

PREA Facility Audit Report: Final

Name of Facility: Okeechobee Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: 12/21/2020

Date Final Report Submitted: 05/04/2021

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: Lynni OHaver	Date of Signature: 05/04/2021

AUDITOR INFORMATION	
Auditor name:	O'Haver, Lynni
Email:	scarlettohara1@mac.com
Start Date of On-Site Audit:	11/03/2020
End Date of On-Site Audit:	11/06/2020

FACILITY INFORMATION	
Facility name:	Okeechobee Correctional Institution
Facility physical address:	3420 NE 168th Street, Okeechobee , Florida - 34972
Facility Phone	
Facility mailing address:	

Primary Contact	
Name:	Kavell Scott
Email Address:	Kavell.Scott@fdc.myflorida.com
Telephone Number:	786-510-1426

Warden/Jail Administrator/Sheriff/Director	
Name:	Lars Severson
Email Address:	Lars.Severson@fdc.myflorida.com
Telephone Number:	863-824-1007

Facility PREA Compliance Manager	
Name:	Kavell Scott
Email Address:	Kavell.Scott@fdc.myflorida.com
Telephone Number:	M: (305) 480-4207
Name:	Latricia Collins
Email Address:	Latricia.Collins@fdc.myflorida.com
Telephone Number:	O: (863) 824-1150

Facility Health Service Administrator On-site	
Name:	Tammy Perrine
Email Address:	tperrine@centurionoffl.com
Telephone Number:	863-824-1060

Facility Characteristics	
Designed facility capacity:	2681
Current population of facility:	2456
Average daily population for the past 12 months:	2493
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Males
Age range of population:	18-98
Facility security levels/inmate custody levels:	Facility Level 6 /Close, Medium, Minimum and Community
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	378
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	11
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	116

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:	850-488-5021

Agency Chief Executive Officer Information:	
Name:	Mark Inch
Email Address:	Mark.Inch@fdc.myflorida.com
Telephone Number:	

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

AUDIT FINDINGS

Narrative:

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

Narrative

The Florida Department of Corrections, Okeechobee Correctional Institution is located at 3420 NE 168th Street, Okeechobee, Florida. Okeechobee Florida is located in Okeechobee County, in the Central East Florida, directly north of Lake Okeechobee.

Okeechobee Correctional Institution is participating in the Prison Rape Elimination Act (PREA) audit. The on-site portion of the audit was conducted by a certified Department of Justice PREA Auditor, at the above address on November 3 - 6, 2020. The assigned PREA Auditor is an independent sub-contractor with no conflict of interest, working for the primary contract holder for the Florida Department of Corrections. This is the third audit for Okeechobee Correctional Institution; the first audit was completed on August 13 - 14, 2014 and the second audit was completed the week of October 16, 2017.

Okeechobee Correctional Institution is referred as Okeechobee C. I. by the Florida Department of Corrections staff members, therefore, for the purpose of this report; the Auditor may refer to Okeechobee Correctional Institution is referred as Okeechobee C. I.

Okeechobee C. I. consists of the Main Unit, Work Camp, and Sago Palm Re-Entry Center and unless stated otherwise, for the purpose of this report, the Auditor's use of Okeechobee C. I. encompasses the Main Unit, Work Camp, and the Sago Palm Re-Entry Center.

Additionally, Okeechobee C. I. PREA Compliance Manager is also the Assistant Warden of Programs, however for the purpose of this report; the Auditor will refer to the Assistant Warden of Programs as the PREA Compliance Manager.

Pre-Onsite Audit Phase

On August 18, 2020, the Auditor sent an introduction email to Okeechobee C. I. and the Florida Department of Corrections Correctional Services Consultant (CSC). Florida Department of Corrections utilizes a Correctional Services Consultant as the facility contact person and with organizing the audit

process.

Along with a brief introduction, in the Auditor's email to the facility and to the FDC CSC, the Auditor discussed the use of the Online Audit System (OAS), audit logistics, audit schedule / timelines, goals, and expectations of the audit. The Auditor also included the PREA Audit Notifications (English/Spanish), which contained the mailing address (P.O. Box) for confidential correspondence from inmates or staff relating to PREA prior to, during, and after the PREA audit; the Auditor also requested the notifications be posted in accordance with the required standards.

The audit notifications contained the scheduled dates of the audit, the purpose of the audit, the Auditor's name and contact information, and a statement regarding the confidentiality of any communication between the Auditor and inmates who respond to the notice with the exception of mandatory reporting laws that may apply to the Auditor. The Post Office box acquired for the audit was used strictly for correspondence from inmates or staff for the purpose of the PREA Audit.

During the on-site tour of the facility, the Auditor observed the audit notifications posted throughout the facility's Main Unit, Work Camp, and Sago Palm Re-Entry Center. The audit notifications were posted in visible locations where inmate traffic is high. These locations included every housing dormitory, throughout each building – programs, educational, and vocational – in assigned inmate work areas, (Food Service, Laundry, & Maintenance), Chapel, and Visitor Park (VP).

On October 6, 2020, the Auditor began a systematic review process of the *Pre-Audit Questionnaire* responses to each standard and the supporting documentation, policies, and procedures. Supporting documentation included, but not limited to:

- Florida Department of Corrections Policies & Procedures
- Existing contracts between FDC and external entities (Advocacy Services, Forensic Specialist)
- Inmate intake screenings & assessments
- Inmate medical & mental health assessments
- All Sexual abuse & sexual harassment Administrative Investigations - September 2019 – October 2020
 - (Substantiated, unsubstantiated, inmate-on- inmate, staff-on-inmate)
- All Sexual abuse & sexual harassment Criminal Investigations - September 2019 – October 2020
 - (Substantiated, unsubstantiated, inmate-on-inmate, staff-on-inmate)

Upon completion of the systematic review of the PAQ and supporting documentation, the Auditor emailed Okeechobee C. I. Staff and the CSC on October 10, 2020, with a list of additional information that warranted clarification to the PAQ responses and a request for additional documentation. The requested information included:

- Clarification on one standard / provisions showing conflicting responses in the OAS
- Additional documentation requested on two standards

On October 10, 2020, the Auditor emailed the FDC CSC and the FDC PREA Coordinator a request for additional documentation from the facility for review prior to the on-site. The Facility Staff Member uploaded the additional documentation into the OAS Supplemental file. The documents uploaded to the OAS Supplemental file include:

- All hotline calls made in the 12 months preceding the audit
- All allegations of sexual abuse & sexual harassment reported in the 12 months preceding the audit
- Staff roster (certified & civilian staff, contract, & volunteer; requested by shift assignment/work hours)
- List of New Hires & Promotions from the last 12 months
- Inmate Rosters by Housing location for Okeechobee C. I. Main Unit, Work Camp, and Sago Palm Re-entry
- Inmates identified as LEP; hearing, cognitive, vision, and physically impaired;
- Inmates who identify as LGBTI
- Informal & Formal PREA related grievance reports
- Facility Site Map
- Camera Totals (interior and exterior)

On October 10, 2020, the Auditor emailed the CSC and provided the staff interviews list and documents/files to be reviewed during the on-site visit:

- Agency Head or Designee
- Administrative (Human Resources) Staff
- Agency Contract Administrator
- Classification Staff
- Contractors & volunteers who have contact with inmates
- Designated Staff who monitor retaliation
- Incident Review Team
- Intake Staff
- Intermediate or Higher-level Facility Staff
- Investigative Staff
- Medical & Mental Health Staff
- PREA Compliance Manager
- PREA Coordinator
- SANE/SAFE Staff
- Security Staff – First Responders
- Staff who perform screening for risk of victimization
- File review – personnel, volunteer/contractor, inmate & Medical and Mental Health (victims of SA/SH)
- All Okeechobee C. I. PREA investigative case files

The total number of PREA hotline calls reported during the 12 months preceding the audit were zero. The number of sexual abuse and sexual harassment allegations in the 12 months prior to the audit (September 2019 – October 2020) was twenty-six. The following charts provide a breakdown of the twenty-six allegations:

Total Number of Allegations			
	Inmate-on-Inmate	Staff-on-Inmate	Total
Substantiated	0	0	0
Unsubstantiated	4	2	6
Unfounded	4	5	9
In progress	3	8	11
Total	11	15	26

Total Number of Sexual Abuse Allegations			
	Inmate-on-Inmate	Staff-on-Inmate	Total
Substantiated	0	0	0
Unsubstantiated	3	2	5
Unfounded	2	2	4
In progress	3	6	9
Total	8	10	18

Total Number of Sexual Harassment Allegations			
	Inmate-on-Inmate	Staff-on-Inmate	Total
Substantiated	0	0	0
Unsubstantiated	1	0	1
Unfounded	2	3	5
In progress	0	2	2
Total	3	5	8

Investigations			
	Inmate-on-Inmate	Staff-on-Inmate	Total
Administrative	10	13	23
Criminal	1	2	3
Total	11	15	26

Referred for Prosecution		
	Sexual Abuse	Sexual Harassment
Inmate-on-Inmate	0	0
Staff-on-Inmate	1	0

Research

During the pre-on-site audit phase, the Auditor conducted an internet search on the facility to include reviewing the agency website. The agency website contained multiple links to previous annual reports and audits for Okeechobee C. I. as well as other facilities under the agency's jurisdiction. The Auditor reviewed the prior PREA Audit (August 2014) and the Annual Reports (§115.88). The Auditor also reviewed the mandatory reporting laws for the State of Florida.

The Auditor contacted Just Detention International (JDI), a health and human rights organization that seeks to end sexual abuse in all forms of confinement. The Auditor submitted an inquiry to determine if the agency had received any complaints from Okeechobee C. I. within the past 12 months; a representative from Just Detention International informed the Auditor that Just Detention International had not received any complaints regarding Okeechobee C. I. The Auditor also conducted research, specific to Okeechobee C. I., on the websites of the Department of Justice Civil Rights Division and the Southern Poverty Law Center with negative results from each.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANES/SAFEs evidence protocol, four contracts between FDC and the Panhandle Forensic Nurse Specialist, FDC and the Sexual Assault Assistance Program of the Treasure Coast, FDC and the Palm Beach County Victim Services (Sago Palm Re-Entry Center), and FDC and the Gulf Coast Children's Advocacy Center, Inc. Each FDC contract uses clear and concise language, provides the agency's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each.

The Panhandle Forensic Nurse Specialist, Inc. is contracted to provide sexual abuse forensic examiners/sexual abuse nurse examiners (SANE/SANES) services for Okeechobee C. I. The Panhandle Forensic Nurse Specialist, Inc. is a non-profit agency consisting of seven certified Sexual Assault Nurse Examiners and one certified Sexual Assault Forensic Examiner.

The Sexual Assault Assistance Program (SAAP) of the Treasure Coast is the Certified Rape Crisis Program for Indian River, St. Lucie, Martin, and Okeechobee Counties. Through continued funding from the four counties, as well as grants from Victims of Crime Act and Florida Council against Sexual Violence, the SAAP of the Treasure Coast is able to provide crisis intervention services, victim advocacy services for victims of sexual assault, and behavioral health services. The SAAP of the Treasure Coast will provide a certified victim advocate to accompany inmates during forensic exams and investigatory interviews. Additionally, SAAP of the Treasure Coast will provide follow-up services and crisis intervention to inmate victims and if an inmate requests, face-to-face counseling services. Inmates may report to the SAAP of the Treasure Coast by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory next to the inmate phones and common areas at the Okeechobee C. I. Main Unit and Work Camp.

The Palm Beach County Victim Services, funded by the Palm Beach County Board of County Commissioners, provides victim advocacy services to sexual assault victims through crisis intervention response, advocacy, therapy, and community awareness. The Palm Beach County Victim Services provides advocacy and emotional support services to inmates incarcerated at Sago Palm Re-Entry Center.

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

The Auditor requested the contact information for the representative(s) from the Panhandle Forensic Nurse Specialist, the Sexual Assault Assistance Program of the Treasure Coast, the Palm Beach County Victim Services, and the Gulf Coast Children's Advocacy Center, Inc.

During the on-site phase of the audit, the Auditor conducted an interview with the certified SAFE Doctor, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department of Justice (DOJ) *National Protocol for Sexual Assault Medical Forensic Examinations Adults*. The SAFE Doctor explained when they receive a notification for services request from the facility, either herself or a SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either herself or one of her staff members are available 24/7. The SAFE Doctor also confirmed that during the 12 months prior to the audit, there were no forensic medical examinations completed at Okeechobee C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the SAAP of the Treasure Coast. The victim advocate confirmed the existing contract and provided a very detailed description of the advocacy services provided to the inmates at Okeechobee C. I. Main Unit and Work Camp to include crisis intervention, counseling services, and the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested at least one phone in every dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Palm Beach County Victim Services. The victim advocate confirmed the existing contract with Sago Palm Re-Entry Center and the advocacy, and emotional support services provided to the inmates incarcerated at Sago Palm. Additionally, inmates may contact the Palm Beach County Victim Services by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory and common areas at the Sago Palm Re-Entry Center.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Gulf Coast Children's Advocacy Center. The Victim Advocate confirmed the services are provided, as stated in the contract, to the inmates incarcerated at Okeechobee C. I. The Victim Advocate also confirmed the Gulf Coast Children's Advocacy Center provides a toll-free outside reporting hotline for services, and is designated as the outside reporting hotline for Okeechobee C. I. inmates.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested at least one

phone in every dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

The Auditor did not receive any correspondence from staff or inmates prior to, during, or after the PREA audit.

On-Site Audit Phase

Okeechobee Correctional Institution is located at 3420 NE 168th Street, Okeechobee, Florida. Okeechobee Florida is located in Okeechobee County, in the Central East Florida, directly north of Lake Okeechobee. Under the jurisdiction of the State of Florida Department of Corrections, Okeechobee C. I. consists of the Main Unit, Work Camp, and Sago Palm Re-Entry Center.

The Okeechobee C. I. Main Unit is classified as a Security Level 6 / Custody Level – Close, Medium, Minimum, and Community. The Okeechobee C. I. Work Camp and Sago Palm Re-Entry Center are classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community. (Security level is the level of security the physical plant provides whereas Custody Level is the offenders classification.)

Florida Youthful Offender Act Section 958.11, Florida Statutes, requires the Department of Corrections to designate separate institutions and programs for youthful offenders. Okeechobee C. I. is not designated as a youthful offender facility.

The rated capacity of Okeechobee C. I. is 2691 with an average daily population (ADP) of 2493 for the 12 months preceding the audit. The inmate population on the first day of the audit was 2231.

The Okeechobee Correctional Institution is designed as a level six-security institution; the compound is surrounded by double fencing with multiple rolls of razor wire for security. There is a 30-foot span between the inner and out perimeter fences with a minimum of 50 feet between the buildings and the fence. The compound's electronic perimeter security system consists of two separate, redundant intrusion detection systems extending around the entire perimeter circumference. The systems in place are motion detector sensors, Microphonic detection, a microwave alert system, and two roving patrols. There is a vehicle at both the north and west side of the compound. Access to the compound is limited to foot traffic through the main control room entrance at the front of the compound or through the west gate for staff assigned to maintenance and warehouse duties.

Originally established in 1995, the Okeechobee Correctional Institution Main Unit and Work Camp sit on approximately thirty-nine acres of a 450-acre parcel. The compound consists of thirty total buildings; the

compounds internal layout consists of twenty-one buildings divided into three sections designated for specific functions: Administrative, Housing Units, and Wellness. The three sections are divided down the center by an access road and divides the compound into an east and west side. The access road also allows for emergency vehicle access. Each section is physically separated by twelve feet high cross fencing with a double strand of long barb razor ribbon and pedestrian gates to manage authorized movement between the sections.

The compound has nine housing units (dormitories) – five T-dorm units with double occupancy cells, two open bay dormitories, one confinement unit (T-Dorm) with double occupancy cells and a Medical Unit with six self-harm observation / isolation cells, and a Medical Wing with a eleven-bed infirmary. Additional buildings on the compound include Multi-treatment building (Medical & Mental Health offices, Classification offices, and additional Staff Administrative offices), Academic building (Programs, Library Educational, and Vocational), Chapel, Laundry, Food Service and Dining, Barbershops, Canteens, Exercise Yard, and Visitor Park, as well as a number of other designated purpose buildings.

Administration Building, is outside the security fencing of the compound, and includes the administrative offices of the Facility Warden, Secretary to the Warden, and offices for several Support Staff Members.

Dormitory's A and H are single story buildings with dormitory style beds, each housing inmates with close, medium, or minimum custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory B is a two-story building in the shape of the letter T (often referred to as a "T Dorm"), designated with segregation cells for special confinement inmates. Special confinement inmates include inmates placed on Disciplinary Confinement, Administrative Confinement, and inmates requesting protection.

Dormitory's C, D, E, F, and G are two-story buildings in the shape of the letter T (often referred to as a "T Dorm"), resulting in a three quad layout with two small dayrooms on each floor. Each dorm houses inmates with close, medium, or minimum custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

The Multi-Treatment building is a single story building with Classification, Medical, and Mental Health administrative offices. One side is utilized for Classification, Classification Supervisor, Assistant Warden of Programs, and Program Staff. The other half of the building is designated for Medical and Mental Health staff offices, exam rooms, eleven-bed infirmary, six self-harm observation cells, a fully equipped emergency room, and a dental room for exams / procedures.

The Academic building is a single story building with multiple classrooms for educational and vocational training. Academic programs include GED and Adult Basic Education. Vocational programs include Manufacturing, Logistics, and Technology Support Services.

Facility Chapel is a single story building which has designated meeting place for religious activities. Religious programs are coordinated by the full-time Chaplain and one OPS Chaplain with the assistance of volunteers offering services and expertise in religion.

The Main Unit Library is the general inmate library is operated by a full-time Librarian Specialist. The library consists of books provided by the State of Florida Library System and includes a general library and a major law library collection, along with various reading materials (books, magazines, and newspapers) and support programs for psychological services, academic, and vocational education.

Okeechobee C. I. Work Camp is designed as a level three-security institution. The Okeechobee C. I. Work Camp is classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community and is surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has three open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park / Programs building, Cafeteria, Food Service, and Recreation Yard.

Sago Palm Re-Entry Center is designed as a level three-security institution and is classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community. Sago Palm Re-Entry Center is surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has two open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park, Programs Building, and the Operations Support Building, which houses the Cafeteria, Food Service, Intake and Release, Laundry and Medical.

On Tuesday November 3, the first day of the audit, an entrance meeting was held with the Facility Warden, Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and a multitude of Facility Supervisors. Following the entrance meeting, the Auditor toured the Okeechobee C. I. Main Unit from 0915 hours to 1130 hours. The Auditor was escorted by the Facility Warden, Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and various Facility Staff members.

On Wednesday November 4, the second day of the audit, the Auditor toured the Okeechobee C. I. Work

Camp from 1300 hours to 1430 hours. The Auditor was escorted by the Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and several Okeechobee C. I. Work Camp Facility Supervisors.

On Thursday November 5, the third day of the audit, the Auditor toured the Sago Palm Re-Entry Center from 0900 hours to 1145 hours. The Auditor was escorted by the Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and various Sago Palm Re-Entry Center Supervisors.

The Auditor used the National PREA Resource Center, *PREA Compliance Instrument-Instructions for PREA Audit Tour* when conducting the on-site review. The areas visited, for each facility, include all dormitory areas, medical area, intake and transfer, security control rooms, inmate classification, food service, laundry, library, educational, vocational, and program areas, work assignment areas, visitor park, and facility Chapel.

During the tour, the Auditor observed opposite gender announcements, tested the inmate phone system in the dormitories, viewed PREA Audit notifications posted throughout, and PREA educational material and contact information for rape crisis counseling and emotional support services. The Auditor observed the PREA information posted in each dormitory, inmate common areas, program and educational areas, and in the facility lobby.

The Auditor also observed multiple security cameras including the camera angles, privacy, and line of sight for shower and toilets. The Auditor did not observe any issues with privacy or line of sight; announcements are made when opposite gender enters the dormitory. The shower and bathroom areas within each dorm contain concrete privacy walls or double swing doors, which are constructed in such a manner that provides privacy as well as allowing staff to have a partial view of the inmate (walls and doors cover midsection of the body); this allows privacy as well as ensuring the safety and security of all inmates. The Auditor did not observe blind spots during the facility tour.

The Facility Staff provided a complete overview of the inmate classification process and the risk screening process. The Auditor was able to observe these processes when the Classification Supervisor described the interview process and how utilizing the *Inmate Risk Management System* (IRMS) and *Inmate Behavior Assessment Scale* (IBAS) helps determine an inmate's risk screening, and needs assessment. The *Offender Based Information System* auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the *Inmate Risk Management System*. The Classification Supervisor provided the Auditor with a detailed overview of how the classification process begins upon their arrival to the facility, including one within 30 days of arrival, as well as multiple follow-up interviews during their incarceration at the facility.

Throughout the facility tour, the Auditor observed inmates participating in educational programs, various

inmate movement throughout the facility, and inmates actively working in assigned jobs throughout the facility compound. The Auditor was able to observe the interaction between staff and inmates inside the housing units and throughout the facility and conduct informal interviews of certified staff, civilian staff, contract staff, and inmates in each dormitory and throughout the facility compound.

Okeechobee C. I. reported 264 cameras installed and operational (Main Unit – 156; Work Camp – 36; Sago Palm Re-Entry Center - 72). Of the total 264 cameras, 227 are located in the interior buildings of the Main Unit, Work Camp, and Sago Palm Re-Entry Center and 37 exterior cameras are strategically placed throughout each compound. The interior cameras are located in the facility lobby, throughout the facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and along the outside perimeter.

Staff Interviews

The PREA Auditor handbook requires Auditors to interview a representative sample of staff, supervisors, and administrators in the audited facility. Auditors must conduct interviews with a random sample of staff selected from varying shifts and work assignments, as well as targeted interviews with staff, which have specialized roles and responsibilities within the facility.

The Auditor conducted thirteen random staff interviews. This random selection of staff included at least one member from each shift, staff from diverse work assignments, supervisors and line staff, males and females, and staff of various diversities. There are two security staff shifts. Dayshift hours are 0600 – 1800 hours and nightshift hours are 1800 – 0600 hours. Contract medical shift hours are the same as the facility security staff and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 378 staff employed at the facility who have contact with inmates.

Twenty-seven specialized staff interviews were conducted and were selected based upon their work assignment and subject matter expertise. Interviews were conducted in designated rooms that provided privacy and all interviews were conducted without interruption.

At the time of the audit, the facility had 11 contractors and 116 volunteers authorized to enter the facility and who may have contact with inmates. Interviews with staff were conducted in designated rooms that provided privacy and were all completed without interruption.

All staff interviews were conducted in accordance with the National PREA Resource Center *PREA Compliance Audit Instruments Interview Guide*. Upon arrival to the facility, the Auditor requested an updated employee roster to assist with the selection process for the random and targeted staff

interviews. A detailed list and quantities for each interviewed are listed below:

Staff Categories	Number of Interviews Conducted
Random Sample of Staff	13
Agency and PREA Staff:	
Agency Head or Designee	1
Facility Warden	1
PREA Coordinator	1
PREA Compliance Manager	1
Specialized Staff:	
Agency Contract Administrator	1
Intermediate or Higher Level Facility Staff	3
Medical Staff	3
Mental Health Staff	1
Administrative / Human Resources Staff	1
SAFE / SANE	1
Rape Crisis / Advocacy Center	3
Volunteers	1
Contractors	1
Investigative Staff	1
Staff who perform screening for risk of victimization & abusiveness	1
Designated staff monitors retaliation	1
First Responders	2
Staff who supervise inmates in segregated housing	1
Intake Staff	1

Incident Review Team	1
Total Random Staff	13
Total Agency & PREA Staff	4
Total Specialized Staff	23
Total Staff Interviewed	40

Inmate Interviews

The inmate count on the first day of the audit was 2231. In accordance with the PREA Auditor Handbook *Table 1: Required Number of Inmate Interviews*, the Auditor was required to conduct 20 random sample inmate interviews. All inmate interviews were conducted in accordance with the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide*.

The Auditor conducted thirty-two random samples of inmate interviews. The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided; inmates interviewed included every housing dormitory and inmates of various diversities.

In accordance with the PREA Auditor Handbook *Table 1: Required Number of Inmate Interviews*, the Auditor was required to interview at least 20-targeted inmates. The Auditor conducted fourteen targeted inmate interviews, which includes the four requested inmate interviews. The facility provided documentation confirming they did not have the following targeted inmate categories housed at their facility at the time of the on-site review. As a result, these categories of inmates were not interviewed.

- Youthful inmates
- Inmates in segregated housing for high risk of sexual victimization
- Inmates with a physical disability

As previously stated in the report, at the time of the on-site phase of the audit, Okeechobee C. I. does not house youthful inmates. Okeechobee C. I. reported during the twelve months prior to the audit, there were no inmates placed in segregated housing due to risk of sexual victimization. Therefore, the categories of youthful inmates, inmates in segregated housing for high risk of sexual victimization, and inmates with a physical disability were not interviewed.

All inmate interviews were conducted in accordance with the National PREA Resource Center *PREA Compliance Audit Instruments Interview Guide*. The Auditor requested an updated facility inmate roster to assist with the selection process for the random and targeted inmate interviews. All interviews were conducted in private and without interference. A detailed list and quantities for each interviewed are listed below:

Inmate Categories	Number of Interviews Conducted
Random Sample of Inmates	32
Targeted Inmates:	
Inmates who are cognitive impaired	1
Inmates who are hearing or vision impaired	1
Inmates who are limited English proficient	1
Inmates who identify as lesbian, gay, or bisexual	5
Inmates who identify as transgender or intersex	1
Inmates who reported prior sexual victimization	3
Inmates who reported sexual abuse	2
Total Random Inmates	32
Total Targeted Inmates	14
Total Inmates Interviewed	46

On-site Documentation Review

According to the information provided in the PAQ (§115.22(a)-2), during the past 12 months, Okeechobee C. I. reported twenty-two allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually twenty-six. During the on-site phase of the

audit, the Auditor met with the PREA Compliance Manager and the staff member tasked with entering the information into the PAQ to clarify the discrepancy. After discussion, the reported number (22) is incorrect and for the purposes of this audit, the total number of investigations during the audit period are twenty-six. The four additional cases were opened after the Staff Member submitted the PAQ into the Online Audit System (OAS).

The twenty-six allegations included eight sexual harassment allegations and eighteen sexual abuse allegations. The eight sexual harassment allegations included three inmate-on-inmate allegations and five staff-on-inmate allegations. The three inmate-on-inmate sexual harassment allegations include one closed as unsubstantiated and two closed as unfounded. The five staff-on-inmate sexual harassment allegations include three closed as unfounded and two cases pending a final disposition with the Office of the Inspector General.

The eighteen sexual abuse allegations include eight inmate-on-inmate allegations and ten staff-on-inmate. The eight inmate-on-inmate allegations include three closed as unsubstantiated, two closed as unfounded, and three cases pending a final disposition with the Office of the Inspector General. The ten staff-on-inmate allegations include two closed as unsubstantiated, two closed as unfounded, and six cases pending a final disposition with the Office of the Inspector General.

The twenty-six allegations included twenty-three administrative investigations and three criminal investigations. The Auditor selected and reviewed all of these cases based upon the outcome and the Auditor's requirement to review all of the required steps and processes to verify compliance with multiple PREA Standards. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the fifteen closed cases; of the twenty-six total cases, eleven are pending closing reports / reviews from the Office of the Inspector General.

Upon completion of reviewing all case files, the Auditor determined that the facility (to include but not limited to Inspectors, Staff First Responders, Medical and Mental Health, PREA Compliance Manger, Supervisory Staff, etc.) followed the required steps and processes for all reported allegations. The Auditor's review included the pending eleven sexual harassment and sexual abuse investigations and found they also met the above criteria, with the exception of a final disposition from the OIG. At the time of the Auditor's review, there was one case referred for prosecution.

Employee personnel files are maintained in the Human Resources Department at the agency's Central Office. Employee criminal background checks and training records are maintained in the employee personnel files. The Auditor reviewed documentation from twenty employee personnel files. The Auditor selected files of a newly hired employee, long-term staff members, recently promoted staff members, and employees with specialized training. All files reviewed contained the required training documentation, revealed thorough background investigations, and included updated documentation of current background investigations (five-year intervals) of current staff members.

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

Medical and mental health files are maintained in a secured section of the medical office. The Auditor reviewed eighteen secondary medical and mental health files. These files were reviewed based upon the screening for risk of sexual victimization, inmates who reported sexual abuse or sexual harassment, and those inmates who identify as gay, bisexual, or transgender. Medical files also contain a body chart, which is a form that is completed by medical staff when an inmate reports either a sexual harassment or sexual abuse allegation.

The list below details the documentation reviewed from the various files:

File Type	Number of Files Reviewed
Investigative files	26
Inmate Institutional Records	41
Human Resources (Personnel / Training) files	20
Medical & Mental Health files	18
Total number of files reviewed	105

AUDIT FINDINGS

Facility Characteristics:

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

Facility Characteristics

Okeechobee Correctional Institution is located at 3420 NE 168th Street, Okeechobee, Florida. Okeechobee Florida is located in Okeechobee County, in the Central East Florida, directly north of Lake Okeechobee. Under the jurisdiction of the State of Florida Department of Corrections, Okeechobee C. I. consists of the Main Unit, Work Camp, and Sago Palm Re-Entry Center.

The Okeechobee C. I. Main Unit is classified as a Security Level 6 / Custody Level – Close, Medium, Minimum, and Community. The Okeechobee C. I. Work Camp and Sago Palm Re-Entry Center are classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community. (Security level is the level of security the physical plant provides whereas Custody Level is the offenders classification.)

Florida Youthful Offender Act Section 958.11, Florida Statutes, requires the Department of Corrections to designate separate institutions and programs for youthful offenders. Okeechobee C. I. is not designated as a youthful offender facility.

The rated capacity of Okeechobee C. I. is 2691 with an average daily population (ADP) of 2493 for the 12 months preceding the audit. The inmate population on the first day of the audit was 2231.

The Okeechobee Correctional Institution is designed as a level six-security institution; the compound is surrounded by double fencing with multiple rolls of razor wire for security. There is a 30-foot span between the inner and out perimeter fences with a minimum of 50 feet between the buildings and the fence. The compound's electronic perimeter security system consists of two separate, redundant intrusion detection systems extending around the entire perimeter circumference. The systems in place are motion detector sensors, Microphonic detection, a microwave alert system, and two roving patrols. There is a vehicle at both the north and west side of the compound. Access to the compound is limited to foot traffic through the main control room entrance at the front of the compound or through the west gate for staff assigned to maintenance and warehouse duties.

Originally established in 1995, the Okeechobee Correctional Institution Main Unit and Work Camp sit on approximately thirty-nine acres of a 450-acre parcel. The compound consists of thirty total buildings; the

compounds internal layout consists of twenty-one buildings divided into three sections designated for specific functions: Administrative, Housing Units, and Wellness. The three sections are divided down the center by an access road and divides the compound into an east and west side. The access road also allows for emergency vehicle access. Each section is physically separated by twelve feet high cross fencing with a double strand of long barb razor ribbon and pedestrian gates to manage authorized movement between the sections.

The compound has nine housing units (dormitories) – five T-dorm units with double occupancy cells, two open bay dormitories, one confinement unit (T-Dorm) with double occupancy cells and a Medical Unit with six self-harm observation / isolation cells, and a Medical Wing with a eleven-bed infirmary. Additional buildings on the compound include Multi-treatment building (Medical & Mental Health offices, Classification offices, and additional Staff Administrative offices), Academic building (Programs, Library Educational, and Vocational), Chapel, Laundry, Food Service and Dining, Barbershops, Canteens, Exercise Yard, and Visitor Park, as well as a number of other designated purpose buildings.

Administration Building, is outside the security fencing of the compound, and includes the administrative offices of the Facility Warden, Secretary to the Warden, and offices for several Support Staff Members.

Dormitory's A and H are single story buildings with dormitory style beds, each housing inmates with close, medium, or minimum custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory B is a two-story building in the shape of the letter T (often referred to as a "T Dorm"), designated with segregation cells for special confinement inmates. Special confinement inmates include inmates placed on Disciplinary Confinement, Administrative Confinement, and inmates requesting protection.

Dormitory's C, D, E, F, and G are two-story buildings in the shape of the letter T (often referred to as a "T Dorm"), resulting in a three quad layout with two small dayrooms on each floor. Each dorm houses inmates with close, medium, or minimum custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

The Multi-Treatment building is a single story building with Classification, Medical, and Mental Health administrative offices. One side is utilized for Classification, Classification Supervisor, Assistant Warden of Programs, and Program Staff. The other half of the building is designated for Medical and Mental Health staff offices, exam rooms, eleven-bed infirmary, six self-harm observation cells, a fully equipped emergency room, and a dental room for exams / procedures.

The Academic building is a single story building with multiple classrooms for educational and vocational training. Academic programs include GED and Adult Basic Education. Vocational programs include Manufacturing, Logistics, and Technology Support Services.

Facility Chapel is a single story building which has designated meeting place for religious activities. Religious programs are coordinated by the full-time Chaplain and one OPS Chaplain with the assistance of volunteers offering services and expertise in religion.

The Main Unit Library is the general inmate library is operated by a full-time Librarian Specialist. The library consists of books provided by the State of Florida Library System and includes a general library and a major law library collection, along with various reading materials (books, magazines, and newspapers) and support programs for psychological services, academic, and vocational education.

Okeechobee C. I. Work Camp is designed as a level three-security institution. The Okeechobee C. I. Work Camp is classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community and is surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has three open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park / Programs building, Cafeteria, Food Service, and Recreation Yard.

Sago Palm Re-Entry Center is designed as a level three-security institution and is classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community. Sago Palm Re-Entry Center is surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has two open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park, Programs Building, and the Operations Support Building, which houses the Cafeteria, Food Service, Intake and Release, Laundry and Medical.

Okeechobee C. I. reported 264 cameras installed and operational (Main Unit – 156; Work Camp – 36; Sago Palm Re-Entry Center - 72). Of the total 264 cameras, 227 are located in the interior buildings of the Main Unit, Work Camp, and Sago Palm Re-Entry Center and 37 exterior cameras are strategically placed throughout each compound. The interior cameras are located in the facility lobby, throughout the facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and along the outside perimeter.

There are two security staff shifts. Dayshift hours are 0600 – 1800 hours and nightshift hours are 1800 – 0600 hours. Contract medical shift hours are the same as the facility security staff and civilian support staff hours are 0800 – 1700 hours. At the time of the audit, the facility has 378 staff employed at the facility who have contact with inmates.

Medical and Mental Health Staff are contracted with Centurion Health Services. Contract medical shift hours are the same as the facility security staff. The facility provides various mental health services and programs. The Food Service is staffed by Florida Department of Corrections and the inmate canteen service is contracted with Trinity Food Services, Inc.

The PAQ indicated there are 11 contractors and 116 volunteers. Examples of services provided at the facility include Chaplain, Adult Basic Education, General Education Development, Compass 100, Culinary, Life Mapping, Pre-Release Counseling, Automotive, CDL Instruction, Veterans Program, Celebrate Recovery, Waste Water Treatment, Technology Support Services, Wellness program, various worship services, and religious programs.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	1
Number of standards met:	44
Number of standards not met:	0

Audit Findings

Exit Briefing

At the conclusion of on-site phase of the audit, an exit meeting was held with the Assistant Warden of Programs (PREA Compliance Manager), Assistant Warden of Operations, Correctional Services Consultant, and several Supervisory Level Staff to discuss the audit findings.

The Auditor informed all in attendance the facility was found to be in noncompliant in the following four standards:

115.13 Supervision and Monitoring

115.68 Post-allegation protective custody

115.81 Medical and Mental Health screenings; history of sexual abuse

115.83 Ongoing Medical and Mental Health care for sexual abuse victims and abusers

The Auditor discussed each provision in the noncompliant standards, provided staff with specific deficiencies found in each standard, and explained the process of a Corrective Action Period. The Auditor discussed with all in attendance that the Auditor will continue to work closely with the FDC PREA Coordinator, the FDC Correctional Services Consultant, and the facility to develop a Corrective Action Plan, which will require corrective action to be taken by the facility in order to reach compliance. The Auditor informed all in attendance the need for continued communication between all parties throughout the Corrective Action Period to address the standards, which were found noncompliant.

Summary of Corrective Action

115.13 Supervision and Monitoring

The Auditor determined through evidence provided, the facility has a policy governing unannounced rounds that is consistent with the requirement of the PREA Standard. Florida Department of Corrections policy states shift supervisors must conduct daily-unannounced rounds of all housing areas and activity areas and must be conducted on all shifts. Provision (d) in this particular standard also requires unannounced rounds to cover all shifts. During the Auditor's review of randomly selected security video footage, the facility's practice of physically conducting the rounds demonstrated non-occurrence of the unannounced rounds.

Agency policy includes the requirements of the PREA Standard for unannounced rounds; Supervisory staff are documenting the unannounced rounds properly, however the Auditor discovered Supervisory Staff were conducting all requirements of the unannounced rounds with the exception that the rounds did not include entering the living area.

The Auditor recommended additional training for all supervisory staff that are responsible for conducting unannounced rounds, documentation of training with curriculum and signatures of attendance, review of agency policy and PREA standard, and documentation of completed rounds via security video footage, which will be uploaded to a secure folder on a weekly basis for review.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for conducting unannounced rounds. Training consisted of reviewing agency policy and the requirements of the PREA Standard. The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided documentation (security video footage) from all shifts, for all housing areas of the daily-completed rounds. The Auditor reviewed the training documentation as well as all security video footage provided during the corrective action period and found the facility's practice of unannounced rounds were being conducted in accordance to the agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now in compliance with the provisions of this standard.

115.68 Post-allegation protective custody

The Auditor determined through evidence provided, the facility has a policy governing inmates who report a sexual abuse shall not be placed in segregated housing unless an assessment of all other alternatives has been made. If it is determined, there are no other available alternative means of separation from likely abusers; such placement in involuntary segregated housing would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction. Provision (a) in this particular standard also requires the facility to document a statement of the basis for the facility's concern for the inmate's safety and the reason(s) why alternative means of separation could not be arranged.

During the on-site, the Auditor reviewed investigative files and determined the facility did not complete the required documentation for six inmates who were placed in involuntary segregated housing after each inmate reported an incident of sexual abuse.

The Auditor recommended additional training for all supervisory staff that are responsible for ensuring the required documentation is completed, documentation of training with curriculum and signatures of attendance, review of agency policy and PREA standard, and documentation of completed forms (DC6-2084; PREA Victim Housing Preference; IM02 Entry). After receiving an allegation, the completed forms will be uploaded to a secure folder within 24 hours for review.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for ensuring such documentation is completed. Training consisted of reviewing agency policy, requirements of the PREA Standard, and proper documentation of agency forms (DC6-2084 and IM02 Entry). The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided the Auditor with documentation verifying the required agency forms (DC6-2084 and IM02 Entry) were completed accurately and completely and in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now in compliance with the provisions of this standard.

115.81 Medical and Mental Health screenings; history of sexual abuse

The Auditor determined through evidence provided, the facility has a policy governing if an inmate discloses prior sexual victimization during the screening process, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening. Provision (a) of this standard also requires the facility to document providing such meeting within 14 days of screening.

During the on-site, the Auditor reviewed inmate institutional files, which showed that of the nine inmates who disclosed sexual victimization at intake, four inmates received follow-up meetings with Mental Health within fourteen days of the intake screening. However, the remaining five inmates were seen by Mental Health after the required fourteen days of screening.

The Auditor recommended either training or policy review with responsible staff (Classification, Mental Health) to determine where the breakdown in communication and/or delay in notification is occurring. Classification Staff shall complete all required documentation (Mental Health Sexual Risk Index, MHSRI) which will automatically initiate an appointment with Mental Health. PREA Compliance Manager will run a Mental Health Services 23 report (ASI40 MHS 23) on a weekly basis for review and monitoring. All completed documents will be uploaded to a secure folder within fourteen days of the initial appointment.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, completed training for Classification and Mental Health Staff. Training included review of the required documentation (Mental Health Sexual Risk Index) which automatically initiates the appointments with Mental Health. The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility ran a Mental Health Services 23 Report (ASI40 MHS 23) on a weekly basis for review and monitoring of inmates with a pending Mental Health evaluation. The facility provided the Auditor with weekly documentation, which verified all mental health evaluations were being completed in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now compliance with the provisions of this standard.

115.83 Ongoing Medical and Mental Health care for sexual abuse victims and abusers

The Auditor determined through evidence provided, the facility has a policy requiring facility staff complete and forward a Mental Health referral notification when an inmate reports an incident of sexual abuse. Provision (a) of this standard also requires the facility to provide a mental health evaluation for sexual abuse victims.

During the on-site, the Auditor reviewed twenty-six investigative files and discovered that in the eighteen allegations of sexual abuse, eleven mental health referrals were not completed by facility staff.

The Auditor recommended additional training for all supervisory staff that are responsible for ensuring the required documentation is completed, documentation of training with curriculum and signatures of attendance, review of agency policy and PREA standard, and documentation of completed forms (DC4-529; Staff Request/Referral Form). After receiving an allegation, the completed forms (DC4-529) will be uploaded to a secure folder within 24 hours for review.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for ensuring such documentation is completed. Training consisted of reviewing agency policy, requirements of the PREA Standard, and proper documentation of agency forms (DC4-529). The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided the Auditor with documentation verifying the required agency forms (DC4-529) were completed accurately and completely and in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now compliance with the provisions of this standard.

Standards Exceeded: 115.51;

Standards Met: 115.11; 115.12; 115.13; 115.14; 115.15; 115.16; 115.17; 115.18; 115.21; 115.22; 115.31; 115.32; 115.33; 115.34; 115.35; 115.41; 115.42; 115.43; 115.52; 115.53; 115.54; 115.61; 115.62; 115.63; 115.64; 115.65; 115.66; 115.67; 115.68; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.88; 115.89

Standards Not Met: N/A

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Bureau of Security Organization Chart</p> <p>Interviews conducted with:</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the policy of FDC is to establish zero-tolerance standards for sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in institutions and community corrections while protecting the rights of inmates and offenders, regardless of gender or sexual preference. This will be accomplished through accountability of perpetrators and the punishment of those institutional and community correctional officials who fail to prevent, detect, and respond to sexual abuse, sexual battery, and sexual harassment crimes for incarcerated inmates and those offenders under departmental jurisdiction.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the FDC will establish and provide implementation of standards for the detection, prevention, elimination, and punishment of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This will be accomplished by increasing the availability of data, information, and training on the incidence of sexual abuse, sexual battery, and sexual harassment, consequently improving the management and administration of correctional facilities.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the FDC will establish guidelines for proper and immediate reporting of such incidents as well as providing appropriate safeguards for victims, the management of evidence, and actions to be taken from reporting an allegation to substantiation of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &</i></p>

Response clearly defines prohibited behaviors regarding sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. In addition, any inmate, employee, volunteer, or contractor who commits a sexual battery may be criminally prosecuted pursuant to chapter 794, Florida Statute.

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

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

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

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator who verified she has sufficient time and authority in her position to accomplish PREA responsibilities for the agency. The PREA Director oversees fifty-seven PREA

Compliance Managers, to include seven PREA Compliance Managers assigned to private facilities. The PREA Coordinator reports directly to the FDC Deputy Director of Institutional Operations. A review of the FDC organizational chart provided evidence that the agency has designated an upper-level position as the PREA Coordinator.

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

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

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

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

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



115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1270 441">Florida Department of Corrections Procedure 205.002, <i>Contract Management</i></p> <p data-bbox="248 548 596 584">Interviews conducted with:</p> <p data-bbox="248 624 651 660">Agency Contract Administrator</p> <p data-bbox="248 768 1477 1059">Florida Department of Corrections Procedure 205.002, <i>Contract Management</i> states all new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include the following language to ensure compliance with 28 C.F.R. Part 115 “The contractor/vendor(s) will comply with the national standards to prevent, detect, and respond to prison rape under the Prison Rape Elimination Act (PREA), Federal Rule 28 C.F.R. Part 115. The contractor/vendor(s) will also comply with all Department policies and procedures that relate to PREA.”</p> <p data-bbox="248 1171 1465 1547">During the pre-on-site phase of the audit, the Auditor conducted an interview with the Agency Contract Administrator regarding how contracts are monitored to determine if the contractor complies with the PREA requirements of the contract. The Agency Contract Administrator explained that all Florida Department of Corrections contracts include verbiage related to the vendor’s obligation to comply with the PREA Standards prior to entering into agreement with the agency. If the entity is not PREA compliant, the contract will not be executed. Additionally, these contracts are monitored by Assistant Wardens who serve as the facility PREA Compliance Managers, conduct weekly visits, and inspections to the contracted facility to ensure the compliance of the PREA standards is maintained.</p> <p data-bbox="248 1659 1474 1865">The Agency Contract Administrator informed the Auditor the Florida Department of Corrections currently has 74 contracts for the confinement of inmates. The seven Department of Management Services (DMS) Contract facilities submit their completed audit reports to the FDC PREA Coordinator. These reports are then posted on the FDC public page along with FDC facility PREA reports.</p> <p data-bbox="248 1977 1481 2098">The PREA compliance results for the sixty-seven contracts for confinement of inmates with the other entities are managed by the contract manager in accordance with the verbiage of the contract that is in place with each entity.</p>

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

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Procedure 602.030, <i>Security Staff Utilization</i></p> <p>Florida Department of Corrections Post Order #3 – <i>Shift Supervisor</i></p> <p>Florida Department of Corrections Okeechobee C. I. Staffing Plan Report</p> <p>Florida Department of Corrections Okeechobee C. I. Deviations from Staffing Plan</p> <p>Florida Department of Corrections Incident Reports documenting deviations</p> <p>Facility Blueprint (to include security cameras and security mirrors)</p> <p>Facility Housing Logs (all shifts) – documenting Unannounced Rounds</p> <p>Interviews conducted with:</p> <p>Warden or Designee</p> <p>PREA Coordinator</p> <p>PREA Compliance Manager</p> <p>Intermediate or Higher Level Facility Staff</p> <p>On-site Review Observations:</p> <p>Daily operational functions</p> <p>Staff interaction with inmates</p> <p>Inmate movement</p> <p>Review of Security Video footage</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states in conjunction with each institution, the Office of Institutions will develop a particularized staffing plan for each institution that provides adequate staffing levels, and where applicable, video monitoring, to protect inmates against sexual abuse, sexual battery,</p>

staff sexual misconduct and sexual harassment. This plan shall be reviewed at least once per year to assess, determine, and document whether adjustments are necessary, both by the Warden of the institution and by the PREA Coordinator.

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

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

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

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

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

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

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

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states a quarterly review will be completed for each security roster beginning with the Warden. Information to be reviewed will be long-term loans, extended special assignments, security-staffing levels, and gender specific assignments.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Okeechobee C. I. Staffing Plan Report. Upon review of the Okeechobee 2019 Staffing Plan Report, the facility, when reviewing staffing requirements and the appropriate numbers of assigned staff, took into consideration the following requirements:

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

The Okeechobee C. I. 2019 Staffing Plan Report was extremely detailed and specific in each of the above categories. The report also included the review of analyses conducted in 2015 by the National Institute of Corrections (NIC) and by the Florida Legislature's Office of Program

Policy Analysis and Government Accountability (OPPAGA). Additionally, in January 2016 the Department contracted with the Association of State Correctional Administrators (ASCA) to conduct a comprehensive staffing analysis.

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

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

The average daily number of inmates on which the facility-staffing plan was predicated on was 2,454 Security Level 6 / Custody Level Close, Medium, Minimum and Security Level 3 / Custody Level Medium, Minimum, and Community custody inmates. The most common reasons for deviation from the staffing plan in the last 12 months include Vacancy Rates, Basic Recruit Class, Hospital Duty, Post Inactivity, and Weather Emergencies.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding Okeechobee C. I. staffing plan. The Facility Warden discussed how the Bureau of Security Operations develops a post chart for Okeechobee C. I. that documents the required daily staffing levels. Additionally, when developing a post chart, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the inmate population, the prevalence of substantiated and unsubstantiated allegations of sexual abuse, inmate-on-inmate assaults, and uses of force. The Facility Warden also explained that video monitoring is also taken into consideration. Okeechobee C. I. has 264 video cameras installed throughout the facility that are reviewed on a regular basis. The Facility Warden confirmed that he conducts a quarterly and annually staffing review, which is documented in the Roster Management System (RMS). To ensure compliance with the staffing plan, Facility Warden and the Majors conduct rounds on the compound for visual verification of staff assignments throughout the compound.

During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the PREA Coordinator; both confirmed the process of developing a

staffing plan previously described by the Facility Warden. The PREA Coordinator also confirmed that an assessment of the facility-staffing plan is conducted annually and she is consulted regarding any adjustments to the staffing plan.

During the on-site phase, the auditor reviewed the average daily number of inmates' report, staff shift rosters, facility blueprint, and daily inmate activity schedules to verify adequate staff coverage in comparison to inmate population, inmate movement, and facility size and layout.

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

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

During the on-site, the Auditor reviewed housing logs of supervisor unannounced rounds and reviewed security video footage from various housing areas which covered several days, various times, and every shift. The Auditor discovered that the unannounced rounds were being documented properly on the housing logs; however, upon review of the security video footage, the Auditor discovered the rounds did not include Supervisory Staff entering the living area.

Upon review of the policies and documentation provided and upon completion of interviews conducted with the Facility Warden, PREA Coordinator, PREA Compliance Manager, and Upper-level Supervisory Staff during the on-site visit, the Auditor determined through evidence provided, that the facility has a policy governing unannounced rounds that is consistent with the requirement of the PREA Standard. Florida Department of Corrections policy states shift supervisors must conducted daily-unannounced rounds of all housing areas and activity areas and must be conducted on all shifts. Provision (d) in this particular standard also requires unannounced rounds to cover all shifts.

During the on-site phase of the audit, the Auditor's initial review of security video footage, the facility's practice of not entering the living area demonstrated that the unannounced rounds

were not being conducted as required; therefore, the facility was found non-compliant in the preliminary report.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for conducting unannounced rounds. Training consisted of reviewing agency policy and the requirements of the PREA Standard. The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided documentation (security video footage) from all shifts, for all housing areas of the daily-completed rounds.

The Auditor reviewed the training documentation as well as all security video footage provided during the corrective action period and found the facility's practice of unannounced rounds were being conducted in accordance to the agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now in compliance with the provisions of this standard.

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

115.15	Limits to cross-gender viewing and searches
	<p data-bbox="248 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 411 360">Documents:</p> <p data-bbox="248 400 1437 434">Florida Department of Corrections Procedure 602.018, <i>Contraband & Searches of Inmates</i></p> <p data-bbox="248 474 1430 553">Florida Department of Corrections Procedure 602.036, <i>Gender Specific Security Positions, Shifts, Posts & Assignments</i></p> <p data-bbox="248 593 1469 669">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="248 710 999 743">Florida Department of Corrections General Post Order 01</p> <p data-bbox="248 784 1174 817">Florida Department of Corrections Okeechobee C. I. Housing Unit Log</p> <p data-bbox="248 857 1182 891">Florida Department of Corrections PREA Training Curriculum / Records</p> <p data-bbox="248 931 408 965">Staff Roster</p> <p data-bbox="248 1077 596 1111">Interviews conducted with:</p> <p data-bbox="248 1151 456 1184">Facility Warden</p> <p data-bbox="248 1225 619 1258">PREA Compliance Manager</p> <p data-bbox="248 1299 616 1332">Random sample of Inmates</p> <p data-bbox="248 1373 647 1406">Transgender/Intersex Inmates</p> <p data-bbox="248 1518 639 1552">On-site Review Observations:</p> <p data-bbox="248 1592 596 1626">Daily operational functions</p> <p data-bbox="248 1666 628 1700">Staff interaction with inmates</p> <p data-bbox="248 1740 491 1774">Inmate movement</p> <p data-bbox="248 1886 1469 2130">Florida Department of Corrections Procedure 602.036, <i>Gender Specific Security Positions, Shifts, Posts, & Assignments</i> states strip searches of inmates will be conducted only by those in the Correctional Officer class of the same sex as the inmate, except in emergency circumstances as determined by the Shift Supervisor. All strip searches of inmates conducted by staff of the opposite gender shall require the staff conducting the search to submit an Incident Report DC6-210, explaining the justification for the search exception.</p>

Documentation provided by the facility indicated there were no cross-gender strip searches or cross-gender visual body cavity searches conducted during the last 12 months. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and the PREA Compliance Manager and verified that no cross-gender strip searches or cross-gender visual body cavity searches were conducted.

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

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

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

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

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

During the on-site phase of the audit, the Auditor requested interviews with a random

sampling of inmates. Thirty-two random sample of inmate interviews were completed and all thirty-two inmates confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, all thirty-two random sample of inmates interviewed, confirmed staff of the opposite gender announce her presence prior to entering the housing unit.

During the on-site phase of the audit, the Auditor conducted a review of several samples of housing logs and observed entries indicating opposite gender entering housing dormitory with notification to inmates being announced prior to opposite gender entry. The sample of housing logs reviewed covered several days throughout the month and were from all shifts. The Auditor also observed the announcement of an opposite gender entering a housing dormitory throughout the on-site tour of the facility, which provided additional documentation and the facility's compliance with this standard.

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

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

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

Florida Department of Corrections Procedure 602.018, *Contraband & Searches of Inmates* states all staff members shall receive training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates/offenders in a professional and respectful manner consistent with security correctional environments.

During the on-site phase of the audit, the Auditor reviewed the training records and training curriculum provided to staff members who may have contact with inmates, how to perform cross-gender pat-down searches and searches of transgender and intersex inmates. Training

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

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

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Procedure 604.101, <i>Americans with Disabilities Act</i></p> <p>Florida Department of Corrections Staff Translator List</p> <p>Florida Department of Corrections Contract with Language Line Services</p> <p>Florida Department of Corrections Inmate Handbook (multiple languages)</p> <p>PREA / Sexual Awareness Brochures (multiple languages)</p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>Inmates with Disabilities or LEP</p> <p>Random sample of Staff</p> <p>On-site Review Observations:</p> <p>PREA informational signage posted in multiple languages</p> <p>Florida Department of Corrections Procedure 604.101, <i>Americans with Disabilities Act</i> states the Department is required to authorize and/or provide accommodation(s) to inmates with documented disabilities to ensure accessibility for services, programs, and activities. When reviewing an inmate's request for an accommodation, decisions are based on the specific inmate's needs, capabilities, as well as specific criteria for the program or activity. The Americans with Disabilities Act requires the Department to make decisions on a case-by-case basis with facts, not suppositions.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in FDC Procedure 604.101 and other Department resources as appropriate. Resources include</p>

closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDC translator list, language line services.

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

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

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

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

During the pre-on-site phase of the audit, the Auditor reviewed the existing contract between the Florida Department of Corrections and the Language Line Services, Inc. The contract outlines the translation services provided for each FDC facility, rate of service, and the contract start and ending dates.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections staff translator list. The Staff Translator list, which includes 546 members, provides the staff member's name, contact number, language translation ability, and facility assignment. The various language translation abilities of FDC staff include Arabic, Armenian, Chinese, Creole, Danish, Filipino, French, German, Gujarati, Hindi, Italian, Kurdish, Laos,

Latin, Native American, Patwa, Portuguese, Punjabi, Romanian, Russian, Spanish, Swedish, Tagalog, Thai, Ukrainian, Urdu, and American Sign Language.

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

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

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

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

115.17	Hiring and promotion decisions
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1342 477">Florida Department of Corrections Procedure 208.049, <i>Background Investigation, & Appointment of Certified Officers</i></p> <p data-bbox="252 521 951 555">Florida State Statute 408.809, <i>Background Screening</i></p> <p data-bbox="252 667 596 701">Interviews conducted with:</p> <p data-bbox="252 745 772 779">Administrative / Human Resources Staff</p> <p data-bbox="252 813 639 846">On-site Review Observations:</p> <p data-bbox="252 891 443 925">Personnel files</p> <p data-bbox="252 1037 1477 1323">Florida Department of Corrections Procedure 208.049, <i>Background Investigation & Appointment of Certified Officers</i> states the agency shall not hire or promote anyone who has engaged in sexual abuse in a prison, jail, lockup, community confinement, juvenile facility, or other institution. The agency shall not hire or promote anyone who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force or coercion, or if the victim did not consent or was unable to consent, or has been civilly or administratively adjudicated to have engaged in such activity.</p> <p data-bbox="252 1435 1485 1597">Florida State Statute 408.809, <i>Background Screening</i> establishes responsibilities, policies, and procedures governing background investigations. All FDC employees, interns, contractors, visitors, vendors, and volunteers requesting employment and/or entry into any FDC institution will have a criminal records background investigation completed.</p> <p data-bbox="252 1709 1477 1995">Florida State Statute 408.809, <i>Background Screening</i> establish the responsibilities for conducting and ensuring criminal records background investigations are completed on all eligible FDC candidates is the responsibility of the Office of Human Resources (OHR) and the Office of Human Resources Centralized Recruitment Team located in the Florida Department of Corrections Central Office. The OHR and the Department’s Recruitment Team also ensure a criminal records background check is completed on all current FDC and contract employees at least once every five years.</p> <p data-bbox="252 2107 1410 2141">The Florida Department of Corrections OHR utilizes the LiveScan fingerprinting program.</p>

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

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

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

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

115.18	Upgrades to facilities and technologies
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1468 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 517 949 551">Okeechobee C. I. Security Camera Schematic Report</p> <p data-bbox="252 663 596 696">Interviews conducted with:</p> <p data-bbox="252 736 427 770">Agency Head</p> <p data-bbox="252 810 453 844">Facility Warden</p> <p data-bbox="252 956 1468 1160">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the facility will use video monitoring systems and other cost-effective and appropriate technology to supplement its sexual abuse prevention, detection, and response efforts. Annually, the facility will assess the feasibility of and need for new or additional monitoring technology and/or equipment.</p> <p data-bbox="252 1272 1468 1435">During the on-site tour of the facility, the Auditor observed convex mirrors, security cameras, and video monitoring equipment in all housing areas, food service, laundry, in common areas, and outside throughout the grounds of the compound. Okeechobee C. I. has not undergone any modifications or expansions to the facility since the last audit.</p> <p data-bbox="252 1547 1436 1798">During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility effects the ability to protect inmates from sexual abuse. The Agency Head explained how facility modification has always been focused on providing safety to both staff and inmates. Modifications or expansions that are not in the best interest of the facility or department are not given consideration.</p> <p data-bbox="252 1910 1460 2074">The Agency Head also explained how video cameras at the facility are installed in all housing units, common areas, food service, and laundry. Recently, the Department has focused their resources in adding and upgrading the current video monitoring technology, with the ultimate goal of having all areas of the facility under surveillance.</p>

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

The Facility Warden also informed the Auditor, both video and audio surveillance is regularly reviewed to ensure compliance with requirements for security checks and proper implementation of all security and safety procedures. Okeechobee C. I. has also added additional video and audio surveillance devices for the specific purpose of improving the ability to prevent and respond to sexual abuse incidents.

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

115.21	Evidence protocol and forensic medical examinations
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="252 248 523 282">Auditor Discussion</p> <hr/> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1474 477">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 521 1474 593">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 638 1385 669">Florida Department of Corrections contract with Gulf Coast Children’s Advocacy Center</p> <p data-bbox="252 714 1422 786">Florida Department of Corrections contract with Sexual Assault Assistance Program of the Treasure Coast</p> <p data-bbox="252 831 1430 902">Florida Department of Corrections contract with Palm Beach County Victim Services (Sago Palm Re-Entry)</p> <p data-bbox="252 947 1358 978">Florida Department of Corrections contract with Panhandle Forensic Nurse Specialist</p> <p data-bbox="252 1023 810 1055">SANEs / SAFEs Uniform Evidence Protocol</p> <p data-bbox="252 1099 1161 1131">Florida Department of Corrections Sexual Abuse Awareness Brochure</p> <p data-bbox="252 1234 596 1265">Interviews conducted with:</p> <p data-bbox="252 1310 568 1341">Random sample of Staff</p> <p data-bbox="252 1386 480 1417">SANE/SAFE Staff</p> <p data-bbox="252 1462 616 1494">PREA Compliance Manager</p> <p data-bbox="252 1538 743 1570">Inmates who reported a sexual abuse</p> <p data-bbox="252 1682 639 1713">On-site Review Observations:</p> <p data-bbox="252 1758 999 1789">Sexual Abuse / Harassment Reporting Procedures poster</p> <p data-bbox="252 1834 555 1865">Inmate phones (tested)</p> <p data-bbox="252 1977 1474 2130">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states whenever sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism occurs, the Emergency Action Center (EAC) shall be notified without unnecessary delay. The OIC or the Incident Commander shall ensure</p>

that any sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism is reported via a Management Information Notification System (MINS) after notification to EAC.

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

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

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

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

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

Florida Department of Corrections Procedure states that a victim's advocate will be made available to victims of sexual abuse to accompany them through the forensic exam process and shall provide the victim with access to outside victim advocates for emotional support services related to sexual abuse. The facility shall enable reasonable communication between inmates and the organizations providing such services in as confidential manner as possible. The evaluation and treatment of such victims shall include follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to other facilities or

upon release from custody.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, contracts between FDC and the Panhandle Forensic Nurse Specialist; FDC and the Gulf Coast Children's Advocacy Center; FDC and the Sexual Assault Assistance Program of the Treasure Coast, and FDC and the Palm Beach County Victim Services (Sago Palm Re-Entry).

Each contract uses clear and concise language, provides the agency's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, the four contracts describe in detail, the expectations, and responsibilities of each contractor including performance measures and financial consequences if the required service is not met.

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

The Gulf Coast Children's Advocacy Center provides inmates incarcerated at Okeechobee C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Gulf Coast Children's Advocacy Center include providing mailing addresses and phone numbers of victim advocates. The Gulf Coast Children's Advocacy Center has a toll-free hotline for services and support, and is the designated outside reporting hotline for inmates at Okeechobee C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a certified rape crisis counselor from the Gulf Coast Children's Advocacy Center. The certified rape crisis counselor confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Okeechobee C. I. to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested phone inside dormitories to ensure availability and functionality; all phones tested were confirmed to be working properly.

The Sexual Assault Assistance Program (SAAP) of the Treasure Coast is the Certified Rape Crisis Program for Indian River, St. Lucie, Martin, and Okeechobee Counties. Through continued funding from the four counties, as well as grants from Victims of Crime Act and Florida Council against Sexual Violence, the SAAP of the Treasure Coast is able to staff twenty advocates on-call 24/7 to provide crisis intervention, referrals, advocacy, and a 24-hour confidential helpline.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the SAAP of the Treasure Coast. The victim advocate confirmed the existing contract, advocacy, and emotional support services provided to the inmates incarcerated at Okeechobee C. I. Main Unit and Work Camp. Inmates may contact the SAAP of the Treasure Coast by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory and common areas at the Okeechobee C. I. Main Unit and Work Camp.

The Palm Beach County Victim Services, funded by the Palm Beach County Board of County Commissioners, provides victim advocacy services to sexual assault victims through crisis intervention response, advocacy, therapy, and community awareness.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Palm Beach County Victim Services. The victim advocate confirmed the existing contract with Sago Palm Re-Entry Center and the advocacy, and emotional support services provided to the inmates incarcerated Sago Palm. Additionally, inmates may contact the Palm Beach County Victim Services by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory and common areas at the Sago Palm Re-Entry Center.

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

During the on-site phase of the audit, the Auditor interviewed a random sample of staff regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime

scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify Medical and Mental Health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

Okeechobee Correctional Institution reported no forensic medical exams were conducted during the past 12 months. During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the Facility Warden and both confirmed this information is correct. As previously stated above, the Auditor also confirmed this information during the interview with the certified SAFE Doctor.

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment; eight of the twenty-six were allegations of sexual harassment and the remaining eighteen allegations were sexual abuse. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted a targeted interview with two inmates who reported an incident of sexual harassment or sexual abuse. The Auditor inquired to each, after reporting, did the facility allow them to contact anyone. The inmate informed the Auditor that the facility contract Medical and Mental Health staff informed them of the services available from the Sexual Assault Assistance Program of the Treasure Coast. Additionally, both inmates informed the Auditor that they could also obtain additional information from the PREA Brochure given to them by Staff and from the PREA signs posted throughout the facility.

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

115.22	Policies to ensure referrals of allegations for investigations
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1468 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 517 1468 595">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 636 1093 669">Office of the Inspector General Investigator Training, Credentials</p> <p data-bbox="252 710 1401 743">Investigative Case files (26) – Sexual abuse, sexual misconduct, and sexual harassment</p> <p data-bbox="252 784 914 817">Florida Department of Corrections Agency Website</p> <p data-bbox="252 929 596 963">Interviews conducted with:</p> <p data-bbox="252 1003 427 1037">Agency Head</p> <p data-bbox="252 1077 483 1111">Investigative Staff</p> <p data-bbox="252 1223 1476 1597">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states that any knowledge of, or receives information, written or verbal regarding sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the Office of the Inspector General. The notified authority will take immediate steps to evaluate the inmate’s concern / allegation and will ensure proper medical treatment and mental health treatment are obtained. An investigation will be initiated in accordance with FDC Procedure 108.003, <i>Investigative Process</i> and FDC Procedure 108.015, <i>Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations</i>.</p> <p data-bbox="252 1709 1476 2045">During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or harassment. The Agency Head explained how the Office of the Inspector General oversees and coordinates the process for all criminal investigations involving inmates or staff members and for allegations of sexual harassment committed by staff are addressed in an administrative investigation, which is also overseen by the Office of the Inspector General. Any allegation of sexual harassment committed by an inmate is addressed as a disciplinary investigation at the facility level.</p>

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

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

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

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

The Inspector also confirmed agency policy requiring all allegations of sexual abuse or sexual harassment must be referred to the Office of the Inspector General and Inspectors have the legal authority to conduct administrative and criminal investigations pursuant to FSS 944.31. The Inspector provided a detail overview of the investigative process, which included once the investigation process has concluded with a case finding, the case must be submitted to the Office of the Inspector General for review and a final determination. At the time of the on-site phase of the audit, the Auditor noted the number of cases for Okeechobee C. I. still pending and awaiting closing by the Office of the Inspector General was eleven.

Florida Department of Corrections publishes agency policy regarding the referral of allegations

of sexual abuse or sexual harassment for criminal investigation on the agency website <http://www.dc.state.fl.us/PREA/index.html>

According to the information provided in the PAQ (§115.22(a)-2), during the past 12 months, Okeechobee C. I. reported twenty-two allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually twenty-six. During the on-site phase of the audit, the Auditor met with the PREA Compliance Manager and the staff member tasked with entering the information into the PAQ to clarify the discrepancy. After discussion, the reported number (22) is incorrect and for the purposes of this audit, the total number of investigations during the audit period are twenty-six. The four additional cases were opened after the Staff Member submitted the PAQ into the Online Audit System (OAS).

The Auditor reviewed twenty-three administrative investigations and three criminal investigations. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the fifteen closed cases; of the twenty-six total cases, eleven are pending closing reports / reviews from the Office of the Inspector General.

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

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

115.31	Employee training
	<p data-bbox="248 170 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 411 360">Documents:</p> <p data-bbox="248 400 1469 479">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="248 517 1474 551">Florida Department of Corrections Procedure 602.018, <i>Contraband, and Searches of Inmates</i></p> <p data-bbox="248 589 1114 622">Florida Department of Corrections Staff PREA Training Curriculum</p> <p data-bbox="248 660 1377 694">Florida Department of Corrections Okeechobee C. I. Training Roster / Staff Signatures</p> <p data-bbox="248 808 596 842">Interviews conducted with:</p> <p data-bbox="248 882 568 916">Random sample of Staff</p> <p data-bbox="248 1030 639 1064">On-site Review Observations:</p> <p data-bbox="248 1104 619 1137">Personnel Training Records</p> <p data-bbox="248 1252 1469 1543">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years. In addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners shall complete specialized training. The Auditor reviewed the general PREA training curriculum, which included the following:</p> <ul data-bbox="300 1612 1477 2157" style="list-style-type: none"> • Agency's zero tolerance for sexual abuse and sexual harassment • How employees fulfill their responsibilities under agency sexual abuse and sexual harassment; prevention, detection, reporting, and response policies and procedures; • Inmates' rights to be free from sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment; • The right of inmates & staff to be free from retaliation for reporting sexual abuse, sexual battery, staff sexual misconduct, or harassment; • Dynamics of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings; • Common reactions of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings; • How to detect and respond to signs of threatened & actual sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment;

- How to avoid inappropriate relationships with inmates and offenders;
- Communicating effectively & professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates;
- How to comply with relevant laws related to mandatory reporting of sexual abuse;

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

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

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

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

Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the files reviewed during the on-site visit, Okeechobee C. I. demonstrated facility-wide practices that

are consistent with policy and the requirements of the PREA standard.

115.32	Volunteer and contractor training
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1469 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="248 517 1270 553">Florida Department of Corrections Volunteer & Contractor Training Curriculum</p> <p data-bbox="248 593 1425 629">Florida Department of Corrections Volunteer & Contractor Training Roster with Signatures</p> <p data-bbox="248 736 596 772">Interviews conducted with:</p> <p data-bbox="248 813 970 848">Volunteer or Contractor who have contact with Inmates</p> <p data-bbox="248 956 1481 1332">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the agency shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities in regards to this and related policies as it relates to the prevention, detection, and response to inmate sexual abuse allegations. Training shall be conducted via as it relates to the via the Staff Development and Training lesson plan <i>Prison Rape Elimination Act Training for Interns, Volunteers, and Contractors Read and Sign</i>, form NI1-127. This training shall be administered to all contractors and volunteers every three years. In addition, the PREA Brochure for Interns, Volunteers, and Contractors, form NI1-125 will be distributed annually to all contractors and volunteers.</p> <p data-bbox="248 1449 1481 1736">During the pre-on-site phase, the Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training was tailored based on the services they provide and the level of contact they have with inmates and included the agency's zero-tolerance policy regarding sexual abuse and sexual harassment along with how to report such incidents.</p> <p data-bbox="248 1852 1481 1968">During the on-site visit, the Auditor conducted interviews with contract staff; each staff member confirmed and acknowledge understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities.</p> <p data-bbox="248 2085 1433 2157">Upon review of the policy and documentation and after completion of interviews conducted during the on-site visit, Okeechobee C. I. demonstrated facility-wide practices that are</p>

consistent with policy and the requirements of the PREA standard.

115.33	Inmate education
Auditor Overall Determination: Meets Standard	
Auditor Discussion	
<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i></p> <p>Florida Department of Corrections Inmate Orientation Handbook (multiple languages)</p> <p>Florida Department of Corrections Acknowledgement of Receipt of PREA Orientation (FDC Form DC6-134C)</p> <p>PREA / Sexual Awareness Brochures (multiple languages)</p> <p>Interviews conducted with:</p> <p>PREA Compliance Manager</p> <p>Intake Staff</p> <p>Random Sample of Inmates</p> <p>Targeted Inmates (Limited English Proficient, Hearing or Cognitive Impaired)</p> <p>On-site Review Observations:</p> <p>Inmate files – Comprehensive PREA Education documentation</p> <p>PREA Informational Signage posted throughout facility</p> <p>PREA Informational video</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff. This orientation will be conducted in accordance with FDC Procedure 601.210, <i>Inmate Orientation</i>.</p> <p>Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> states within 24</p>	

hours of arriving to a Florida Department of Corrections Institution, all inmates will receive an initial orientation to include PREA and the Department's zero tolerance policy. The PREA orientation shall include:

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

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

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

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

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and discussed the inmate comprehensive PREA orientation and

documentation process. The PREA Compliance Manager provided specific details on the process of educating inmates including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process by using PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

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

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

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

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

Inmates from every housing unit and of various diversities were interviewed. All of the thirty-two inmates interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. Seventeen of the thirty-two inmates interviewed recalled seeing the PREA orientation video multiple times; the FDC requires inmates to receive the orientation during any transfer to a new facility even if the inmate has previously attended a PREA orientation thus resulting in multiple orientations for many inmates. All inmates also

acknowledged the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Inmates also referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. Twenty of the thirty-two inmates interviewed referred to utilizing the hotline and ten of the thirty-two inmates referred to telling an officer as the most direct method to report or inquire about PREA information. All inmates interviewed also referred to calling the TIPS Hotline or a family member as their source outside the facility. Thirty of the thirty-two inmates interviewed were aware of the availability of submitting an anonymous PREA report and thirty of the thirty-two inmates acknowledge reporting via a third party.

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

115.34	Specialized training: Investigations
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1471 477">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 517 1471 595">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 636 1118 669">Florida Department of Corrections Specialized Training Curriculum</p> <p data-bbox="252 710 513 743">Training Certificates</p> <p data-bbox="252 853 596 887">Interviews conducted with:</p> <p data-bbox="252 927 485 960">Investigative Staff</p> <p data-bbox="252 1070 639 1104">On-site Review Observations:</p> <p data-bbox="252 1144 421 1178">Training files</p> <p data-bbox="252 1288 1471 1456">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states in addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners who work regularly with inmates shall complete specialized training.</p> <p data-bbox="252 1568 1471 1859">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states in addition to the general training provided to all employees pursuant to 23 CFR 115.31, the Department shall ensure that Inspectors have received training in conducting of such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral.</p> <p data-bbox="252 1971 1471 2139">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the Department shall maintain documentation that Inspectors have completed the required specialized training in conducting sexual abuse investigations. Training documentation shall be maintained by the Bureau of Professional</p>

Development and Training.

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

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

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

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

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

During the pre-on-site phase of the audit, the Auditor reviewed training records of all medical staff currently assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required elements of the department policy and of the PREA standard. During the on-site phase, the Auditor conducted interviews with four Medical & Mental Health staff members and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. Medical and Mental Health staff members also confirmed receiving the Department's general PREA training, which included the zero tolerance to sexual abuse and sexual harassment.

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

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i></p> <p>Florida Department of Corrections IBAS IRMS Assessments</p> <p>Interviews conducted with:</p> <p>Staff Responsible for Risk Screening</p> <p>Random sample of Inmates</p> <p>PREA Coordinator</p> <p>On-site Review Observations:</p> <p>Inmate records of initial assessment & reassessment</p> <p>Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> states during the reception process, all inmates will be subject to screening within 24 hours of arrival for potential mental and physical vulnerabilities that would jeopardize an inmate’s safety.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each time an inmate arrives at an institution, Health Services Staff will screen the inmate upon arrival as soon as possible, and within 24 hours. The screening will assess the inmate’s sexual orientation, to include whether the inmate identifies as LGBTI. The screening will also assess if the inmate has a mental, physical, or developmental disorder that requires particularized medical or mental health care.</p> <p>Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> and Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states within 72 hours of intake, a Classification Officer will screen all inmates to determine if an</p>

inmate is at risk of future victimization of sexual abuse, sexual battery, or is at risk of committing sexual abuse or sexual battery. Characteristics such as the inmate's age, criminal record, and prior identified history of sexual victimization or predation will be utilized to make this determination.

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

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

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

During the pre-on-site phase of the audit, the Auditor reviewed seven PREA Risk Factors Checklist screening forms and during the on-site phase of the audit, the Auditor reviewed an additional fifteen PREA Risk Factors Checklist screening forms completed during this audit period. All forms were filled out completely and in accordance to the agency policy.

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

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

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

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

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

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

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

an immediate referral to medical and mental health staff. The program will automatically generate the next appointment (within 30 days) for each inmate.

The Auditor inquired to the Classification Officer what actions are taken against inmates who refuse to cooperate or answer the questions in the risk screening process. The Classification Officer informed the Auditor that inmates have the right to refuse and will not be disciplined for refusing to respond. If an inmate refuses to cooperate or answer the questions during the initial interview, herself, or another Classification Officer will conduct a follow-up interview.

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

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

In the 12 months prior to the audit, the facility reported there were nine inmates who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer.

During the on-site visit, the Auditor requested and interviewed three inmates who reported sexual victimization during the intake process. All three inmates confirmed being offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process. However, all three inmates confirmed the meeting with the mental health care practitioner occurred approximately a month to two months after the initial screening process.

During the on-site visit, the Auditor conducted thirty-two interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing unit and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing unit and of various diversities were interviewed. Twenty-five of the thirty-two inmates interviewed entered the facility fifteen months or longer, therefore this particular interview question was not posed to them. Of the remaining seven inmates interviewed, all seven inmates recalled the initial risk assessment interview as well as the second risk assessment interview occurring with a member of the Classifications Team and within a month from the initial assessment.

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

During the pre-on-site phase of the audit, the Auditor inquired to the PREA Coordinator how the facility protects sensitive information, in particular an inmate's risk assessment. The PREA Coordinator explained how the risk assessments are maintained electronically and only Classification staff has access to the risk assessments.

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

115.42	Use of screening information
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1471 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 515 1396 548">Florida Department of Corrections Housing Integrated Assessment & Placement Report</p> <p data-bbox="252 660 598 694">Interviews conducted with:</p> <p data-bbox="252 734 619 768">PREA Compliance Manager</p> <p data-bbox="252 808 730 842">Staff Responsible for Risk Screening</p> <p data-bbox="252 882 667 916">Transgender / Intersex Inmates</p> <p data-bbox="252 956 491 990">PREA Coordinator</p> <p data-bbox="252 1102 1481 1348">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states if an inmate is identified as a potential victim or abuser (perpetrator) housing, bed, and work assignments will be appropriately assigned based on known information and established protocol. Within 30 days from the initial intake screening, the institution will reassess the inmate’s risk of victimization or abusiveness if additional information is received by the institution.</p> <p data-bbox="252 1460 1471 1628">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states housing for transgender and intersex inmates will be determined on a case-by-case basis. The inmate’s safety as well as the safety and the security of the institutional compound will be taken into consideration when making the housing determination.</p> <p data-bbox="252 1740 1481 1908">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states transgender and intersex inmates will be assessed biannually by Classification. An interview will be conducted as well as a review of their housing, program and work assignments to determine if there are any changes or threats to the inmate’s safety.</p> <p data-bbox="252 2020 1471 2132">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.</p>

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

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

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

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

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

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

The Classification Officer explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each inmate, which is

done strictly on a case-by-case basis. She further explained a transgender or intersex inmate's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the inmate or solely based on the inmate's classification level.

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

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

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

The Auditor conducted six interviews with inmates who identify as either gay, bisexual, or transgender. Each inmate was questioned whether they were placed in a housing area only for gay, bisexual, or transgender inmates. Each inmate acknowledged being housed in a general population housing area for all inmates of the same level of classification. Each inmate explained the classification levels are based on criminal history. The inmate who identified as transgender was questioned if he was allowed to shower without other inmates and the transgender inmate acknowledged yes.

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

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

115.43	Protective Custody
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1471 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 515 1141 548">Florida Administrative Code 33-602.220 <i>Administrative Confinement</i></p> <p data-bbox="252 734 598 768">Interviews conducted with:</p> <p data-bbox="252 808 454 842">Facility Warden</p> <p data-bbox="252 882 928 916">Staff who supervise Inmates in Segregated Housing</p> <p data-bbox="252 1028 1487 1193">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates at high risk of victimization will not be involuntarily segregated unless an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers.</p> <p data-bbox="252 1303 1471 1424">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates perceived to be vulnerable would be housed and given work/program assignments consistent with custody level and medical status.</p> <p data-bbox="252 1536 1487 1783">Florida Administrative Code 33-602.220, <i>Administrative Confinement</i> states if it is necessary to continue the inmate’s confinement beyond this first extension, written authorization must be obtained from the State Classification Office for a 30-day extension. The State Classification Office shall have the authority to authorize one additional one additional 30-day extension. Examples of circumstances for placing an inmate in administrative confinement for this reason include:</p> <ul data-bbox="300 1854 1433 2145" style="list-style-type: none"> • Pending an evaluation for placement in close management • Special review against other inmates, disciplinary, program change or management transfer • Pending an investigation into allegations that the inmate is in fear of a staff member • Any other reason when the facts indicate that the inmate must be removed from the general inmate population for the safety of any inmate or group of inmates or for the security of the institution.

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

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

During the 12 months prior to the audit, the facility reported in the PAQ there were no inmates at risk of sexual victimization being assigned to involuntary segregated housing. During the on-site phase of the audit, the Auditor interviewed the Classification Supervisor and the PREA Compliance Manager and each confirmed the information previously provided by the facility in the PAQ. Therefore, inmates in this targeted category were not interviewed.

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

115.51	Inmate reporting
	<p data-bbox="248 170 927 203">Auditor Overall Determination: Exceeds Standard</p> <p data-bbox="248 248 523 282">Auditor Discussion</p> <p data-bbox="248 327 411 360">Documents:</p> <p data-bbox="248 405 1469 483">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="248 517 1219 551">Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i></p> <p data-bbox="248 584 1386 618">Florida Department of Corrections contract with Gulf Coast Children’s Advocacy Center</p> <p data-bbox="248 663 940 696">Florida Department of Corrections Inmate Handbook</p> <p data-bbox="248 730 1402 763">Florida Department of Corrections Sexual Abuse Awareness Brochure (English/Spanish)</p> <p data-bbox="248 808 1291 842">Florida Department of Corrections PREA Informational Poster (English/Spanish)</p> <p data-bbox="248 954 596 987">Interviews conducted with:</p> <p data-bbox="248 1032 619 1066">PREA Compliance Manager</p> <p data-bbox="248 1111 568 1144">Random sample of Staff</p> <p data-bbox="248 1178 612 1211">Random sample of Inmates</p> <p data-bbox="248 1323 639 1357">On-site Review Observations:</p> <p data-bbox="248 1402 616 1435">PREA informational signage</p> <p data-bbox="248 1469 660 1503">Victim Support Services Hotline</p> <p data-bbox="248 1547 416 1581">TIPS Hotline</p> <p data-bbox="248 1693 1414 1895">Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> states each institution will ensure that the inmate orientation process shall advise inmates to report immediately any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment. The PREA orientation shall also include how to report incidents or suspicion of sexual abuse or sexual harassment.</p> <p data-bbox="248 2007 1469 2130">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department’s zero tolerance policy on sexual abuse, sexual battery,</p>

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

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

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

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

The Gulf Coast Children's Advocacy Center provides inmates incarcerated at Okeechobee C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Gulf Coast Children's Advocacy Center include providing mailing addresses and phone numbers of victim advocates. The Gulf Coast Children's Advocacy Center has a toll-free hotline for services and support, and is the designated outside reporting hotline for inmates at Okeechobee C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a certified rape crisis counselor from the Gulf Coast Children's Advocacy Center. The certified rape crisis counselor confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Okeechobee C. I. to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested phone inside dormitories to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted thirty-two interviews with a

random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, *PREA Compliance Audit Instrument - Interview Guide for Inmates*. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing dormitory and of various diversities were interviewed. Inmates were asked how they would report an incident of sexual abuse or sexual harassment if it happened to them or another inmate. Twenty of the thirty-two inmates interviewed indicated using the PREA hotline and ten of the thirty-two inmates interviewed indicated telling a staff member as their preferred method of reporting, while the remaining two inmates indicated telling a family member. All of the inmates listed more than two methods of reporting when the Auditor posed the initial question, confirming inmates are educated in the multiple reporting avenues available. Inmates were also questioned if they could submit a report anonymously or have a third party report the incident. All thirty-two inmates interviewed acknowledge “yes” to having another inmate report for them or a family member (third party reporting) and thirty of the thirty-two inmates interviewed were aware they could file a report without providing a name (anonymously).

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

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

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

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

The Auditor inquired to each staff member how he/she would report an allegation of sexual

abuse or sexual harassment of inmates privately. Staff responses were evenly divided with half indicating calling the Office of the Inspector General (TIPS hotline) and half tell his/her immediate supervisor. Staff members expressed confidence in reporting either to the OIG or privately to his/her supervisor and no one reported fear of retaliation.

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

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

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

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

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Administrative Code Rule 33-103.005, <i>Informal Grievance</i></p> <p>Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i></p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Inmate Handbook (English / Spanish)</p> <p>Interviews conducted with:</p> <p>Inmates who reported a Sexual Abuse</p> <p>Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states inmates shall utilize the informal grievance process prior to initiating a formal grievance. Inmates may skip this step and initiate the process at the formal institutional level for issues pertaining to grievances regarding allegations of sexual abuse. Inmates filing grievances alleging sexual abuse shall not be instructed to file the grievances to the individual(s) who are the subject(s) of the complaint. Additionally grievances of this nature shall not be referred to the subject(s) of the complaint.</p> <p>Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states there is no time limit on when an inmate or a third party may initiate a grievance regarding allegations of sexual abuse.</p> <p>Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states upon receipt of an emergency grievance the reviewing authority shall take the following action as soon as possible, but no later than two calendar days following receipt: review complaint and contact staff for additional information if necessary, if an emergency is found to exist, initiate action to alleviate condition giving rise to the emergency, provide a formal response to the inmate within 15 calendar days. If an emergency is not found to exist, a response will be provided to the inmate indicating that the complaint is “not an emergency” with instructions to resubmit at the proper level, signed and dated by the responding employee and returned to the inmate within</p>

72 hours of receipt.

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

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

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

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

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

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted two targeted interviews with the inmates who reported either an incident of sexual harassment or sexual abuse. The Auditor inquired to each inmate if the facility notified each them of the final decisions made regarding their allegation and were they notified in writing. One inmate interviewed informed the Auditor he has not been notified and the case was pending a final resolution. The other inmate interviewed confirmed to the Auditor he was notified in writing, by staff of the case disposition. The Auditor verified the notification while reviewing the investigative files and the inmate notification contained the date, case disposition, and inmate signature.

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

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Memorandum of Understanding with Sexual Assault Assistance Program of the Treasure Coast</p> <p>Memorandum of Understanding with Palm Beach County Victim Services (Sago Palm Re-Entry)</p> <p>Memorandum of Understanding with Gulf Coast Children’s Advocacy Center</p> <p>Florida Department of Corrections PREA Informational Poster (English / Spanish)</p> <p>Florida Department of Corrections Sexual Abuse Awareness Brochure (English / Spanish)</p> <p>Florida Department of Corrections Inmate Orientation Handbook (English / Spanish)</p> <p>Interviews conducted with:</p> <p>Random sample of Inmates</p> <p>Inmates who reported a Sexual Abuse</p> <p>On-site Review Observations:</p> <p>PREA informational signage</p> <p>Sexual Abuse Awareness Brochure</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. Additionally, the victim will be offered support services by means of means of a mailing address and/or telephone numbers to local community support groups.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any inmate who alleges sexual abuse or sexual battery will be advised of</p>

his/her right to crisis intervention services, forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interviews.

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

During the on-site phase of the audit, the Auditor reviewed the contracts between the Florida Department of Corrections and the Sexual Assault Assistance Program of the Treasure Coast, Florida Department of Corrections and the Palm Beach County Victim Services (Sago Palm Re-Entry), and the Florida Department of Corrections and the Gulf Coast Children's Advocacy Center.

The Sexual Assault Assistance Program (SAAP) of the Treasure Coast provides inmates incarcerated at Okeechobee C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Sexual Assault Assistance Program (SAAP) of the Treasure Coast include providing mailing addresses and phone numbers of victim advocates and in-prison visits during forensic exams and investigatory interviews, if requested.

The Palm Beach County Victim Services provides inmates incarcerated at the Sago Palm Re-Entry Center with advocacy and emotional support services. Additionally, inmates may contact the Palm Beach County Victim Services by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory and common areas at the Sago Palm Re-Entry Center.

The Gulf Coast Children's Advocacy Center provide a free outside reporting hotline for inmates to report sexual abuse and sexual harassment. The Gulf Coast Children's Advocacy Center hotline is designated as the outside reporting hotline for Okeechobee C. I. inmates.

During the on-site phase of the audit, the Auditor conducted thirty-two interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing dormitory and of various diversities were interviewed. Inmates

were asked if needed, there are services available outside of the facility for dealing with sexual abuse. Twenty-five of the thirty-two inmates interviewed stated there are services available as they were explained to them during the comprehensive PREA orientation. The remaining seven inmates were not aware such services existed. All thirty-two inmates acknowledged the informational bulletins posted in the dormitories near the phones, and is easily accessible if the information is needed. Twenty-five of the thirty-two inmates interviewed acknowledged being provided mailing address and telephone numbers to victim advocacy services and that such call is toll-free.

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

During the on-site phase of the audit, the Auditor conducted two targeted interviews with the inmates who reported an incident of sexual harassment or sexual abuse. The Auditor inquired to each inmate, after reporting the incident, did the facility allow him to contact anyone. The inmate informed the Auditor that the facility contract Medical and Mental Health staff provided each inmate with a FDC Sexual Awareness Brochure, which contained the contact information for the Sexual Assault Assistance Program of the Treasure Coast.

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

115.54	Third-party reporting
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1487 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 515 1364 548">Florida Department of Corrections Inmate Orientation Handbook (multiple languages)</p> <p data-bbox="252 586 1276 665">Florida Department of Corrections Website http://www.dc.state.fl.us/PREA/index.html</p> <p data-bbox="252 703 853 736">PREA Informational Poster (English / Spanish)</p> <p data-bbox="252 851 598 884">Interviews conducted with:</p> <p data-bbox="252 922 614 956">Random sample of Inmates</p> <p data-bbox="252 1070 641 1104">On-site Review Observations:</p> <p data-bbox="252 1142 619 1176">PREA informational signage</p> <p data-bbox="252 1290 1481 1456">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff.</p> <p data-bbox="252 1570 1487 1736">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmates may report incidents of sexual abuse, sexual battery, or staff misconduct by having a family member, friend, or other member of the public submit a third-party grievance.</p> <p data-bbox="252 1850 1476 2094">During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted. These PREA bulletins are posted in multiple languages, located near the phones banks inside every dormitory, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display reporting instructions to include telling a family member or friend can file a third-party grievance via the agency’s online complaint form on the agency website.</p>

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

Inmate from every housing dormitory and of various diversities were interviewed. Every inmate interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates also acknowledged the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

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

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

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

115.61	Staff and agency reporting duties
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1485 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 521 1474 593">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct</i></p> <p data-bbox="252 779 596 813">Interviews conducted with:</p> <p data-bbox="252 857 568 891">Random sample of Staff</p> <p data-bbox="252 936 628 969">Medical / Mental Health Staff</p> <p data-bbox="252 1014 453 1048">Facility Warden</p> <p data-bbox="252 1149 1485 1310">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized.</p> <p data-bbox="252 1422 1485 1583">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to:</p> <ul data-bbox="300 1653 1485 2072" style="list-style-type: none"> • Taking all reports concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment seriously; • Initiating immediate reporting of alleged sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment to the Office of the Inspector General; • Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment; • Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse, sexual harassment, or retaliation.

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

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

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

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

During the on-site phase of the audit, the Auditor conducted interviews with four Medical and Mental Health Staff regarding responsibilities to disclose to inmates the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Each Medical and Mental Health Staff member articulated in detail step-by-step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Each Medical and Mental Health Staff member acknowledged disclosing the confidentiality limitation prior to the initiation of services with any inmate. The Auditor inquired if any inmates had reported an incident of sexual abuse or harassment during the past 12 months to them and all indicated they had not received such reports.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired how Okeechobee C. I. responds when an allegation of sexual abuse or sexual harassment is made by someone under the age of 18 or someone who is considered vulnerable adult under state law. The Facility Warden explained that Okeechobee C. I. does

not house inmates under the age of 18 nor inmates who are considered vulnerable adults.

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

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

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Facility Warden</p> <p>Random sample of Staff</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized. Security / safety concerns will be immediately addressed by the Shift Supervisor and s/he will take the necessary steps to ensure the security / safety of the inmate.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to:</p> <ul style="list-style-type: none"> • Taking all reports concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment seriously; • Initiating immediate reporting of alleged sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment to the Office of the Inspector General; • Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual

harassment;

- Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an incident of sexual abuse, sexual harassment, or retaliation.

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

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

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

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

115.63	Reporting to other confinement facilities
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1487 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 660 598 694">Interviews conducted with:</p> <p data-bbox="252 734 427 768">Agency Head</p> <p data-bbox="252 808 454 842">Facility Warden</p> <p data-bbox="252 1025 1487 1238">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states if staff at a receiving institution receives information that sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment occurred at another institution, the receiving institutions Warden shall notify the sending institutions Warden within 72 hours of receiving the allegation. The notification shall be documented on a DC6-210.</p> <p data-bbox="252 1346 1487 1559">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the receiving institution, where the allegation is reported will be responsible for contacting Emergency Action Center (EAC), completing a DC6-210, and entering the appropriate information into Management Information Notes System (MINS) for appropriate handling.</p> <p data-bbox="252 1666 1476 1789">In the twelve months prior to the audit, Okeechobee C. I. reported receiving no allegations of sexual abuse from another facility and no allegations were received from an Okeechobee C. I. inmate alleging sexual abuse while confined at another facility.</p> <p data-bbox="252 1897 1481 2154">During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the facility. The Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notifies the Office of the Inspector General, if necessary, and the Emergency Action Center. If the time of the alleged occurrence were recent, Okeechobee C. I.</p>

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

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

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

115.64	Staff first responder duties
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1487 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 515 1114 548">Florida Department of Corrections Staff PREA Training Curriculum</p> <p data-bbox="252 586 1375 620">Florida Department of Corrections Okeechobee C. I. Training Roster / Staff Signatures</p> <p data-bbox="252 810 598 844">Interviews conducted with:</p> <p data-bbox="252 882 917 916">Security Staff / Non-Security Staff First Responders</p> <p data-bbox="252 954 566 987">Random sample of Staff</p> <p data-bbox="252 1025 742 1059">Inmates who reported a sexual abuse</p> <p data-bbox="252 1249 1471 1411">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years.</p> <p data-bbox="252 1527 1487 1644">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states upon learning of an inmate sexual abuse or sexual battery allegation or incident, the first security staff member to respond to the report shall be required to:</p> <ul data-bbox="300 1715 1476 2132" style="list-style-type: none"> • Separate the alleged victim and abuser; • Preserve and protect any potential crime scene until appropriate steps can be taken to collect evidence; • If the alleged abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating; • If the alleged abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged abuser not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth,

changing clothes, urinating, defecating, drinking or eating;

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

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

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment; eight of the twenty-six were allegations of sexual harassment and the remaining eighteen allegations were sexual abuse. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted targeted interviews with two inmates who reported an incident of sexual abuse. The Auditor inquired to each, after reporting the incident, how did the facility respond and what did staff do when they first arrived to the scene. Both inmates informed the Auditor that staff responded quickly, immediately removed him from the housing area, inquired to each inmate if he suffered any injuries, and escorted him inmate to medical and mental health.

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

115.65	Coordinated response
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 400 1398 434">Florida Department of Corrections <i>Okeechobee C. I. PREA Coordinated Response Plan</i></p> <p data-bbox="252 546 596 580">Interviews conducted with:</p> <p data-bbox="252 620 453 654">Facility Warden</p> <p data-bbox="252 837 1461 1128">Florida Department of Corrections <i>Okeechobee C. I. PREA Coordinated Response Plan</i> outlines the facility’s written plan to coordinate actions taken in response to an incident of sexual abuse. Any employee who has knowledge of or receives information, written or verbal (first hand or third party) regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor or the Chief of Security, who will then take immediate steps to evaluate the inmate’s concern/allegation.</p> <p data-bbox="252 1240 1474 1364">The authority notified will ensure proper medical treatment (if applicable) and the safety of the inmate by means provided in Rule 33-602.22, F.A.C., <i>Administrative Confinement</i>, if applicable.</p> <p data-bbox="252 1476 1485 1554">Upon learning of an allegation that an inmate was sexually abuse or sexually battered, the first security staff member to respond to the report shall be required to:</p> <ol data-bbox="293 1621 1474 2125" style="list-style-type: none"> 1. Separate the alleged victim and abuser; 2. Ensure all victims and other injured persons are provided appropriate First Aid & Emergency Medical Services, as appropriate; 3. Preserve & protect any crime scene until appropriate steps can be taken to collect any evidence; 4. If the abuse occurred within a time period that still allows for the collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy physical evidence, including as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating; 5. If the First Responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff; 6. Any inmate who alleges sexual battery shall be given a copy of Form N11-120 and

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

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

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

The Shift Supervisor or the Chief of Security shall ensure:

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

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

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

Following the forensic medical examination (or after the inmate is escorted to medical for

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

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

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

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

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

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

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

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Agreement State of Florida and the Florida Police Benevolent Association, <i>Security Services Bargaining Unit</i></p> <p>Interviews conducted with:</p> <p>Agency Head</p> <p>Florida Department of Corrections has a collective bargaining agreement with the Florida Police Benevolent Association (PBA). The PBA is the representative for the purposes of collective bargaining with respect to wages, hours, and terms and conditions of employment for all employees included in the Security Services Bargaining Unit.</p> <p>The Security Services Bargaining Unit includes all employees, non-professional, and professional, certified under Florida Statute Chapter 943, whose primary duties involve the direct care, custody, and control of persons confined in or supervised by the Department's Office of Community Corrections, Probation, and Parole Services.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding collective bargaining agreements the agency has entered into or renewed since August 20, 2012. The Agency Head confirmed to the Auditor, the Florida Department of Corrections has a collective bargaining agreement with the Police Benevolence Association (PBA) since December 2016, which represents Correctional Officer and Probation Officer staff. Prior to the PBA, the Department had an agreement with the Teamsters Local 2011.</p> <p>Additionally, the Agency Head explained that the Department is authorized to dismiss or suspend a permanent status career service employee for any cause noted in Chapter 110.277 of the Florida Administrative Code. Such cause includes poor performance, negligence, insubordination, inefficiency, or inability to perform assigned duties, violation of law or agency rules, conduct unbecoming a public employee, misconduct, habitual drug use and any conviction of any crime.</p> <p>The Agency Head also explained that the Department does not have permanent post assignments nor does it allow posts to be "bid" out. Staff members are assigned to posts prior</p>

to the commencement of the shift by their shift supervisor. Staff members can be relocated to numerous posts, including posts that do not allow for contact with inmates. Because the Department is so large, staff and inmates may be relocated to alleviate any problems.

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

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

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

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

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment; eight of the twenty-six were allegations of sexual harassment and the remaining eighteen allegations were sexual abuse. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted targeted interviews with two inmates in custody that reported an incident of sexual abuse. The Auditor inquired to each inmate if he feel protected against possible revenge from staff or inmates for reporting an incident of sexual abuse. Both inmates acknowledged feeling safe as well as described the monthly meetings with staff (retaliation monitoring); however, one inmate that acknowledged feeling safe, also confirmed to the Auditor he preferred to remain in his current assignment of Protective Management in lieu of being placed in General Population. Additionally, neither inmate expressed fear or retaliation to the Auditor for reporting but each inmate explained to the Auditor that he could go directly to a staff member if he ever felt threatened or if an issue arises.

Additionally, during the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor where there any inmates placed in segregated housing due to risk of sexual victimization. Therefore, inmates in this targeted category were not interviewed.

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

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

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

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

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

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>Staff who supervise inmates in Segregated Housing</p> <p>Inmates in Segregated Housing (for risk of SV/who allege to have suffered SA)</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmates perceived to be vulnerable will be housed and given work/program assignments consistent with custody level and medical status. Inmates at high risk of victimization or who have alleged sexual abuse, will not be segregated involuntarily unless an assessment of all other available alternatives has been made and it is determined that there are not available alternative means of separation from likely abusers.</p> <p>During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmates placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an inmate has restrictions placed on him it would be a result of their behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.</p> <p>During the 12 months prior to the audit, the facility reported there were no inmates who reported sexual abuse, being assigned to involuntary segregating housing. During the on-site phase of the audit, the Auditor reviewed twenty-three administrative investigations and three criminal investigations and determined out of the twenty-six inmates who reported sexual</p>

abuse or sexual harassment six inmates were placed into involuntary segregated housing without documentation justifying the placement. Five of the six inmates who were placed in involuntary segregated housing either were released from custody with the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview. The Auditor was able to interview one of the inmates placed in involuntary segregated housing during the onsite phase of the audit and discovered the inmate requested Protective Management while waiting on a transfer request approval, however the investigative file initially did not have the documentation notating such until the Auditor requested it during the on-site file review. The facility could not provide the required documentation for the remaining five inmates who were placed in involuntary segregated housing (after reporting sexual abuse).

During the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor where there any inmates placed in segregated housing due to risk of sexual victimization. During the on-site phase of the audit, the Auditor reviewed twenty-six investigative case files and found each file contained documentation of retaliation monitoring with inmate signatures notating no issues or concerns. Therefore, inmates in this targeted category were not interviewed.

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

Upon review of the policy and documentation provided, review of investigative files during the on-site phase, the Auditor determined through evidence provided, Okeechobee C. I. has a policy governing inmates who report a sexual abuse shall not be placed in segregated housing unless an assessment of all other alternatives has been made. If it is determined, there are no other available alternative means of separation from likely abusers; such placement in involuntary segregated housing would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction. Provision (a) in this particular standard also requires the facility to document a statement of the basis for the facility's concern for the inmate's safety and the reason(s) why alternative means of separation could not be arranged.

During the on-site phase of the audit, the the Auditor's initial review of the investigative files, showed the facility did not complete the required documentation for six inmates who reported an incident of sexual abuse and were placed in involuntary segregated housing; therefore, the facility was found non-compliant in the preliminary report.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for ensuring such documentation is completed. Training consisted of reviewing agency policy, requirements of the PREA Standard, and proper documentation of agency forms (DC6-2084 and IM02 Entry). The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided the Auditor with documentation verifying the required agency forms (DC6-2084 and IM02 Entry) were completed accurately and completely and in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now in compliance with the provisions of this standard.

115.71	Criminal and administrative agency investigations
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1474 477">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 521 1474 593">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i></p> <p data-bbox="252 638 1139 672">Investigative Case files (26) – Sexual abuse and sexual harassment</p> <p data-bbox="252 853 596 887">Interviews conducted with:</p> <p data-bbox="252 931 485 965">Investigative Staff</p> <p data-bbox="252 1144 641 1178">On-site Review Observations:</p> <p data-bbox="252 1223 421 1256">Training files</p> <p data-bbox="252 1368 1474 1574">Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states any knowledge suspicion or information regarding sexual abuse or sexual harassment shall be reported immediately. All allegations of sexual abuse or sexual harassment will be investigated promptly, thoroughly, and objectively including third party and anonymous reports.</p> <p data-bbox="252 1686 1474 1892">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states Inspectors shall receive specialized training and shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for prosecution referral.</p> <p data-bbox="252 2004 1474 2121">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> the department shall maintain documentation that Inspectors have completed the required specialized training in conducting sexual abuse</p>

investigations. Training documentation shall be maintained by the Bureau of Professional Development and Training.

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

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

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

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

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

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

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

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

According to the information provided in the PAQ (§115.22(a)-2), during the past 12 months, Okeechobee C. I. reported twenty-two allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually twenty-six. During the on-site phase of the audit, the Auditor met with the PREA Compliance Manager and the staff member tasked with entering the information into the PAQ to clarify the discrepancy. After discussion, the reported number (22) is incorrect and for the purposes of this audit, the total number of investigations during the audit period are twenty-six. The four additional cases were opened after the Staff Member submitted the PAQ into the Online Audit System (OAS).

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

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

The twenty-three allegations included eight sexual harassment allegations and eighteen

sexual abuse allegations. The eight sexual harassment allegations included three inmate-on-inmate allegations and five staff-on-inmate allegations. The three inmate-on-inmate sexual harassment allegations include one closed as unsubstantiated and two closed as unfounded. The five staff-on-inmate sexual harassment allegations include three closed as unfounded and two cases pending a final disposition with the Office of the Inspector General.

The eighteen sexual abuse allegations include eight inmate-on-inmate allegations and ten staff-on-inmate. The eight inmate-on-inmate allegations include three closed as unsubstantiated, two closed as unfounded, and three cases pending a final disposition with the Office of the Inspector General. The ten staff-on-inmate allegations include two closed as unsubstantiated, two closed as unfounded, and six cases pending a final disposition with the Office of the Inspector General.

The Auditor reviewed twenty-three administrative investigations and three criminal investigations. All of these cases were selected and reviewed based upon the outcome and the Auditor's requirement to review all of the required steps and processes to verify compliance with multiple PREA Standards. Upon completion of reviewing all case files, the Auditor determined that the facility (to include but not limited to Inspectors, Staff First Responders, Medical and Mental Health, PREA Compliance Manger, Supervisory Staff, etc.) followed the required steps and processes for all reported allegations. The Auditor's review included the pending eleven sexual harassment and sexual abuse investigations and found they also met the above criteria, with the exception of a final disposition from the OIG. At the time of the Auditor's review, there was one case referred for prosecution.

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

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

115.72	Evidentiary standard for administrative investigations
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1471 477">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 589 596 622">Interviews conducted with:</p> <p data-bbox="252 667 485 701">Investigative Staff</p> <p data-bbox="252 813 1471 974">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.</p> <p data-bbox="252 1086 1471 1292">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a parallel administrative investigation.</p> <p data-bbox="252 1404 1471 1865">During the on-site phase of the audit, the Auditor conducted an interview an Inspector assigned to the Office of the Attorney General's office. The Inspector provided the Auditor with a complete overview of the investigative process to include verifying specialized training credentials. The Inspector articulated the investigative process beginning with initial notification, investigation of the allegation, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity, and criteria required for administrative action and prosecution referrals. The Auditor inquired to the Inspector what standard of evidence is required to substantiate allegations of sexual abuse or sexual harassment. The Inspector explained that the agency should impose no standard higher than a preponderance of the evidence.</p> <p data-bbox="252 1977 1471 2094">Upon review of the policy and upon completion of the interview with staff, Okeechobee C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.73	Reporting to inmates
	<p data-bbox="252 170 895 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 400 1474 479">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i></p> <p data-bbox="252 517 1485 595">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 633 1469 712">Florida Department of Corrections PREA Administrative and Criminal Investigative Case Final Notifications</p> <p data-bbox="252 750 1139 784">Investigative Case files (26) – Sexual abuse and sexual harassment</p> <p data-bbox="252 898 596 931">Interviews conducted with:</p> <p data-bbox="252 969 485 1003">Investigative Staff</p> <p data-bbox="252 1041 453 1075">Facility Warden</p> <p data-bbox="252 1189 1477 1357">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states at the conclusion of any sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism investigation, the Inspector shall make appropriate notifications and follow-up notifications.</p> <p data-bbox="252 1462 1474 1720">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the case Inspector shall notice any PREA victim inmate if an allegation against a staff member for sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism (administrative or criminal) is exonerated, sustained, partially sustained, not sustained, unfounded, closed by arrest, exceptionally cleared or placed in open-active status.</p> <p data-bbox="252 1825 1477 2029">Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the case Inspector or designee shall notice any victim inmate when the department learns the alleged abuser has been indicted on a charge related to sexual abuse or when the alleged abuser was convicted on a charge related to sexual abuse.</p>

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

According to the information provided in the PAQ (§115.22(a)-2), during the past 12 months, Okeechobee C. I. reported twenty-two allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually twenty-six. During the on-site phase of the audit, the Auditor met with the PREA Compliance Manager and the staff member tasked with entering the information into the PAQ to clarify the discrepancy. After discussion, the reported number (22) is incorrect and for the purposes of this audit, the total number of investigations during the audit period are twenty-six. The four additional cases were opened after the Staff Member submitted the PAQ into the Online Audit System (OAS).

During the on-site phase of the audit, the Auditor reviewed administrative and criminal investigative case files from the 12 months prior to the audit. The fifteen investigative case files that were closed with a final disposition contained an inmate notification form documenting the outcome of the case (substantiated, unsubstantiated, or unfounded) with the signature of the inmate documented on the notification.

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

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an inmate who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that the Office of the Inspector General notifies the inmate of an outcome in all investigations completed by the OIG. For inmate-on-inmate sexual harassment, Security Staff completes the notifications and obtains a signed DC6-2080 form to document the notification.

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

115.76	Disciplinary sanctions for staff
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 406 358">Documents:</p> <p data-bbox="252 392 1236 436">Florida Administrative Code Rule 33-208.003, <i>Range of Disciplinary Actions</i></p> <p data-bbox="252 470 1460 515">Florida Administrative Code Rule 60L-36.005, <i>Conduct of Employees- Disciplinary Standards</i></p> <p data-bbox="252 548 1420 593">Florida Department of Corrections Procedure 208.039, <i>Employee Counseling & Discipline</i></p> <p data-bbox="252 694 598 728">Interviews conducted with:</p> <p data-bbox="252 761 774 795">Administrative (Human Resources) Staff</p> <p data-bbox="252 907 1468 1075">Florida Department of Corrections Procedure 208.039, <i>Employee Counseling & Discipline</i> states employees who fail to uphold the Department’s policy on an anti-harassment work environment to include sexual harassment, whether the employee committed, failed to report, or to have falsely reported any form of harassment in the workplace is subject to termination.</p> <p data-bbox="252 1187 1460 1523">Florida Administrative Code Rule 60L-36.005, <i>Conduct of Employees- Disciplinary Standards</i> states employees shall abide by the law and applicable rules and policies and procedures, including those of the employing agency and the rules of the State Personnel System. All employees are subject to Part III of Chapter 112, Florida Statutes, and governing standard of conduct, which agencies shall make available to employees. An agency may determine that an employee has violated the law even if the violation has not resulted in arrest or conviction. Employees shall abide by both the criminal law, for example drug laws, and the civil law, for example, laws prohibiting sexual harassment and employment discrimination.</p> <p data-bbox="252 1635 1468 1803">Florida Department of Corrections notifies the Criminal Justice Services Training Center through the Florida Department of Law Enforcement when criminal violations of sexual abuse or sexual harassment are committed by staff. Policy requires notifications to be made within 45 days after the violation.</p> <p data-bbox="252 1915 1444 2072">The facility reported one staff violation of the agency’s sexual assault, sexual abuse, sexual harassment or sexual misconduct policies during the 12 months prior to the audit. The staff member who violated agency sexual abuse or sexual harassment policies resigned prior to termination.</p>

During the on-site phase of the audit, the Auditor conducted an interview with Administrative / HR Staff Member who confirmed that Okeechobee C. I. had one staff member violated (and resigned prior to termination) the agency's policy against sexual assault, sexual abuse, sexual harassment, or sexual misconduct during the past 12 months.

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

115.77	Corrective action for contractors and volunteers
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 400 1485 479">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 517 1270 551">Florida Department of Corrections Procedure 205.002, <i>Contract Management</i></p> <p data-bbox="252 663 596 696">Interviews conducted with:</p> <p data-bbox="252 736 453 770">Facility Warden</p> <p data-bbox="252 882 1485 1084">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the institution shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities as it related policies via the Staff Development and Training lesson plan Prison Rape Elimination Act Training for Interns, Volunteers, and Contractors.</p> <p data-bbox="252 1200 1485 1357">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states contractors or volunteers that engage in sexual abuse, sexual battery, or sexual harassment and found guilty will be disciplined up to and including termination of contract and/or prohibition from working or volunteering for the Department.</p> <p data-bbox="252 1473 1469 1809">Florida Department of Corrections Procedure 205.002, <i>Contract Management</i> states background check clearances for contract/subcontract staff prior to employment (FCIC/NCIC) and shall receive clearance prior to entering an institution or facility. Documentation may be maintained electronically or hard copy. All new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include language to ensure compliance with 28 C.F.R. Part 115. Any contractor failing to comply with the Department’s PREA policies and procedures and/or Federal Rule 28 C.F. R. Part 115 is termination for cause.</p> <p data-bbox="252 1921 1449 2045">The facility reported there have been no contractor or volunteer violations or terminations of the agency’s sexual assault, sexual abuse, sexual harassment or sexual misconduct polices during the 12 months prior to the audit.</p>

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

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

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Florida Administrative Code Rule 33-601.301, <i>Inmate Discipline</i></p> <p>Florida Administrative Code Rule 33-601.800, <i>Close Management</i></p> <p>Florida Administrative Code Rule 33-601.314, <i>Rules of Prohibited Conduct</i></p> <p>Interviews conducted with:</p> <p>Facility Warden</p> <p>Medical / Mental Health Staff</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate(s) who have been found guilty of sexual abuse, sexual battery, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with “Disciplinary Confinement”, Rule 33-602.222, F.A.C., unless otherwise ordered through judicial or administrative process.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all inmates who have been found guilty of sexual abuse, sexual battery, or sexual harassment will be referred for Close Management review and/or issued a Disciplinary Report. All Case Management and Disciplinary Report reviews will take into consideration whether the mental disabilities or mental illness contributed to the abuser or perpetrator’s behavior.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states when it is determined that an inmate has filed a PREA report in bad faith, knowingly filed a false report, that inmate shall be subject to discipline.</p> <p>Florida Department of Corrections Inmate Handbook states there is no such thing as legal consensual sex in prison. Department of Corrections policy and law prohibit sexual behavior between inmates. Those who commit sexual assault/battery or sexual harassment face legal</p>

action. If necessary, the Department will seek outside criminal charges.

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

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

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

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i></p> <p>Florida Department of Corrections IBAS IRMS Assessments</p> <p>Interviews conducted with:</p> <p>Inmates who disclose Sexual Victimization at Risk Screening</p> <p>Staff responsible for Risk Screening</p> <p>On-site Review Observations:</p> <p>Inmate records of initial assessment & reassessment</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states if results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any information relating to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary, to inform treatment plans and security and management decisions. This also includes housing, bed, work, education, and program assignments, or as otherwise required by Federal, state, or local law.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the facility shall implement appropriate controls on the dissemination within the facility of responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information that may be used for exploitation by staff or other inmates.</p>

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

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

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

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

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

discloses prior sexual victimization or has perpetrated sexual abuse. In addition automatic notifications to Medical and Mental Health Staff, the program will automatically generate the next appointment (within 30 days) for each inmate.

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

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

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

In the 12 months prior to the audit, the facility reported there were nine inmates who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer. The Auditor reviewed inmate institutional files, which showed that of the nine inmates who disclosed sexual victimization at intake, four inmates received follow-up meetings with Mental Health within fourteen days of the intake screening. However, the remaining five inmates were seen by Mental Health after the required fourteen days of screening.

During the on-site visit, the Auditor requested and interviewed three inmates who reported sexual victimization during the intake process. All three inmates confirmed being offered the opportunity to meet with a medical or mental health care practitioner during the risk screening process. However, all three inmates confirmed the meeting with the mental health care practitioner occurred approximately a month to two months after the initial screening process.

Upon review of the policy, documentation, review of inmate institutional files, during the on-site phase, the Auditor determined through evidence provided, Okeechobee C. I. has a policy stating if an inmate discloses prior sexual victimization during the screening process, the

inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening. Provision (a) of this standard also requires the facility to provide such meeting within 14 days of screening.

During the on-site of the audit phase, the Auditor's initial review of the inmate institutional records determined that four inmates did not receive the required follow-up meeting with Mental Health within the time requirements, therefore, the facility was found non-compliant in the preliminary report.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, completed training for Classification and Mental Health Staff. Training included review of the required documentation (Mental Health Sexual Risk Index) which automatically initiates the appointments with Mental Health. The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility ran a Mental Health Services 23 Report (ASI40 MHS 23) on a weekly basis for review and monitoring of inmates with a pending Mental Health evaluation. The facility provided the Auditor with weekly documentation, which verified all mental health evaluations were being completed in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now compliance with the provisions of this standard.

115.82	Access to emergency medical and mental health services
	<p data-bbox="252 168 896 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 523 280">Auditor Discussion</p> <p data-bbox="252 324 411 358">Documents:</p> <p data-bbox="252 398 1487 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 589 598 622">Interviews conducted with:</p> <p data-bbox="252 663 630 696">Medical / Mental Health Staff</p> <p data-bbox="252 736 751 770">Inmates who reported a Sexual Abuse</p> <p data-bbox="252 810 919 844">Security Staff / Non-Security Staff First Responders</p> <p data-bbox="252 1030 641 1064">On-site Review Observations:</p> <p data-bbox="252 1104 620 1137">Secondary Medical Records</p> <p data-bbox="252 1249 1487 1413">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.</p> <p data-bbox="252 1525 1487 1776">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.</p> <p data-bbox="252 1888 1487 2092">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate.</p>

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

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

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

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment; eight of the twenty-six were allegations of sexual harassment and the remaining eighteen allegations were sexual abuse. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted targeted interviews with two inmates in custody that reported an incident of sexual abuse. The Auditor inquired to each, after reporting the sexual abuse, did you see a medical or mental health staff member in a timely manner, and did anyone provide treatment or follow-up plans. Each inmate confirmed to the Auditor that immediately after reporting the incident they were seen by medical and mental health staff, each inmate had the opportunity to speak to the mental health staff member as well as each inmate was provided with follow-up services.

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

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p data-bbox="248 168 898 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="248 248 523 284">Auditor Discussion</p> <p data-bbox="248 329 411 365">Documents:</p> <p data-bbox="248 405 1485 479">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="248 519 1410 593">Florida Department of Corrections Health Services Bulletin 15.03.36, <i>Post Sexual Battery Medical Action</i></p> <p data-bbox="248 707 596 743">Interviews conducted with:</p> <p data-bbox="248 784 628 819">Medical / Mental Health Staff</p> <p data-bbox="248 860 751 896">Inmates who reported a Sexual Abuse</p> <p data-bbox="248 1003 1485 1205">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states if an SRI assessment or medical assessment indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate shall be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p data-bbox="248 1319 1485 1480">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.</p> <p data-bbox="248 1594 1485 1843">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.</p> <p data-bbox="248 1957 1485 2119">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.</p>

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

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

During the 12 months prior to the audit, Okeechobee C. I. reported twenty-six allegations of sexual abuse and sexual harassment; eight of the twenty-six were allegations of sexual harassment and the remaining eighteen allegations were sexual abuse. During the on-site phase of the audit, the Auditor was provided with an updated inmate roster, which provided documentation that two of the twenty-six inmates, who reported an allegation of sexual abuse or sexual harassment, were in custody at Okeechobee C. I. The facility provided the Auditor with documentation showing the remaining twenty-four inmates either were released from the custody of the Florida Department of Corrections or were transferred to another correctional facility and unavailable for an interview.

The Auditor conducted targeted interviews with two inmates in custody that reported an incident of sexual abuse. The Auditor inquired to each, after reporting the incident did you see a Medical or Mental Health staff member in a timely manner, and did anyone provide treatment or follow-up plans. Each inmate confirmed to the Auditor that immediately after reporting the incident they were seen by medical and mental health staff, each inmate had the opportunity to speak to the mental health staff member as well as each inmate was provided with follow-up services. The Auditor also inquired if each inmate was offered tests for sexually transmitted infections and if payment for any of the services provided were required. Each inmate confirmed receiving testing for sexually transmitted infections and all denied being charged for any medical treatment related to the incident.

Upon review of the policy, documentation, review of the twenty-six investigative files during the on-site phase, the Auditor determined through evidence provided, Okeechobee C. I. has a policy requiring facility staff complete and forward a Mental Health referral notification when an inmate reports an incident of sexual abuse. Provision (a) of this standard also requires the facility to provide a mental health evaluation for sexual abuse victims.

During the on-site phase of the audit, the Auditor's initial review of investigative files discovered that in the eighteen allegations of sexual abuse, eleven mental health referrals were not completed by facility staff, therefore, the facility was found non-compliant in the preliminary report.

A Corrective Action Plan was developed and agreed upon with the FDC PREA Coordinator and the facility. The corrective action period for Okeechobee C. I. commenced on December 21, 2020, and ended on March 31, 2021.

During the corrective action period, the facility completed additional training for all supervisory staff responsible for ensuring such documentation is completed. Training consisted of reviewing agency policy, requirements of the PREA Standard, and proper documentation of agency forms (DC4-529). The facility provided documentation of the training to include curriculum and signatures of attendance. Throughout the corrective action period, the facility provided the Auditor with documentation verifying the required agency forms (DC4-529) were completed accurately and completely and in accordance to agency policy and the requirements of the standard. Therefore, Okeechobee C. I. is now compliance with the provisions of this standard.

115.86	Sexual abuse incident reviews
	<p data-bbox="252 168 901 201">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 246 526 280">Auditor Discussion</p> <p data-bbox="252 324 406 358">Documents:</p> <p data-bbox="252 392 1492 481">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 515 1204 548">Florida Department of Corrections Sexual Abuse Incident Review Report</p> <p data-bbox="252 660 598 694">Interviews conducted with:</p> <p data-bbox="252 728 454 761">Facility Warden</p> <p data-bbox="252 806 542 840">Incident Review Team</p> <p data-bbox="252 952 1492 1153">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the institution shall conduct a sexual abuse incident review within 30 days of the conclusion of the investigation by completing the Sexual Abuse Incident Review/Facility Investigation Summary DC6-2076. This review team shall consist of the Assistant Warden, Chief of Security, and Classification Supervisor.</p> <p data-bbox="252 1265 1492 1512">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the review team will also obtain input via reports from line supervisors, investigators, and medical or mental health practitioners. The Sexual Abuse Incident Review Committee shall meet to assess the adequacy of staffing levels in the area where the incident happened, consider whether the incident/allegation was motivated by race, ethnicity, LGBTI identification, gang affiliation, or other group dynamics at the institution.</p> <p data-bbox="252 1624 1492 1825">The committee shall also examine the area the incident allegedly occurred to assess whether physical barriers or obstructions in the area may have enabled abuse, assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and on a monthly basis, prepare a report with recommendations for improvements and submit to the PREA Coordinator.</p> <p data-bbox="252 1948 1412 2072">During the pre-on-site phase of the audit, the Auditor reviewed <i>Sexual Abuse Incident Review/Facility Investigation Summary</i> provided by the facility. The reports contained the required elements of the PREA standard to include:</p>

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

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

According to the information provided in the PAQ (§115.86(a)-2), during the past 12 months, Okeechobee C. I. reported two criminal and/or administrative investigations of alleged sexual abuse (excluding unfounded cases) were completed at the facility and a sexual abuse incident review was completed within 30 days.

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

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the Sexual Abuse Incident Review (SAIR) process. The Facility Warden explained the SAIR Team includes the PREA Compliance Manager (Assistant Warden of Programs), Chief of Security, at least one Classification Supervisor, and the Facility Warden. The SAIR Team always seeks input from Inspectors, Line Staff, and Medical and Mental Health personnel. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained

how the SAIR Team uses the information obtain from the review to determine if changes need to be made to the physical plant, surveillance systems, policy and procedure or any other change that would improve the safety of the inmate population and prevent sexual abuse.

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

115.87	Data collection
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1485 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 521 1442 555">Florida Department of Corrections Survey of Sexual Victimization Summary Reports to DOJ</p> <p data-bbox="252 734 1485 987">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department’s efforts toward sexual abuse prevention, detection, and response policies, practices, and training.</p> <p data-bbox="252 1099 1485 1391">During the pre-on-site phase of the audit, the Auditor reviewed seven years of Survey of Sexual Violence Reports, five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html</p> <p data-bbox="252 1503 1477 1619">Upon review of the policy, Annual Reports, and SSV Reports, Okeechobee C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.</p>

115.88	Data review for corrective action
	<p data-bbox="252 170 896 203">Auditor Overall Determination: Meets Standard</p> <p data-bbox="252 248 523 282">Auditor Discussion</p> <p data-bbox="252 327 411 360">Documents:</p> <p data-bbox="252 405 1485 477">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p data-bbox="252 521 1422 593">Florida Department of Corrections Okeechobee C. I. 2019 PREA Facility Corrective Action Plan</p> <p data-bbox="252 705 596 739">Interviews conducted with:</p> <p data-bbox="252 784 617 817">PREA Compliance Manager</p> <p data-bbox="252 862 491 896">PREA Coordinator</p> <p data-bbox="252 940 427 974">Agency Head</p> <p data-bbox="252 1086 1485 1323">Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department’s efforts toward sexual abuse prevention, detection, and response policies, practices, and training.</p> <p data-bbox="252 1435 1461 1682">During the pre-on-site phase of the audit, the Auditor reviewed five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html</p> <p data-bbox="252 1794 1477 2085">During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the agency collects data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies. The PREA Compliance Manager confirmed the facility is responsible for compiling institution specific PREA data and preparing the Annual Corrective Action Plan for Okeechobee C. I.</p>

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

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

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

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Documents:</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i></p> <p>Interviews conducted with:</p> <p>PREA Coordinator</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states no employee, volunteer, or contractor may knowingly disclose any information pursuant a sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to any person other except as permitted by law. The release of any information identifying any PREA or other sexual battery or sexual abuse victims in the custody of the Department shall not be printed, published, or broadcasted unless a court determines that such information is no longer confidential.</p> <p>Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states case or investigation records including any criminal or administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years.</p> <p>During the pre-on-site phase of the audit, the Auditor reviewed seven years of Survey of Sexual Violence Reports, five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html</p> <p>During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data</p>

collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

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

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Florida Department of Corrections, Okeechobee Correctional Institution had its first PREA Audit conducted on August 13 – 14, 2014; the first year of the first three-year auditing cycle. The facility had its second PREA Audit conducted the week of October 16, 2017; the second year of the second three-year auditing cycle. This audit was the facility’s third audit and was conducted on November 3 - 6, 2020; the second year of the third three-year auditing cycle.</p> <p>The Auditor was provided access to and observed all areas of the facility and outside compound. The Auditor was permitted to request and receive copies of any relevant documents.</p> <p>The Auditor was permitted to conduct private interviews with inmates and staff. The Auditor verified the posting of the audit notifications in areas accessible and visible for inmates and staff. The Auditor verified through inmate and staff interviews that inmates and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p>

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Florida Department of Corrections publishes all PREA Audit Reports for all facilities within the FDC on the agency website. The reports are grouped according to the audit cycle year. Okeechobee C. I. has published the prior year PREA Audit Reports on the agency website. The Auditor reviewed the facility's first PREA Audit Report (August 13 – 14, 2014) for Okeechobee Correctional Institution. The second PREA Audit, conducted and completed in October 2017, was not available for review; the Florida Department of Corrections PREA Coordinator confirmed the unavailability of the report and provided the documentation posted on the agency's website.</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	yes

	adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	
	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.)	na
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	na
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
115.16 (a)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing?	yes
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual	yes

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to 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.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
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.)	na
	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.)	na
	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.)	na

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.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes

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

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) 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.)	na
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

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

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a “no” response does not impact overall compliance with this standard.)	no
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	yes
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	na
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. 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