesson Plan 5. PREA Training Curriculum: Female Inmate Initial Training, January 2014 6. PREA Training and Understanding Verification Forms <p>Interviews:</p> <ol style="list-style-type: none"> 1. 12 Random Staff 2. PREA Compliance Manager 3. 7 Informal Staff Interviews 4. Inmates that identify as Transgender <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed 20 Staff Training Files 2. Reviewed 20 PREA Training and Understanding Verification Forms 3. Verified a list of all current staff training dates <p>Findings by Provision:</p> <p>115.31 (a) Agency policy 602.053, page 8 includes the zero-tolerance standard toward sexual abuse and sexual harassment policy relating to staff training. This policy includes training requirements on how to fulfill their responsibilities for prevention, detection, reporting, and response. This policy includes all elements listed in section 115.31 (a) 1-10. Random staff interviews indicated significant knowledge regarding the zero-tolerance policy toward all forms of sexual abuse and sexual harassment, and the staff requirements toward prevention, detection, reporting, and response.</p> <p>115.31 (b) This auditor reviewed the staff training curriculum to include lesson plans, and the RELIAS on-line training program. This program is an interactive testing software and specifically designed to provide the PREA training elements listed in 115.31 (a) 1-10. The facility trained all staff members in the last 12 months and provided rollcall training demonstrating PREA training across all shifts. The agency training is tailored to the gender of the inmates at the facility to include male and female inmates and staff. However, the Florida Women's Reception Center is an all-female inmate population. The facility utilizes the National PREA Resource Center, The Moss Group, and the Bureau of Justice Assistance U.S. Department of Justice Guidance in Cross Gender and Transgender Pat Searches power point within their training curriculum. This auditor interviewed an inmate that identified as transgender and indicated no discrepancies associated with the facilities response to searches.</p>

115.31 (c) The auditor reviewed a total of 20 staff training files. The documentation provided indicated all staff received the RELIAS PREA training. A complete listing of all staff was provided by the PREA Compliance Manager to this auditor ensuring the training was received by all staff at the end of the on-site review. The RELIAS program requires a test to be completed at the end of each section to determine satisfactory completion.

115.31 (d) The staff random and informal interviews indicated the ability from staff to properly identify the PREA Compliance Manager, PREA Investigator, and the PREA Coordinator.

Conclusion: Based on the review of the facility training policies, staff training curriculum, samples of the training records, and the documentation of the employee signatures signifying comprehension of the training received, the facility meets compliance with this standard. No corrective action is required at this time.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.32 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire responses
2. Florida Department of Corrections, PREA Training for Interns, Volunteers, and Contractors, Lesson Plan, pages1-6, July 31, 2018
3. Florida Department of Corrections Contractor/Volunteer PREA Training Pamphlet

Interviews:

1. 1 Contract Commissary
2. 1 Volunteer Religious

Site Review Observations:

1. Reviewed Volunteer/Contractor/ Public Visitor Forms
2. Reviewed the facility Biometric process

Findings by Provision:

115.32 (a) Agency policy 602.053, page 8 explains the zero-tolerance standard and the facility also provides a volunteer and contractor handbook to all volunteers and contractors. This auditor reviewed the handbook, and this information is provided on page 4 and includes the zero-tolerance policy, requirements for preventing, reporting, detection, response, and the discipline imposed for violations of this policy. The documentation provided by the facility indicates the volunteer and contractor signature understanding the training received.

115.32 (b) The Florida Women's Reception Center has trained 75 volunteers and contractors in the last 12 months. The level of training provided is based on the services they provide and the level of contact they have with inmates. Each contractor and volunteer must complete an application and a background check is completed. The application consists of the following information: personal information, current employment information, personal identification information, education, emergency contacts, criminal history, and previous institutional experience. Each volunteer and contractor are screened through the Florida Criminal Information Network and the National Crime Information Center.

115.32 (c) The auditor spoke with 1 contract staff and volunteer that provided information relating to the training received, handbook notifications, and background questionnaires. All interviews indicated the ability to convey the zero-tolerance policy, preventive actions, notification procedures, and response practices. The inmate signs a consent form upon the initial intake screening and there are no documented concerns regarding limits to confidentiality. The auditor observed the notification process during the intake screening. The auditor reviewed 20 signed training acknowledgement forms for the contract staff and 22 acknowledgement forms for volunteers. The facility provided documentation indicating all volunteers have received the PREA Pamphlet and signed the notification indicating the volunteer understands the training received.

Conclusion: Based on the review of the evidence provided, the facility ensures all volunteers and contractors that have contact with inmates are trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The level and type of training is provided to volunteers and contractors based on their level of contact with the inmates. The sample of volunteers and contractors interviewed indicated knowledge regarding the zero-tolerance policy and how to report any incidents. The agency maintains documentation confirming that all volunteers and contractors understand the training they have received.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.33 Analysis</p> <p>The following evidence analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 601.210, Inmate Orientation, September 17, 2020 3. Reviewed the PREA Intake Pamphlet (Spanish/English Format) 4. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 5. Inmate Handbook (Spanish/English Format) <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. 1 Intake Staff 3. 20 Randomly Selected Inmate Interviews 4. 2 Informally Selected Inmate Interviews <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Observed the Intake Process and Issue of the PREA Pamphlet 2. Reviewed 27 Inmate Education Files 3. Reviewed 27 PREA Inmate Intake Handout Receipts 4. Observed PREA Posters and Materials Posted in All Living Units, Medical, and Programs (English/Spanish) <p>Findings by Provision:</p> <p>115.33 (a-f) Policy 601.210, page 5 discusses the inmate education requirements and includes elements (a-f) within the policy. The intake officer described the inmates receive an initial PREA document upon arrival to the intake section. The auditor observed this process during the intake screening and observed detainees receiving the PREA pamphlet and watching the PREA video. This document includes the facility zero tolerance policy, the inmates right to be free from sexual abuse, sexual assault, and sexual harassment and instructions for reporting an allegation by phone. The facility has set up a hotline number on the inmate phones by dialing the TIP LINE. The auditor attempted this call during the on-site review and learned this process to report an allegation. The information will then be reviewed and forwarded to the PREA Compliance Manager for immediate investigation.</p> <p>The facility also proudly displays PREA posters, and one is displayed in the intake section regarding zero tolerance. The facility provides a 16-minute PREA video to the inmates in intake prior to the medical screening, and this auditor reviewed the video for quality. The video was produced by Just Detention International and includes the information in English and Spanish. The video offers closed captioning for the deaf impaired. This video training is also provided to the inmate population and the staff are required to play the video daily during a facility wide schedule. Random and informal interviews with the inmate population indicated this video is played and observed often. The intake staff are required to print an inmate</p>

orientation acknowledgement form and the inmates sign acknowledging they understand the training they have received. The auditor sampled 27 inmate files indicating receipt of the PREA brochure and viewing the video within 30 days of arrival. The PREA Compliance Manager and the intake officer indicated the video is played to the population immediately upon arrival. The PREA Compliance Manager reported a total of 2195 inmates admitted during the past 12 months, and 1870 of those inmates length of stay exceeded 30 days. This information was confirmed by the PREA Compliance Manager during the on-site interviews.

There are several reporting methods provided to the inmates and this is discussed in the handbook. This auditor received a brief education session from an informal inmate interview regarding the use of the tablets and the TIP LINE. The inmate was helpful in demonstrating the process to the auditor. The PREA information, handout, and Creative Services information was posted on the wall near the phones in every inmate living unit. Posters are visual throughout the facility reminding inmates regarding zero tolerance toward all forms of sexual abuse, sexual assault, and sexual harassment. Random and informal inmate interviews demonstrated PREA knowledge, expectations toward privacy, reporting mechanisms, retaliation monitoring, and pride in the overall sexual safety of the facility. The inmate phones are equipped with a TTY system, the facility provides a language line for numerous languages and a list of certified staff interpreters. The facility employs staff to provide the information verbally to inmates that cannot read.

Conclusion: The auditor has determined the agency has a policy governing PREA education for inmates. The auditor has also determined full compliance with this standard based on a review of the following evidence supplied by the facility: intake records of inmates entering the facility in the past 12 months, signed documents by the inmates indicating the understanding of the training received within 30 days of intake, confirmation of all inmates receiving the PREA information within one year of the effective date of the PREA standards, review of the inmate handbook, PREA pamphlet, PREA video, education materials in formats accessible to inmates that are limited English proficient, deaf, visually impaired, disabled or limited reading skills, and observations of materials posted throughout the facility in both English and Spanish formats. The facility has demonstrated substantial compliance and no corrective action requested at this time.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.34 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1453 815" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 3. Reviewed 8 Specialized Investigator Training Power points 4. Reviewed 19 Correctional Investigator Training Files 5. Reviewed 19 PREA Training and Understanding Forms <p data-bbox="240 904 352 931">Interviews:</p> <ol data-bbox="240 960 472 987" style="list-style-type: none"> 1. 1 PREA Investigator <p data-bbox="240 1077 509 1104">Site Review Observations:</p> <ol data-bbox="240 1133 855 1274" style="list-style-type: none"> 1. Reviewed 8 Specialized Investigator Training Power points 2. Reviewed 19 Correctional Investigator Training Files 3. Reviewed 19 PREA Training and Understanding Forms <p data-bbox="240 1364 464 1391">Findings by Provision:</p> <p data-bbox="240 1420 1436 1545">115.34 (a-d) Agency policy 108.015, page 11 includes the specialized training requirements for the agency PREA investigators. The required training includes the following: 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 and prosecution referral.</p> <p data-bbox="240 1576 1473 1872">The facility utilizes investigators from the Office of the Inspector General and the agency reports 140 investigators are assigned throughout the department. The auditor reviewed training records indicating investigators assigned to the facility have received specialized PREA training for investigations. This was confirmed during the investigator interviews. All investigations reviewed by the auditor were conducted by a certified PREA investigator and training records confirmed the training received. The shift supervisors gather the information and the trained PREA investigator conducts the investigation. The facility utilizes a tracking mechanism to ensure all investigation are performed correctly. The tracking mechanism is an electronic monitoring program that includes name of the participants involved, case number, inmate number, date and time, shift supervisor, evidence collected by, and the investigator assigned. Confirmation was made within all investigative documents, and confirmed during the investigator interview, the PREA investigator conducted all investigations.</p> <p data-bbox="240 1904 1489 2161">The PREA investigators completed training in 2013 presented by the Moss Group. This training titled; "Investigating Sexual Assault" provided the necessary elements required within this standard. This auditor reviewed the training outline and power points associated with this learning environment. Training certificates were also viewed for training received within the last 12 months by the RELIAS Learning titled, "PREA: Investigation Protocols". This training identified the seven PREA standards that apply to investigating sexual abuse of inmates and demonstrated six critical investigative techniques and protocols of competent investigations. The facility maintains records of all training received and is easily accessible for review. The PREA Compliance Manager indicated all training documentation will be maintained by the Bureau of Professional Development and Training.</p>

Conclusion: Based on the review of the materials provided by the facility: the agency training policy for investigative staff, the investigator training curriculum, documentation that the agency investigators have completed the required training, and the training records and logs presented by the staff, the auditor finds the facility meets all provisions required within this standard. No further action is required at this time.

115.35	Specialized training: Medical and mental health care
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 502 300">Standard 115.35 Analysis</p> <p data-bbox="242 385 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="242 499 371 528">Documents :</p> <ol data-bbox="242 557 1005 815" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy, 15.03.361, Health Services Bulletin, October 2, 2020 3. Medical Staff Training Files 5. PREA Specialized Training: Medical and Mental Health Care Lesson Plan 6. PREA Training and Understanding Verification Forms <p data-bbox="242 900 352 929">Interviews:</p> <ol data-bbox="242 958 670 1104" style="list-style-type: none"> 1. 1 Medical Staff 2. 1 Mental Health Staff 3. Sexual Assault Nurse Examiner (SANE) <p data-bbox="242 1189 509 1218">Site Review Observations:</p> <ol data-bbox="242 1247 908 1332" style="list-style-type: none"> 1. Reviewed medical staff training files 2. Reviewed PREA Training and Understanding Verification Forms <p data-bbox="242 1417 464 1447">Findings by Provision:</p> <p data-bbox="242 1476 1485 1603">115.35 (a-d) Agency policy 602.053, page 8 explains the facility policy, procedures, and practice associated with this standard compliance, and requires all medical and mental health care practitioners to receive the required specialized PREA training. There is a total of 80 contract medical staff that work regularly in the facility and the training records indicated all staff have received the initial PREA orientation and the specialized training.</p> <p data-bbox="242 1632 1445 1830">The forensic medical exams are conducted by qualified medical professionals and assistance is provided by the Ocala Regional Hospital. The facility maintains documentation demonstrating the medical and mental health practitioners have completed and understand the training received. The Health Services Administrator and Mental Health Director provided direct knowledge regarding how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and whom to report allegations or suspicions of sexual abuse and sexual harassment.</p> <p data-bbox="242 1859 1477 2020">Conclusion: Based on the review of the following evidence: agency policy governing training of medical and mental health care practitioners, documentation showing the training has been received by all staff, a review of the training curriculum and signature indicating understanding of the training received, and confirmation of the medical staff training logs ensuring the staff have received the initial training for employees, contractors, and volunteers dependent upon their status, the auditor finds the facility meets all of the provisions required within this standard with compliance. No further action is required.</p>

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.41 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1230 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 601.209, Reception Process – Initial Classification, September 17, 2020 3. Florida Department of Corrections, PREA Risk Assessment Tool 4. Agency Policy, 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 902 636 1272" style="list-style-type: none"> 1. Staff Responsible for Risk Screening 2. 20 Random Inmate Interviews 3. 2 Informal Inmate Interviews 4. 12 Random Staff Interviews 5. 7 Informal Staff Interviews 6. PREA Coordinator 7. PREA Compliance Manager <p data-bbox="240 1361 509 1388">Site Review Observations:</p> <ol data-bbox="240 1417 807 1675" style="list-style-type: none"> 1. Inmate Risk Screening Process 2. Inmate Risk Screening Reassessment Process 3. Intake and Classification Housing Assignment Review 4. Inmate File Reviews = 27 5. 27 PREA Risk Assessment Tools <p data-bbox="240 1765 483 1792">Findings (By Provision):</p> <p data-bbox="240 1879 1485 2007">115.41 (a-l) Agency policy 602.053, page 6 explains the screening procedures for risk of victimization and abusiveness. This policy explains all inmates are assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates. Inmates will also be screened upon transfer to another facility for their risk of being sexually abused or sexually abusive toward other inmates.</p> <p data-bbox="240 2036 1481 2161">This auditor reviewed 27 inmate files and determined the intake screenings usually take place within the same day of arrival. No files reviewed indicated major concerns regarding the initial intake screening. The facility utilizes an objective classification screening instrument that includes: a classification questionnaire, a brief jail mental health screen, a booking inmate risks and needs assessment, and a PREA initial intake screening. All sections are based on an individual points</p>

system, yes and no responses, and classification protocol. The objective classification screening includes the following criteria for the risk of sexual victimization: inmate mental, physical, developmental disabilities, age, physical build, previous incarcerations, criminal history, violent or nonviolent behaviors, prior sex convictions, whether the inmate is perceived gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, previous sexual victimization, vulnerability perceptions, or if the inmate is detained solely for civil immigration purposes. The auditor reviewed this process with the staff assigned to conduct the screening and monitored the interview being conducted.

The PREA Compliance Manager indicated 2112 inmates entered the facility within the past 12 months whose length of stay was 72 hours or longer. Records indicate 1870 inmates were processed into the facility within the past 12 months whose length of stay exceeded 30 days. The objective classification system questionnaire also assesses inmates for the risk of being sexually abusive by including the following criteria: prior acts of sexual abuse, prior convictions for violent offenses, and history of prior institutional violence or sexual abuse. This was also confirmed during the PREA Coordinator, PREA Compliance Manager, and staff performing the screening interviews. The auditor observed this process being performed while in intake.

Agency policy 602.053, page 7 indicates within 30 days of intake an inmate's risk level will be reassessed 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. Policy 602.053, page 7 indicates inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the risk screening, and the facility considers these documents to be treated in a confidential nature. Select staff are authorized to view this data and the facility information technician must authorize usage on all electronic devices.

Conclusion: Based on the review and analysis of all available evidence to include agency policy governing the screening of inmates upon admission to the facility or transfer to another facility, screening instruments to determine risk of victimization or abusiveness, and detainee records, the auditor has determined that the agency is fully compliant with this standard regarding inmate risk of victimization and abusiveness.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.42 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 601.209, Reception Process – Initial Classification, September 17, 2020 3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 4. Florida Risk Screening Tool 5. High Risk Victim/Abuser List <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. PREA Compliance Manager 3. Staff Responsible for Risk Screening 4. Inmates Identifying as Transgender, Inmates Identifying as Gay 5. Facility Warden <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the PREA Risk Screening Process 2. Reviewed the PREA Risk Screening Reassessment Process 3. Reviewed Inmate Files = 27 4. Reviewed the housing unit cell, shower, restroom, and bunk accommodations <p>Findings (By Provision):</p> <p>115.42 (a-g) The facility utilizes the information collected from the risk screenings to inform housing, bed, work, education, and program assignments with the goal of keeping separate those residents at high risk of being sexually victimized from those at high risk of being sexually abusive. This information is provided in the agency policy 601.209, page 9-10. This was also confirmed during the interviews with the PREA Coordinator, PREA Compliance Manager, and the staff assigned to conduct the risk screening. This auditor spoke with 1 inmate that identifies as transgender and 3 inmates that identify as a gay person and all agreed their housing was discussed during the classification interview. They agreed to the level of housing recommended by the facility and no further issues were discussed.</p> <p>Agency policy 602.053, page 6 indicates the facility will make individualized determinations on a case-by-case basis to ensure the residents health and safety. Reassessments will occur at least twice each year or upon a change of status. This was confirmed during the intake screening staff interview. The facility site review provided the opportunity to confirm all inmate showers are conducted separately, a shower curtain is provided for privacy, and the inmate random and informal interviews concluded no issues reported due to other staff or inmates viewing the inmates while changing clothes, showering, or using the restrooms. The random staff interviews advised no concerns with this type of issue. The video</p>

monitoring equipment did not indicate concerns regarding this issue. The facility does not place lesbian, gay, bisexual, transgender, or intersex inmates in a dedicated housing facility, unit, or wing based on their status. This is forbidden in policy 601.209, page 9.

Conclusion: Based on the review and analysis of the following available evidence: agency policy governing the use of screening information, documentation of the use of screening, documentation of housing decisions, reassessments, and facility housing considerations for the special populations, the auditor has determined that the agency is fully compliant with this standard regarding inmate risk of victimization and abusiveness.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.43 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Administrative Custody Housing Status 4. Sexual Abuse/Sexual Harassment Prevention, Protective Custody <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. 1 Staff Supervising Inmates in Segregated Housing 3. 0 Inmates in Segregated Housing for Risk of Suffering Sexual Abuse <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Inmate Case Files 2. Segregation Housing Records <p>Findings (By Provision):</p> <p>115.43 (a-e) Agency policy 602.053, page 11 clearly defines the information within this standard. Inmates at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The inmate will not be held for more than 24 hours to complete the assessment. This policy was confirmed during the interview with the facility Warden. This policy allows for programming, privileges, education, and work opportunities to the extent possible.</p> <p>This auditor reviewed the segregated housing records and spoke with the staff that supervise inmates in segregated housing. No inmates in the past 12 months were identified to be housed in segregated housing involuntary. The initial review would be conducted within 24 hours and the reassessment occurred would occur within 7 days. The inmate would be reassigned to general population. The facility would document the privileges such as recreation, education, and programming. The inmate may not authorized work opportunities due to behavior concerns and this was be documented on the segregation forms. The auditor interviewed inmates and they advised no concerns with their housing considerations.</p> <p>Conclusion: Based on the review and analysis of all available evidence, the auditor has determined that the agency has a policy governing involuntary segregated housing for inmates at elevated risk for sexual victimization. The facility conducts 30-day reviews and documents accordingly. The auditor reviewed facility records of housing assignments, segregation logs, and verified out of cell activities were not interrupted throughout this review. The auditor has determined the facility is fully compliant with the provisions of this standard.</p>

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.51 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Inmate Handbook 4. Facility Issued Inmate PREA Pamphlet 5. PREA Inmate Intake Handout 6. Employee Handbook, 2018 7. PREA Intake Training Video <p>Interviews:</p> <ol style="list-style-type: none"> 1. 12 Randomly Selected Staff 2. 20 Randomly Selected Inmates 3. 7 Informal Staff Interviews 4. 2 Informal Inmate Interviews 5. PREA Compliance Manager 6. Facility Warden <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the Victim Advocate information posted in the inmate handbook. 2. Reviewed the Intake PREA Video and the Third-Party mailing address. <p>Findings (By Provision):</p> <p>115.51 (a-d) The Florida Women's Reception Center provides multiple methods for inmates to privately report sexual abuse, sexual assault, sexual harassment, retaliation against reporting staff neglect, and contributing factors to these incidents. These factors are described in policy 602.053, page 9-10 and they include: verbally, in writing, anonymously, third party reporting, request forms, grievance forms, sexual abuse hotline, TIPS LINE, write the Office of the Inspector General, and write the PREA Coordinator. The victim advocate will submit an email to the PREA Compliance Manager informing there is an issue reported. These reports are documented in writing immediately and forwarded to the facility investigator for review promptly. This information was reviewed in the facility policy, page 19 of the inmate handbook, staff handbook, PREA intake form, and the inmate training video.</p> <p>The facility has a documented Memorandum of Understanding with the Creative Services to provide one method of anonymous inmate reporting to a public entity that is not part of the agency. This information is posted in all inmate living units, documented on page 19 in the inmate handbook, and available upon the intake PREA form. Random and informal</p>

inmate interviews concluded knowledge of this process and one inmate volunteered to demonstrate the operation of the phone for the auditor during the on-site review. The Florida Women's Reception Center does not detain inmates solely for civil immigration purposes and this was confirmed by the PREA Compliance Manager, and the Warden interviews. These calls are authorized at no cost to the inmate.

Agency policy 602.053, page 9 requires all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment, retaliation against inmates or staff, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Policy 602.053, page 11 advises the Warden or designee will monitor the conduct and treatment of inmates or staff who reported sexual abuse or sexual harassment for at least 90 days. The Warden confirmed this monitoring period during the interview process. The Warden also confirmed any allegations reported by another facility or to another facility will be performed from the facility head to the other facilities agency head in writing. This information will then be passed on to the facility PREA Investigator promptly. This was also confirmed on page 39 of the employee handbook.

Conclusion: Based on the review of all documents provided to the auditor in the preaudit questionnaire, interviews conducted during the on-site review, and site review observations, the auditor determines all provisions were met within this standard and no further corrective action required.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.52 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire Responses 2. Florida Department of Corrections Rule, 33-103.005, Informal Grievances 3. Florida Department of Corrections Rule, 33-103.006, Formal Grievances 4. Inmate Handbook 5. Agency Policy 602.053, Prison Rape: Prevention Detection, and Response, September 7, 2021 6. Intake PREA Pamphlet <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. 20 Randomly Selected Inmates 3. 12 Randomly Selected Staff <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Grievance forms are readily available to the inmate population in all housing units. <p>Findings (By Provision):</p> <p>115.52 (a-g) Agency policy 33.103.006, pages 2-3 explain the administrative procedures that address inmate grievances relative to sexual abuse, sexual assault, and sexual harassment. This policy does not place a time limit for an inmate to submit a grievance relating to these topics. Inmates are not required to use any informal grievance processes when submitting a grievance regarding sexual abuse. This was confirmed during the facility Warden and PREA Compliance Manager interviews. The agency policy 33.103.011, page 1 includes elements (a-g) of this standard. The auditor interviewed 3 inmates that reported sexual abuse, and all indicated knowledge of reporting by using the grievance procedure. All inmate interviews indicated they felt conflict but confident they would receive a response from staff if filing a grievance. The Florida Women’s Reception Center reported 6 grievances filed regarding a sexual abuse allegation in the last 12 months. The auditor verified all 6 allegations were investigated.</p> <p>Conclusion: The Florida Department of Corrections recognizes the inmate grievance system as a primary method of reporting for the inmate population. All grievances received relative to sexual abuse will be immediately forwarded to the facility PREA Investigator for investigation. The facility has a policy to ensure grievances alleging sexual abuse or sexual harassment are forwarded for investigation. Inmates are informed the proper ways to submit allegations in the intake PREA pamphlet, comprehensive education, and Inmate Handbook. The Auditor determined the facility meets the requirements of this standard as its policy is to forward grievances alleging sexual abuse and sexual harassment to investigators. No further action is required.</p>

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 300">Standard 115.53 Analysis</p> <p data-bbox="240 387 999 416">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 533">Documents :</p> <ol data-bbox="240 560 1225 875" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. PREA Intake Pamphlet (Spanish/English) 4. Facility PREA Posters (Spanish/English) 5. 2018 Inmate Handbook 6. Memorandum of Understanding (MOU), Creative Services, February 6, 2018 <p data-bbox="240 963 352 992">Interviews:</p> <ol data-bbox="240 1019 647 1218" style="list-style-type: none"> 1. 20 Random Inmates 2. Inmates Who Reported Sexual Abuse 3. Facility Warden 4. PREA Compliance Manager <p data-bbox="240 1305 512 1335">Site Review Observations:</p> <ol data-bbox="240 1361 1457 1480" style="list-style-type: none"> 1. Verified all third-party reporting materials, victim advocate materials are posted in the inmate living units in both English and Spanish. 2. Verified telephone and mail monitoring notices are posted in the inmate living units in both English and Spanish. <p data-bbox="240 1568 483 1597">Findings (By Provision):</p> <p data-bbox="240 1624 1489 1787">115.53 (a-c) Agency policy 602.053, page 10 includes the information regarding outside victim advocates for emotional support services relating to sexual abuse, sexual assault, and sexual harassment. The Florida Women's Reception Center utilizes the services of the Creative Services, a nonprofit organization to provide an outside reporting mechanism for inmates. This is accomplished by inmates calling a toll-free number or a speed dialing method. Creative Services is a community-based volunteer program designed to enhance the quality of life for victims of sexual violence.</p> <p data-bbox="240 1814 1477 2013">The Florida Women's Reception Center established a Memorandum of Understanding with Creative Services in 2018. The auditor reviewed the documents for clarity and all signatures are current and binding. The MOU may be revised at any time by either party and the terms of the MOU do not expire without written notice by both parties. The Creative Services information is posted in all inmates living units near the phones, listed on the website, provided in the inmate handbook, and listed on the initial intake PREA form provided upon arrival to the facility. The auditor confirmed the facility provides the name, address, and phone number at no cost to the inmate and these services are confidential.</p> <p data-bbox="240 2040 1489 2136">The Florida Women's Reception Center does not detain persons solely for civil immigration services. This information was confirmed during the facility Warden interview. The staff members interviewed were able to identify the victim advocate as an option for confidential inmate support services. A total of 20 random inmate interviews, and 3 inmate interviews that have</p>

reported sexual assault, indicated knowledge of the victim advocate, and identified the number, and the poster. The inmate reported feeling confident these services would be useful, but no inmates advised attempts to contact the agency. The PREA Compliance Manager was not aware of any current inmates that have utilized the service.

Conclusion: Based on the review of all evidence supplied by the facility to include agency policy regarding an outside victim advocate for emotional support and services, a policy describing one method for inmates to report anonymously, a policy regarding inmates not being detained solely for civil immigration purposes, a policy for staff to privately report, accepting reports from inmates in writing, an MOU with victim advocate, and the inmate handbook, the auditor has determined the facility meets the substantial requirements of this standard. No further action is required regarding the provisions of this standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.54 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Zero-tolerance and third-party reporting poster (English/Spanish) 4. 2018 Inmate Handbook 5. Florida Department of Corrections Rule 33-103.006, Formal Grievances <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. 20 Random Inmates 3. 2 Informal Inmate Interviews <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Identified the PREA posters in both Spanish/English format indicating the third-party reporting address. 2. Reviewed the agency website for the third-party reporting information. <p>Findings By Provision:</p> <p>115.54 (a) The facility has established a procedure to receive third-party reports of sexual abuse and sexual harassment. This is described in facility policy 33-103.006, page 1-3. This information is also published on the facility's website and the notification process to complete the third-party reporting form. There are posters throughout the facility and in the front visitation lobby regarding third-party reporting and the form to file the complaint. The inmates are provided a number to contact the victim advocate, and this information is posted on the PREA intake document, inmate handbook, PREA video, and a pamphlet is posted near the inmate phones in the living units. The random and informal inmate interviews indicted knowledge of the third-party reporting methods and inmates advised they felt comfortable reporting all allegations of sexual misconduct.</p>

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.61 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1225 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Investigative Files 4. Facility Investigative Spreadsheet <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 902 552 1216" style="list-style-type: none"> 1. 12 Randomly Selected Staff 2. 7 Informal Staff 3. Facility Warden 4. PREA Compliance Manager 5. 1 Medical Staff 6. 1 Mental Health Staff <p data-bbox="240 1305 512 1332">Site Review Observations:</p> <ol data-bbox="240 1361 1010 1559" style="list-style-type: none"> 1. Reviewed Investigative Files 2. Reviewed Incident Reports 3. Reviewed Allegations of PREA Reports Referred to the PREA Investigator 4. Compared the dates received to the date the investigation began <p data-bbox="240 1648 483 1675">Findings (By Provision):</p> <p data-bbox="240 1704 1493 1933">115.61 (a-e) Agency policy 602.053, page 10 describes the agency requirements for all staff to report any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment immediately. The policy also requires the staff to report any knowledge of retaliation against inmates or staff who reported incidents and staff neglect that may have contributed to an incident or retaliation. This was confirmed during the interview with the Warden and the PREA Compliance Manager. The auditor verified this process during the random and informal staff interviews as staff conveyed the directive to notify a supervisor immediately. The staff also identified the PREA investigator as the primary source for conducting PREA investigations.</p> <p data-bbox="240 1962 1481 2123">Agency policy 602.053, page 10 indicates apart from reporting to designated supervisor or officials, staff shall not reveal any information related to a sexual abuse report to anyone other than to make treatment, investigation, and other security and management decisions. The auditor interviewed 12 random staff indicating knowledge of this policy and the mandatory reporting requirements. The Florida Women's Reception Center does not house youthful offenders as confirmed during the census report review.</p>

The auditor reviewed a document provided to the inmate during the medical screening process. This document informs the inmate of the practitioners requirement to report all allegations of sexual misconduct immediately and limits the confidentiality of the inmate at the initiation of services. The auditor reviewed 27 inmate medical files and this document was included in all files. This procedure was confirmed by the Mental Health Director and the Health Services Administrator during the interview process. The inmate must sign the document indicating full understanding at the time of the services.

The auditor reviewed investigative files and incident reports to conclude the investigative process was begun immediately. Policy 602.053, page 10 indicates upon notification of an incident involving sexual assault, sexual battery, or sexual harassment the shift supervisor will ensure the Emergency Action Center is contacted, all facility forms completed, and the Management Notification System report is submitted. This process will generate an incident number and the Office of the Inspector General will be notified to begin the investigation immediately. Florida Statute 794.027 requires a duty to report all allegations of sexual battery.

Conclusion: Based on the evidence provided by the facility, the auditor determined the agency has relevant policies governing the reporting by staff regarding incidents of sexual abuse or sexual harassment, and the reporting by the facility regarding all allegations of sexual abuse and sexual harassment to designated investigators. The facility medical staff indicated no limits toward confidentiality regarding the reporting of sexual abuse, sexual assault, or sexual harassment allegations as all staff interviewed advised reporting to the Shift Commander immediately. The facility does not house youthful offenders and the agency policy mandates reporting to the designated State and local services for an alleged victim under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute. The auditor reviewed samples of the reports provided by investigators and determined all investigations began immediately. The facility meets the provision requirements of this standard and no further action is required.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.62 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Facility Investigations Spreadsheet 4. PREA Allegations and Bed Moves Reports <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Head Designee 2. Facility Warden 3. 12 Random Staff 4. Inmates in Segregation for High Risk of Sexual Abuse <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. File reviews to determine elevated risk for sexual victimization 2. Reviewed PREA Allegations and Bed Moves Reports <p>Findings (By Provision):</p> <p>115.62 (a) Agency policy 33-602.220, page 1-3 describes when the facility learns an inmate is subject to substantial risk of imminent sexual abuse, it shall take immediate action to protect the inmate. The Warden interview indicated segregation may be ordered immediately to protect the inmate or others, but the action must be reviewed within 72 hours by the appropriate authority. The facility reported no incidents in the past 12 months that determine an inmate was subject to a substantial risk of imminent sexual abuse. The auditor reviewed 27 inmate classification files and determined no inmates were housed in segregation due to high risk for sexual victimization. The classification revealed no inmates were housed in segregation for less than 24 hours. No program activities were interrupted due to this housing assignment. The auditor interviewed random inmates and they indicated satisfaction regarding their housing placement and did not convey any sexual safety concerns.</p> <p>Conclusion: The auditor determined the agency has a policy governing the facilities protection duties when inmates are subject to a substantial risk of imminent sexual abuse. The auditor reviewed relevant documentation related to the determination of inmate's substantial risks and the agency's response. This includes medical requirements, investigator requirements, and the relevant views of the facility leadership toward compliance. Based on the review of all evidence provided the facility meets the provision of this standard. No further action is required.</p>

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.63 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021
3. Notification of Sexual Abuse Allegation to Another Facility Form
4. Reviewed 1 case file for notification to another facility
5. Reviewed 1 case file for notification received from another facility

Interviews:

1. Agency Head Designee
2. Facility Warden
3. PREA Compliance Manager

Site Review Observations:

1. Reviewed 1 case file including the case history, email notifications from facility heads, Notification of Abuse Allegation Forms, and investigation report. Reported to another facility.
2. Reviewed 1 case file including the case history, email notifications from facility heads, Notification of Abuse Allegation Forms, and investigation report. Received from another facility.

Findings (By Provision):

115.63 (a-d) Agency Policy 602.053, page 12 indicates upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. The Warden indicated he would personally contact the Warden at the facility where the abuse occurred, and he would expect the other agency to return the same courtesy. The Warden explained all allegations are taken seriously and treated with an immediate response. The agency policy 602.053, page 12 indicates the documented notification will occur within 72 hours and must be documented in the MINS system. The Florida Women's Reception Center has reported 4 allegations of sexual abuse to other facilities in the past 12 months. The Florida Women's Reception Center has also received 1 allegation of sexual abuse from another facility in the past 12 months. The auditor received the NIMS number and confirmed the investigative actions. The auditor reviewed email documentation for compliance regarding previously reported incidents and the notification was provided within the mandated 72-hour timeframe to the agency head and documented in an incident report.

Conclusion: The facility has a policy to ensure reporting of allegations of sexual abuse of inmates while confined at another facility. The agency policy requires all allegations of sexual abuse received from another facility is investigated immediately. All investigations and notifications are documented and referred to the investigator within 72 hours of the receipt of the allegation. The auditor reviewed the documentation of allegations that an inmate was abused while in confinement, documentation that the notifications occurred within 72 hours, and the documentation of the notification from each agency head or appropriate staff person. Based on the evidence provided the facility meets the provisions required within this standard and no further action is required.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.64 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Emergency Response Cards
3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021
4. Initial Response Checklist - Alleged Victim
5. Initial Response Checklist - Alleged Abuser

Interviews:

1. 1 Non-Security Staff First Responder
2. 1 Security Staff First Responder
3. Inmates Who Reported Sexual Abuse
4. 12 Random Staff

Site Review Observations:

1. Reviewed the Initial Response Checklist for the victim and the abuser
2. Reviewed the Emergency Response Card being utilized by the staff

Findings (By Provision):

115.64 (a-b) Agency policy 602.053, page 11 describes the staff first responder duties. The policy indicates the staff responsibilities for security and non-security employees. The directives for the security staff include the following: separate the alleged victim and abuser, preserve, and protect the scene, and collect the evidence if time is allotted. Do not allow the victim or abuser to participate in any activities that may destroy evidence such as: washing, brushing teeth, changing clothes, urinating, defecating, smoking, or eating. If the first responder is a non-security staff member, the responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify a security staff member immediately.

The facility reported 25 allegations of sexual abuse within the past 12 months, 20 cases that involved the separation of the victim and the abuser, no cases where physical evidence was collected, and the staff informed the inmates to not make any attempts to destroy the physical evidence. The auditor concluded staff knowledge regarding these actions throughout the facility as the auditor interviewed 1 security staff designated as first responders and 1 non-security staff. The common response was to notify a supervisor immediately and follow the four-step action plan. The action plan was also noted in the employee handbook, staff training curriculum, and verified during the Warden interview. The auditor interviewed 12 random staff members, and all 12 were able to convey the action plan steps required within the policy to provide an immediate response.

Conclusion: The agency has a policy governing the staff first responder duties to include a security and non-security staff response. The policy mandates the four-step action plan previously mentioned within the body of the narrative. The auditor reviewed documentation and interviews indicating full compliance with this standard. No further action is required by the facility as they have met substantial compliance.

115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.65 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Facility Coordinated Response Plan, January 24, 2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator 3. 12 Random Staff 4. 7 Informal Staff Interviews <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the First Responder Duty Cards 2. Reviewed the facility response plan. <p>Findings (By Provision):</p> <p>115.65 (a) The Florida Women's Reception Center has a written plan to coordinate actions for all staff during reported allegations of sexual abuse, sexual assault, and sexual harassment. The action plan describes the procedures for the following participants: volunteers and contractors, support staff, security staff, shift commanders and shift supervisors, first responder duties, medical and mental health practitioners, investigators, and facility leadership. The facility plan is documented, provides detailed actions for providers, and the staff were able to convey their specific duties during the random and informal interviews. The facility Warden and the PREA Coordinator interviews indicated reminders to staff regarding their specific duties annually and the auditor reviewed this information within the training plan.</p> <p>Conclusion: This response plan is separate from the agency response plan, and it is more locally individualized to meet the specific needs of the facility. The auditor reviewed documents and conducted staff interviews to measure the effectiveness of the written plan. Based on the evidence provided by the facility, compliance was indicated, and no further action is required.</p>

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 453 237">Auditor Discussion</p> <p data-bbox="240 271 413 297">Standard 115.66</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1225 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Florida Security Services Bargaining Unit Agreement, September 30, 2021 4. Employee Handbook <p data-bbox="240 846 352 873">Interviews:</p> <ol data-bbox="240 902 507 987" style="list-style-type: none"> 1. Facility Warden 2. Agency Head Designee <p data-bbox="240 1077 509 1104">Site Review Observations:</p> <ol data-bbox="240 1133 1358 1160" style="list-style-type: none"> 1. Reviewed investigative documents regarding staff separation from the alleged victim during PREA allegations <p data-bbox="240 1249 483 1276">Findings (By Provision):</p> <p data-bbox="240 1305 1489 1467">115.66 (a) The auditor reviewed page 63 of the employee handbook, and the 2021 Collective Bargaining Agreement and found no evidence to deny satisfactory compliance toward this standard. These documents do not 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. The Warden confirmed this process during the onsite interview.</p> <p data-bbox="240 1496 1465 1693">Conclusion: The auditor reviewed the evidence provided by the facility and found no evidence to deny satisfactory compliance toward this standard. These documents do not limit the agency's ability to remove alleged staff sexual abusers from the contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted. The facility Warden interview confirmed this process, and the Warden indicated disciplinary action will be followed by notification to the Office of the Inspector General for criminal acts and certifying bodies for certification review.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.67 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1225 701" style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire Responses 2. Retaliation Monitoring Form 3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <p data-bbox="240 790 352 817">Interviews:</p> <ol data-bbox="240 846 743 1272" style="list-style-type: none"> 1. Agency Head Designee 2. Facility Warden 3. 1 Staff Member Assigned to Monitor Retaliation 4. Inmates who Reported Sexual Abuse 5. Inmates High Risk of Sexual Victimization 6. 12 Random Staff 7. 20 Random Inmates 8. PREA Compliance Manager <p data-bbox="240 1361 512 1388">Site Review Observations:</p> <ol data-bbox="240 1417 1374 1503" style="list-style-type: none"> 1. Reviewed for email transcripts from the facility Warden to the compliance monitor extending the 90-day review. 2. Reviewed Investigative files for retaliation monitoring documents. <p data-bbox="240 1592 483 1619">Findings (By Provision):</p> <p data-bbox="240 1648 1445 1809">115.67 (e) The agency has 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, and this is described in policy 602.053, pages 11-12. The facility PREA Compliance Manager is the designated staff members charged with monitoring retaliation. This position is provided the necessary support by the Warden and during the interview process indicated an active role toward retaliation monitoring advising this is an ongoing process.</p> <p data-bbox="240 1839 1489 2134">The facility attempts to employ multiple protection measures by monitoring housing changes, transfers for inmate victims and abusers, removal of staff through termination, emotional support services, monitoring the inmate and staff performance evaluations, disciplinary actions, unannounced lockdowns, denial of privileges, grievances, and the inmates are provided with materials to assist the communication process. Literature is posted in the inmate handbook, posters, and methods of reporting retaliation described in the daily PREA video. The Warden indicated additional reviews may be considered every 7 days once the 90-day review has concluded. Random interviews with staff and inmates indicated no cause for concern with retaliation. The auditor interviewed the PREA Compliance Manager, 3 inmates that reported abuse, no inmates classified as high risk, and 1 classification manager and no interviews indicated retaliation concerns. The facility reported no allegations of retaliation in the past 12 months and the classification files documented the 90-day reviews.</p>

Conclusion: The Florida Women's Reception Center has an agency policy protecting all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation. This extends from retaliation from inmates or staff and includes the monitoring of inmates and staff following a report, and the agency response to the suspected retaliation. The auditor reviewed documentation and interviews to support these findings and the auditor finds the facility has met the provisions of this standard with substantial compliance. No further action is required.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.68 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021
3. Report of Administrative Confinement for 24 Hours, July 19, 2021

Interviews:

1. Facility Warden
2. Staff Supervising Segregated Housing
3. Inmates in Segregated Housing

Site Review Observations:

1. Reviewed records and documentation of housing assignments of inmates who alleged to have suffered sexual abuse.
2. Documentation of in-cell AND out- of-cell programs, privileges, education, and work opportunities for inmates in segregated housing.
3. Reviewed if the facility restricts access to programs, privileges, education, or work opportunities.
4. Reviewed records for length of placement in segregated housing for those who alleged to have suffered sexual abuse.
5. Reviewed records indicating inmates are placed in involuntary segregated housing for a period that does not ordinarily exceed 30 days.
6. Reviewed Case files of inmates who alleged to have suffered sexual abuse held in involuntary segregated housing in the past 12 months.

Findings (By Provision):

115.68 (a) Agency policy 602.053, page 11 clearly defines the information within this standard. Inmates at high risk of sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been made, and there are no other alternative means of separation. The inmate will not be held for more than 24 hours to complete the assessment. This policy was confirmed during the interview with the facility Warden. This policy allows for programming, privileges, education, and work opportunities to the extent possible. This auditor reviewed the segregated housing records and spoke with the staff that supervise inmates in segregated housing. Two inmates in the past 12 months were identified to be housed in segregated housing involuntary. The initial review was conducted within 24 hours and the inmates were released to general population housing. The facility documented the privileges such as recreation, education, and programming. The inmate was not authorized work opportunities due to behavior concerns and this was documented on the segregation forms. The auditor interviewed both inmates and they advised no concerns with their housing considerations, they were able to utilize the recreation areas.

Conclusion: The agency has a policy governing the use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse. The auditor reviewed the facility evidence provided, interviews, and on-site compliance determinations. Based on the evidence provided the facility demonstrates compliance to all provisions within this standard and no further action is required.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Standard 115.71 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 6. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Investigative Staff 2. Inmates who Reported Sexual Abuse 3. Facility Warden 4. PREA Coordinator 5. PREA Compliance Manager <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports <p>Findings (By Provision):</p> <p>115.71 (a-l) The Office of the Inspector General conducts all investigations regarding allegations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment for the Florida Department of Corrections as required in Florida Statute 944.31. This information was confirmed during the investigator interview. Policy 602.053, page 13 requires the investigations to be conducted promptly, thoroughly, and objectively for all allegations of sexual abuse, sexual assault, and sexual harassment. The auditor reviewed investigative reports to include reports from the third-party allegations and 13 cases are still active, 7 unfounded, 5 unsubstantiated, 10 cases are closed and determined to be not PREA related.</p> <p>Agency policy 602.053, page 8 requires the agency use investigators who have specialized training in sexual abuse investigations. This training includes 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. The Office of the Inspector General will prepare compelled interviews and communicate all activities with the County Prosecutor. The compelled interviews would be conducted while moving forward throughout the investigative process and truth telling devices, such as a polygraph, would not be utilized strictly to continue the investigation. The auditor verified the agency has 140 certified PREA Investigators. All investigative records reviewed by the auditor were conducted by a PREA trained investigator. The shift supervisors gather the information and the certified</p>

PREA investigator conducted all investigations and support was provided by staff interviews, reviewing investigative records, email notifications, and revised spreadsheets. The shift supervisors gathered personal data, secured the scene, and performed first responder duties.

The Office of the Inspector General will review the evidence provided throughout the investigation to determine if the case will be deemed criminal or administrative. A criminal case will be consulted with the local prosecutor and the administrative case will be directed back to the facility Warden for administrative action. The Warden will consult with the investigator to determine if staff actions or failures to act contributed to the incident. All cases will be reviewed, and determinations made based on the following: written reports, physical and testimonial evidence, credibility assessments, and the investigative facts and findings. All investigations are documented in a written report and maintained for as long as the alleged abuser is incarcerated or employed by the agency, and then five years thereafter. Policy 602.053, page 15 explains the departure of the alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating the investigation. All parties will cooperate with the investigation and outside licensing bodies will be notified. This was confirmed during the investigator and Warden interviews.

Conclusion: The Virginia Department of Corrections has an agency policy related to the handling of criminal and administrative agency investigations in cases where sexual abuse is alleged. The auditor reviewed all evidence provided, reviewed case files, conducted interviews, and reviewed a sample of the retained investigations; the auditor finds the Florida Women's Reception Center meets the provisions of this standard with compliance.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.72 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 6. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 7. Agency Policy 108.003, Investigative Process, June 28, 2000 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Investigative Staff <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports <p>Findings (By Provision):</p> <p>115.72 (a) Agency policy 108.003, page 7 requires the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. The interview with the facility PREA investigator revealed the facility standard is preponderance of the evidence for administrative investigations. The auditor reviewed investigative files and determined a preponderance of the evidence statement was included within the narrative of the report.</p> <p>Conclusion: The agency has a policy imposing a standard of preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment is substantiated. Based on the evidence provided, the auditor has determined compliance with the provisions of this standard. No further action is required.</p>

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.73 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1453 929" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Agency Policy 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, February 22, 2018 6. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 7. Agency Policy 108.003, Investigative Process, June 28, 2000 <p data-bbox="240 1019 352 1046">Interviews:</p> <ol data-bbox="240 1075 638 1220" style="list-style-type: none"> 1. Investigative Staff 2. Facility Warden 3. Inmates that Reported Sexual Abuse <p data-bbox="240 1310 509 1337">Site Review Observations:</p> <ol data-bbox="240 1366 587 1512" style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports 3. Inmate Notifications <p data-bbox="240 1601 464 1628">Findings by Provision:</p> <p data-bbox="240 1655 1490 1809">115.73 (a-e) Agency policy 108.003, page 15 requires following an investigation into an inmates allegation of sexual abuse, the agency must inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. The auditor reviewed a documented investigation and written notification to the inmate was provided as an unfounded complaint. The PREA Compliance Manager reported 12 investigations completed in the last 12 months and 12 notifications were documented as issued to the inmate.</p> <p data-bbox="240 1843 1477 2134">Agency policy 108.015, pages 10-11 requires if the allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate whenever the staff member is no longer posted in the inmates unit, no longer employed at the facility, indicted on a charge, or have been convicted on a charge related to sexual abuse. The policy reflects these steps are not required if the results of the allegation are unfounded. The facility reported zero substantiated allegations documented within the last 12 months against a staff member. Policy 108.015, pages 10-11 requires when the allegation is the result of sexual abuse by another inmate, the facility must notify the victim when the agency learns that the alleged abuser has been indicted on a charge, or convicted on a charge, and these steps are not required if the result of the allegation is unfounded. The facility Warden and the PREA investigator confirmed this communication process during the on-site review. The PREA Coordinator indicated knowledge of this occurring throughout</p>

the investigative process. This auditor reviewed documentation of this notification process occurring during the on-site review.

Conclusion: The agency has a policy requiring that any inmate who makes an allegation of suffering sexual abuse in an agency or facility is informed, in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded. Based on the evidence provided the facility meets the provisions of this standard with compliance and no further action is required.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.76 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Sample of Cases Referred for Prosecution 6. Investigation Summary with Inmate Notification 7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies 8. Agency Policy 208.039, Employee Counseling and Discipline, September 12, 2019 9. Agency Policy 33-208.003, Range of Disciplinary Actions, February 22, 2016 10. Agency Policy 60L-36.005, Conduct of Employees, December 27, 2015 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. Human Resources Staff <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports 3. Reviewed Inmate Notifications <p>Findings (By Provision):</p> <p>115.76 (d) The presumptive disciplinary sanction for staff who has engaged in sexual abuse at the Florida Women's Reception Center is termination and this is explained in policy 208.039, page 8. This policy was confirmed by the Warden during the interview process and reviewed by the auditor in the employee handbook. Staff shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse and sexual harassment policies. The disciplinary action is commensurate with the acts committed, staff disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories. The facility reported no incidents in the past 12 months for staff who have been terminated or disciplined for violation of the agency sexual abuse or sexual harassment policies. The auditor reviewed the disciplinary action of staff and the sanctions imposed was termination. The Warden confirmed past incidents being referred to law enforcement for prosecution and notifying the applicable licensing board such as the Criminal Justice Services, Board of Nursing, and the Department of Education. These notifications occur upon termination or resignations in lieu of termination. This is required by Florida Statute 944.35 and the Office of the Inspector General.</p>

Conclusion: The Florida Department of Corrections has a policy regarding disciplinary violations for acts of sexual abuse or sexual harassment. The auditor reviewed the agency policy and determined the facility requires no further action as the presumptive expectation of disciplinary action is termination when there are substantiated violations of sexual abuse allegations. The facility provided documentation supporting this practice and no further action is required for compliance.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.77 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Investigative Reports
3. Record Retention Schedule
4. Copies of Case Records
5. Sample of Cases Referred for Prosecution
6. Investigation Summary with Inmate Notification
7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies
8. Agency Policy 205.002, Contract Management, April 27, 2021
9. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021

Interviews:

1. Facility Warden
2. Contract Staff

Site Review Observations:

1. Reviewed Case Files
2. Reviewed Investigative Reports
3. Reviewed Inmate Notifications

Findings (By Provision):

115.77 (a-b) Agency policy 205.002, page 19 requires any contractor or volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies. This procedure is not enforced if the activity is clearly not criminal, or the allegation is unfounded. Notifications will also be made to relevant licensing bodies and the facility shall take appropriate remedial measures to determine further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment. The facility did not report any volunteer or contractor terminations, discipline, law enforcement referrals, or notifications to relevant licensing bodies for violations of sexual abuse, sexual assault, or sexual harassment. This was confirmed during the Warden interview and informal interviews with the command staff.

Conclusion: The Florida Department of Corrections has a policy regarding disciplinary violations or acts of sexual abuse or sexual harassment. Based on the review of evidence provided by the facility, the auditor has determined the Florida Women's Reception Center meets the provisions required within this standard. No further action is required, and the presumptive expectation of disciplinary action is termination.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.78 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Investigative Reports 3. Record Retention Schedule 4. Copies of Case Records 5. Sample of Cases Referred for Prosecution 6. Investigation Summary with Inmate Notification 7. Sample of Records of Termination, Resignation, or other Sanctions for Violation of Sexual Abuse or Sexual Harassment Policies 8. Agency Policy 33-601.314, rules of Prohibited Conduct and Penalties for Infractions 9. Agency Policy 33-601.301, Inmate Discipline-General Policy, February 12, 2015 10. Inmate Classification Files 11. Inmate Disciplinary Files 12. Inmate Medical Files 13. Agency Policy 33-601.800, Close Management <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. 1 Medical Staff 3. 1 Mental Health Staff <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed Case Files 2. Reviewed Investigative Reports 3. Reviewed Inmate Notifications <p>Findings (By Provision):</p> <p>115.78 (a-g) Agency policy 602.053, page 15 informs inmates shall be subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal finding of guilt for sexual abuse. The facility reported no administrative findings of inmate-on-inmate sexual abuse or criminal findings in the past 12 months. This was confirmed by the facility Warden, Health Services</p>

Administrator, Mental Health Director, and inmate medical files reviewed. The Mental Health Director indicated potential screenings to address or correct the underlying reasons or motivations for abuse. The facility utilizes medical contractors for assistance and the outside victim advocate for counseling services.

Agency policy 602.053, page 15 advises the facility may discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. The facility prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish enough evidence to substantiate the allegation. The facility prohibits all sexual activity between inmates and may discipline inmates for such activity.

Conclusion: The agency has a policy which states inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following an administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse. The auditor reviewed all records and findings associated with the provisions of this standard and no further action is required. The Florida Women's Reception Center meets the compliance required with this standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.81 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Inmate Medical Files
3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021
4. Classification Records
5. Mental Health Confidential Disclosure Statement
6. Medical and Mental Health Records

Interviews:

1. Facility Warden
2. 1 Medical Staff
3. 1 Mental Health Staff
4. Inmate Reporting Prior Sexual Victimization

Site Review Observations:

1. Reviewed files and records logs

Findings (By Provision):

115.81 (a-e) The auditor reviewed electronic medical files and reviewed the facility policy regarding inmates experiencing prior victimization and abusiveness. Agency policy 602.053, pages 13-14 provide this information and verifies staff shall ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake process. This was also confirmed during the interview with the Mental Health Director. The staff member from intake will generate the referral request based on the information received during the screening. The referral will be noted in the medical files, and this begins an internal time clock to track the number of days until the 14-day review is completed. The medical staff must clear the request from the system, or the clock will continue to track the number of days pending review.

The medical staff and authorized staff are provided a username and password to access the medical records. This information is strictly for treatment plans, housing decisions, bed assignments, work details, educational programming, or as otherwise required by federal, state, and local law. Inmates sign the medical screening form to provide consent for professional health care services and to receive instructions regarding access to medical, dental, and mental health care. The auditor reviewed medical files demonstrating the mental health assessment was conducted within the 14-day period.

Conclusion: The Florida Department of Corrections has a policy governing the facility response to medical and mental health services in correlation with the review of the inmate risk assessment screenings. The policy stresses confidentiality within the medical environment and manages the immediate health needs, security risks, and the determination for further treatment. A review of all evidence provided by the facility indicates compliance with the provisions of this standard. No further action is required.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

Standard 115.82 Analysis

The following evidence was analyzed in making compliance determinations:

Documents :

1. Florida Women's Reception Center Pre-Audit Questionnaire Responses
2. Inmate Medical Files
3. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021
4. Classification Records
5. Mental Health Confidential Disclosure Statement
6. Agency Policy, 401.010, Co-payment requests for Inmate Medical Encounter, October 5, 2020

Interviews:

1. Facility Warden
2. 1 Medical Staff
3. 1 Mental Health Staff
4. Inmate Reporting Prior Sexual Victimization

Site Review Observations:

1. Reviewed files and records logs

Findings (By Provision):

115.82 (a-d) Agency policy 602.053, page 14 requires inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The facility offers 24-hour medical care and 24-hour crisis intervention services. The facility provides on site emergency room care and utilizes the Ocala Regional Hospital for the SAFE/SANE exams. The Creative Services provides 24-hour counseling and crisis intervention services, and the facility supports its own crisis stabilization and transitional care units. The Ocala Regional Hospital performs all sexual assault examinations and offers prophylaxis to safeguard from sexually transmitted diseases. The SANE provides the notification to the Creative Services for on-site advocacy during the exam. The volunteers will be notified to provide crisis intervention services and advocacy. The level of care at the Florida Women's Reception Center is consistent with the level of care demonstrated within the community. The auditor spoke with the medical staff and confirmed on-site exams are conducted with the presence of a volunteer advocate. The auditor reviewed the MOU for the Creative Services for clarity.

This auditor reviewed the inmate handbook provided by the facility to ensure compliance. The treatment services are provided to every victim without financial cost, regardless of whether the victim names an abuser or cooperates with any investigation arising out of the incident. This was confirmed by the Health Services Administrator and no concerns were present during the informal inmate interviews. No victims of sexual assault were available during the on-site review as this facility has not reported a substantiated allegations in the past 12 months. The auditor interviewed 3 inmates who have reported sexual abuse and they did not indicate any concerns within this standard.

Conclusion: Based on the auditor's review of the evidence provided by the facility to include policies regarding access to treatment services, samples of secondary materials relating to forms, logs, and immediate notification documents, the facility is fully compliant with this standard. No further action is required.

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Meets Standard
	<p data-bbox="240 210 451 237">Auditor Discussion</p> <p data-bbox="240 271 504 297">Standard 115.83 Analysis</p> <p data-bbox="240 387 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="240 504 371 530">Documents :</p> <ol data-bbox="240 560 1225 1048" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Inmate Medical Files 3. Health Services Bulletin, 15.03.39, Health Care for Pregnant Inmates, January 9, 2014 4. Classification Records 5. Mental Health Confidential Disclosure Statement 6. Medical and Mental Health Records 7. Agency Policy 401.010, Co-Payment Requests for Inmate Medical Encounter, October 5, 2020 8. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 9. Health Services Bulletin, 15.03.36, Post Sexual Battery Medical Action, October 2, 2020 <p data-bbox="240 1133 352 1160">Interviews:</p> <ol data-bbox="240 1189 703 1391" style="list-style-type: none"> 1. Facility Warden 2. 1 Medical Staff 3. 1 Mental Health Staff 4. Inmate Reporting Prior Sexual Victimization <p data-bbox="240 1476 512 1503">Site Review Observations:</p> <ol data-bbox="240 1532 588 1559" style="list-style-type: none"> 1. Reviewed files and records logs <p data-bbox="240 1648 483 1675">Findings (By Provision):</p> <p data-bbox="240 1704 1493 2134">115.83 (a-h) The facility Mental Health Director indicated the facility offers medical and mental health evaluation and treatment to all inmates who have been victimized by sexual abuse. The Mental Health Director advised the evaluation and treatment plans are consistent with the level of care demonstrated within the community. At times, the inmate may qualify for additional services due to their status. The inmate treatment plans may consist of referrals for continued care, medications, transfers to other facilities, or accommodations upon release. The Florida Women's Reception Center does house female inmates. Agency policy 602.053, page 14 advises inmate victims will be offered tests for sexually transmitted infections and all treatment services will be provided at no cost to the victim. This information is supported in the inmate handbook. The Creative Services will also provide outside emotional support services and can be reached by phone or mail. This information was confirmed during the Health Services interview and the informal staff interviews. The informal inmate interviews expressed knowledge regarding the free medical, mental health, and emotional support services offered at the facility. The Creative Services information was posted near every phone in the inmate living units. All random inmate interviews confirmed knowledge of this service. The Mental Health Director confirmed the 60-day mental health assessments are conducted for inmate-on-inmate abusers.</p>

Conclusion: Based on the auditor's review of the following evidence provided by the facility: policy governing ongoing medical and mental health care for sexual abuse victims and abusers, medical records indicating timely access to treatment plans, referrals, and sexually transmitted infections testing as medically appropriate. The auditor determined the facility was found in compliance with the provisions of this standard and the level of care is consistent with the level of care within the community. No further action is required.

115.86	Sexual abuse incident reviews
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Standard 115.86 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Post Incident Reviews <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator 3. Incident Review Team Member <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Discussed the Incident Review Team Process <p>Findings (By Provision):</p> <p>115.86 (a-e) Agency policy 602.053, page 16 mandates the facility conduct a sexual abuse incident review at the end of every sexual abuse investigation unless the allegation has been determined to be unfounded. This incident review must be conducted within 30 days of the conclusion of the investigation. This process was confirmed by the Warden and PREA Compliance Manager interviews. The incident review team consists of the following: Assistant Warden, Security Chief, Classification Supervisor, and the team receives input from line supervisors, investigators, and medical and mental health staff. The facility presents a report of its findings from the sexual abuse incident reviews and makes a final recommendation for improvement or documents the reasons for not performing improvements. The criteria included within the reviews consists of the following: policy revisions, incident motivations by race, ethnicity, gender identity, lesbian, gay, bi-sexual, transgender, intersex, gang affiliation, physical barriers that may have contributed to the abuse, adequate staffing levels, video monitoring equipment or lack of, mandated training by staff and inmates, appropriate supervision, notifications, and operational considerations. The auditor reviewed 2 incident review documents and noted the information was provided within the form. The Warden confirmed review of 8 reported facility incident reviews and the process was completed within the 30-day period.</p> <p>Conclusion: The auditor determined the facility met this standard with compliance based on the review of the following documentation: policies on conducting sexual abuse incident reviews, sample documentation or completed investigations, documentation of review team minutes, and recommended findings. No further action is required.</p>

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.87 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. Survey of Sexual Victimization, 2019 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator 3. Incident Review Team Member <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Discussed the Incident Review Team Process <p>Findings (By Provision):</p> <p>115.87 (a-f) The auditor reviewed the facility uniform data for every allegation of sexual abuse and compared the data to the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The facility aggregates the incident-based sexual abuse data annually and includes definitions as appropriate to the Survey of Sexual Violence. The auditor reviewed the data collected in 2017, 2018, 2019, 2020, 2021 and to date in 2022 as the data is compiled for a one-year (calendar) period after December. The Florida Women’s Reception Center does not operate another facility or contract with other facilities for the confinement of its inmates. The PREA Compliance Manager securely maintains all documentation used to compile the information and the Office of the Inspector General maintains the investigative data and records. Approved data is posted on the agency website and available upon request by the Department of Justice.</p> <p>Conclusion: The auditor reviewed the agency policies for collecting data on sexual abuse allegations, the instrument used for collecting the data, the set of definitions applied, the facility website, and a sample of the historical data used to determine the facility is fully compliant with the provisions of this standard. No further action required.</p>

115.88	Data review for corrective action
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 504 300">Standard 115.88 Analysis</p> <p data-bbox="242 385 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="242 499 371 528">Documents :</p> <ol data-bbox="242 557 1225 701" style="list-style-type: none"> <li data-bbox="242 557 986 586">1. Florida Women's Reception Center Pre-Audit Questionnaire Responses <li data-bbox="242 613 1225 642">2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 <li data-bbox="242 669 876 698">3. 2020 Facility PREA Corrective Action Plan, February 1, 2021 <p data-bbox="242 786 352 815">Interviews:</p> <ol data-bbox="242 844 580 987" style="list-style-type: none"> <li data-bbox="242 844 426 873">1. Facility Warden <li data-bbox="242 900 456 929">2. PREA Coordinator <li data-bbox="242 956 580 985">3. Incident Review Team Member <p data-bbox="242 1072 483 1102">Findings (By Provision):</p> <p data-bbox="242 1131 1493 1292">115.88 (a-d) Agency policy 602.053, pages 14-15 require the facility to review data collected and aggregate to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training. This auditor reviewed the data posted on the agency website that includes the total number of substantiated, unsubstantiated, and unfounded allegations of sexual misconduct by inmate-to-inmate and staff-to-inmate reports in 2017, 2018, 2019, 2020, and current data for 2021. This information is approved by the agency Head and posted on the facility website for review.</p> <p data-bbox="242 1321 1485 1417">The agency PREA Coordinator advised this information is utilized to identify problem areas and initiate corrective action measures when appropriate. The facility Warden confirmed the use and data associated with this report during the interview. No facility data was redacted from the annual report for publication, and this was verified by the PREA Compliance Manager.</p> <p data-bbox="242 1447 1431 1543">Conclusion: The auditor reviewed evidence provided by the facility such as corrective action plans, an annual report of findings, website materials, and found the facility is fully compliant with the provisions of this standard. No further action required.</p>

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.89 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women’s Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. 2020 Facility PREA Corrective Action Plan, February 1, 2021 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator 3. Incident Review Team Member <p>Findings (By Provision):</p> <p>115.89 (a-d) The PREA Coordinator indicated all documentation utilized for data collection is maintained by the PREA Compliance Manager. The PREA Compliance Manager collects the data and maintains electronic files on a secure server. The data report is approved by the Agency Director and the Facility Warden and posted on the Agency website annually. The auditor reviewed the report and did not observe any personally identifying information. Policy 602.053, page 15 requires the facility shall maintain sexual abuse data collected for at least 10 years after the date of the initial collection unless Federal, State, or local law requires otherwise.</p> <p>Conclusion: Based on the auditor's review of the agency policy, facility website, interviews, and historical data, the Florida Women’s Reception Center is fully compliant with the provisions of this standard. No further action is required.</p>

115.401	Frequency and scope of audits
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 210 451 239">Auditor Discussion</p> <p data-bbox="242 271 515 300">Standard 115.401 Analysis</p> <p data-bbox="242 385 999 414">The following evidence was analyzed in making compliance determinations:</p> <p data-bbox="242 499 371 528">Documents :</p> <ol data-bbox="242 557 1225 757" style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. PREA Audit Notice Verification 4. Postal Communications from Inmates <p data-bbox="242 842 352 871">Interviews:</p> <ol data-bbox="242 900 624 1043" style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator 3. Inmates Providing Correspondence <p data-bbox="242 1128 509 1158">Site Review Observations:</p> <ol data-bbox="242 1187 750 1216" style="list-style-type: none"> 1. Reviewed the Agency Website and Facility Data <p data-bbox="242 1301 483 1330">Findings (By Provision):</p> <p data-bbox="242 1359 1473 1523">115.401(a-n) The Florida Women's Reception Center received its first cycle PREA Audit Report on April 4, 2016, and was found in compliance on 39 standards, no standards exceed the expectations, 39 met the standard, 1 standard was found to not meet the expectations (115.13), and 3 standards were found to be not applicable (115.12, 115.14, and 115.18). The auditor reviewed the report on the agency website during the Pre-Audit phase. This was confirmed by the facility PREA Compliance Manager and the site review.</p> <p data-bbox="242 1552 1490 1680">The Florida Women's Reception Center conducted it second cycle PREA audit on July 16, 2019, and the facility was found in compliance on 45 standards, seven standards exceeded expectation (115.11, 115.41, 115.51, 115.53, 115.54, 115.81, and 115.82), 38 standards were evaluated with a meet's determination, and no standards were documented as does not meet or not applicable. This data was confirmed by the facility PREA Compliance Manager during the on-site review.</p> <p data-bbox="242 1709 1490 1971">The auditor was authorized complete access to the entire facility and provided this access during the on-site review. No restrictions were placed on the auditor during the Pre-Audit, onsite review, and post audit phases. The auditor received all documents requested and was provided electronic viewing upon request. The on-site review provided the auditor the opportunity to conduct private interviews with inmates, staff, volunteers, and contractors without limitations. The facility PREA Compliance Manager provided photographic evidence regarding the posting of the PREA Audit Notification in all inmates living units on March 17, 2022. This posting provided the inmates and staff a name and mailing address for the auditor. The auditor confirmed this posting during the on-site review as staff and inmate interviews validated the posting at least six-weeks prior to the on-site review.</p> <p data-bbox="242 2000 1481 2094">Conclusion: The auditor has determined based on the evidence provided by the facility and review of the facility website; the Florida Women's Reception Center meets substantial compliance with the provisions of the standard. No additional action is required.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Standard 115.403 Analysis</p> <p>The following evidence was analyzed in making compliance determinations:</p> <p>Documents :</p> <ol style="list-style-type: none"> 1. Florida Women's Reception Center Pre-Audit Questionnaire Responses 2. Agency Policy 602.053, Prison Rape: Prevention, Detection, and Response, September 7, 2021 3. PREA Audit Notice Verification 4. Postal Communications from Inmates <p>Interviews:</p> <ol style="list-style-type: none"> 1. Facility Warden 2. PREA Coordinator <p>Site Review Observations:</p> <ol style="list-style-type: none"> 1. Reviewed the Agency Website and Facility Data <p>Findings (By Provision):</p> <p>115.403(a-f) The Florida Women's Reception Center received its first cycle PREA Audit Report on April 4, 2016, and was found in compliance on 39 standards, no standards exceed the expectations, 39 met the standard, 1 standard was found to not meet the expectations (115.13), and 3 standards were found to be not applicable (115.12, 115.14, and 115.18). The auditor reviewed the report on the agency website during the Pre-Audit phase. This was confirmed by the facility PREA Compliance Manager and the site review.</p> <p>The Florida Women's Reception Center conducted it second cycle PREA audit on July 16, 2019, and the facility was found in compliance on 45 standards, seven standards exceeded expectation (115.11, 115.41, 115.51, 115.53, 115.54, 115.81, and 115.82), 38 standards were evaluated with a meet's determination, and no standards were documented as does not meet or not applicable. This data was confirmed by the facility PREA Compliance Manager during the on-site review. The final audit was published on the facility website and the auditor reviewed all documentation and compliance efforts.</p> <p>Conclusion: Based on the evidence provided by the facility, the Florida Women's Reception Center meets compliance with the provisions of this standard, and no further action is required.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	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, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	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 (N/A if the facility does not have female inmates)?	yes

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes.)	yes
	Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing?	yes
	Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication 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 all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check 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.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na
115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender 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, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required 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? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	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

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? (N/A if the facility never has persons detained solely for civil immigration purposes.)	na
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of 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) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	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: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	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? (N/A if the facility is not a jail).	na
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. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (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.)	na
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	yes
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. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes