PREA AUDIT REPORT ☐ INTERIM ■ FINAL

ADULT PRISONS & JAILS

NATIONAL PREA RESOURCE CENTER

Bureau of Justice Assistance
U.S. Department of Justice

Auditor Information			
Auditor name: Hubert L " Buddy" Kent			
Address: P.O. Box 515			
Email: auditorbuddykent@yahoo.com			
Telephone number: 850-509-1662			
Date of facility visit:			
Facility Information			
Facility name: Bay County Jail			
Facility physical address: 5700 Star Lane, Panama City, Florida 32404			
Facility mailing address: *(if different from above)*			
Facility telephone number: (850) 785-5245			
The facility is:	☐ Federal	☐ State	■ County
	☐ Military	☐ Municipal	☐ Private for profit
	☐ Private not for profit		
Facility type:	☐ Prison	■ Jail	
Name of facility's Chief Executive Officer: Rick Anglin			
Number of staff assigned to the facility in the last 12 months: 267			
Designed facility capacity: 1200			
Current population of facility: 1018			
Facility security levels/ inmate custody levels: High custody, Medium custody and Low custody			
Age range of the population: 15-75 years of age			
Name of PREA Compliance Manager: Alan Strunk	**Title:**	PREA Coordinator	
Email address: alan.strunk@bayso.org	**Telephone number:**	(850) 215-5614	
Agency Information			
Name of agency: Bay County Sheriffs Department			
Governing authority or parent agency: *(if applicable)*			
Physical address: 5700 Star Lane, Panama City, Florida			
Mailing address: *(if different from above)*			
Telephone number:			
Agency Chief Executive Officer			
Name: Tommy Ford	**Title:**	Sheriff	
Email address: tommy.ford@bayso.org	**Telephone number:**		
Agency-Wide PREA Coordinator			
Name: Alan Strunk	**Title:**	Safety Manager	
Email address: alan.strunk@bayso.org	**Telephone number:**	(850) 215-5614	

AUDIT FINDINGS

NARRATIVE

The PREA audit of the Bay County Jail Facility was conducted on November 8-10, 2016 by Hubert L. “Buddy” Kent, Certified PREA Auditor. Approximately four weeks prior to the audit, the auditor received the PREA questionnaire and additional documents on a disk by mail. This along with providing the information four weeks in advance of the audit enabled the audit to move forward very efficiently. One day prior to arrival for the audit, a listing of all inmates by housing assignment and a staff listing by shift assignments of staff currently working with inmates was requested. A list of all inmates currently housed at the facility that have had a PREA case. From these listings, one (1) inmate from each housing unit, one segregated inmate, one who reported sexual abuse or harassment and one listed as non-heterosexual. One inmate with limited English speaking proficiency was interviewed utilizing the language line. There was one youthful inmate interviewed. There are self-admitted gay/bisexual inmates and one trans-gender and no inter-sex inmates assigned to Bay County Jail. A total of twenty-three inmate interviews were conducted. Fourteen random staff interviews were conducted and included staff from all work shifts and all areas of the facilities. The Specialized Staff Interviews included fourteen (14) interviews for staff designated as: Intermediate/higher-level, Medical, Mental-Health, Contractor, Investigative, Screening for Risk of Victimization and Abusiveness, Supervisors in Segregation, Incident Review Team, Monitors Retaliation, First Responder Security, First Responder Non-Security, Intake Staff and a Volunteer. During the tour the auditor randomly spoke with fourteen staff and twenty-two inmates. There are eighty volunteers and two contractors approved to entry the facility daily.

The auditor contacted Just Detention International (JOI) in reference any information previously submitted by inmates at the Bay County Jail Facility and reviewed the Jail website prior to the audit. Bay County Jail PREA page lists: general information on PREA; agency zero tolerance policy; how to report; information on investigations; and where questions and inquiries can be forwarded to (PREA Coordinator phone and mailing address).

After a brief discussion about the audit, the team proceeded to tour the facility. The tour of the facility was lead by Warden Rick Anglin was conducted on November 8, 2016 from 9:00 am to 12:00 noon. Different areas of the facility was revisited on November 9-10, 2016. There is a total of 2 buildings on the facility grounds all under one roof. The design capacity for the facility is 1200. The population at the time of the audit for the facility is 1020. The average daily population for the facility for the previous 12 months was 1018. The age range of the inmates assigned to the facility is from 14 to 75 years of age. There have been 987 inmates assigned to Bay County Jail Facility during the previous twelve months for 72 hours or more. The average length of stay is three months to one year for the facility. The custody level of the inmate population is close to community. There is two hundred sixty-seven staff assigned. There have been twenty-two staff hired during the past twelve months. The areas toured were a total of twelve single cell housing units, nine multi occupancy cell housing units seven open bay dormitory housing units and various departments within the secured perimeter. One cell unit is utilized as segregation only. There are 46 cells housing ninety inmates.

Following the tour, the auditor began the interviews, review of investigations, checking of cameras, and random checks of personnel, medical, and training records. A total of fourteen random staff formally interviewed during the audit. Staff interviewed was well versed in their responsibilities in reporting sexual abuse and suspected sexual abuse. When questioned about evidence preservation, staff responses reflected the Bay County Jail policies and standard requirements. There were twenty three random selected inmate interviews. The auditor found the inmates were aware of PREA and the process for reporting PREA incidents.

The various departments toured were all housing units, Booking Intake, Classification, Food Service, Medical, Mental Health, Security and Segregation. Segregation cells are double cell for a total bed capacity of 170. The Inmates are placed into Administrative Segregation pending disciplinary charges, pending protection needs (short term, no long term) and pending investigation. Medical Unit is a walk in urgent care facility. Hospitalization care is provided at Bay Medical Center or Gulf Coast Hospital.

There were nine allegations of abuse at Bay County Jail. The auditor reviewed the files of all closed cases. Of the nine allegations, two staff sexual misconduct reported two closed as unfounded; six were inmate on inmate sexual abuse six closed three unfounded, three not sustained and two cases inmate sexual harassment two closed not sustained.

Key facility staff during the audit included Warden Rick Anglin and Alan Strunk, PREA Coordinator. There assistance with the audit is greatly appreciated.

When the on-site audit was completed, the auditor conducted an exit meeting. While the auditor could not give the facility a final finding, the auditor did provide a preliminary status of his findings. The auditor thanked Bay County Jail staff for their work and commitment to the Prison Rape Elimination Act.

DESCRIPTION OF FACILITY CHARACTERISTICS

The Bay County Jail Facility is under the direction of Bay County Sheriff's Offce. The facility is located at 5700 Star Lane, Panama City, Florida 32404. Major Rick Anglin is the Warden of the facility.

The facility is under one roof with two buildings. There are three points of egress into the facility. The booking area, visitor/staff entrance and vehicle sally port entrance. The first building was built in 2006 by Corrections Corporation 0f America. The second building was contracted and build for Bay County Sheriff's office in 2010. The design capacity of the facility is 1200. The count on the first day of the audit was 1020. The count breakdown is eight youthful inmates, two hundred thirteen female inmates and eight hundred seven male inmates. There are twelve single cell housing units. There are nine multiple occupancy cell housing units. There are seven open bay housing units. There are three pods designated for administrative and disciplinary segregation. The medical unit is a walk in Urgent care unit. Inmates in need of Hospitalization would be transferred to either Bay Medical Center or Gulf Coast Hospital.

There were 987 inmates admitted to the facility during the last twelve months. The age range of the population is 14-75. There were eight youthful inmates assigned to the facility at the time of the audit. All youthful inmates are housed separately from the adult population. There was a total of thirty-eight youthful inmates assigned during the previous twelve months. The average length of stay at the facility is from three months to twelve months.

The following are the Housing units with bed capacity.

Dorms
A-1 76 high security
A-2 76 high security
A-3 76 waiting transport to DC
A-4 76 Intake Dorm
C-1 48 Protection Unit
C-2 24 Observation
C-3 48 Male secure housing
C-4 48 Male special needs
C-5 4 youthful inmate single cells
C-6 4 youthful inmate single cells
E-2 156 Female Dorm
E-3 24 Life line and K9 program
E-4 40 Female intake and segregation
E-5 36 Female special needs
G-1 132 Male Dormitory
G-2 132 Male Dormitory
G-3 128 Male Dormitory Life Line and Faith Based
J-1 4 Female Segregation
J-2 14 Female Segregation

SUMMARY OF AUDIT FINDINGS

115.11 PREA Coordinator and Policy
115.31 Staff Training
115.41 Intake Process

Not applicable
115.12 Facility does not enter into contracts to house inmates.
115.66 Facility is an at work will work facility.

Number of standards exceeded: 3

Number of standards met: 38

Number of standards not met: 0

Number of standards not applicable: 2

Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator

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

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.

The agency has a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment. The policy outlines how it will implement the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy includes definitions of prohibited behaviors regarding sexual abuse and sexual harassment. The policy includes sanctions for those found to have participated in prohibited behaviors. The policy includes a description of agency strategies and responses to reduce and prevent sexual abuse and sexual harassment of inmates. The facility has designated a PREA compliance coordinator. The PREA Coordinator is designated to the facility safety manager. He reports directly to the Major for the facility.

The PREA Coordinator has trained staff all staff in all PREA related responsibilities.

Bay County Jail Procedure 403.000

Standard 115.12 Contracting with other entities for the confinement of inmates

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

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.

Not applicable-Bay County does not contract with any other agencies for the housing of inmates.

Standard 115.13 Supervision and monitoring

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

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.

The facility make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against abuse. Since August 20, 2012, the average daily number of inmates on which the staffing plan was predicated is 815. At least annually the facility in collaboration with the PREA Coordinator, reviews the staffing plan to see whether adjustments are needed to: The staffing plan; The deployment of monitoring technology; or the allocation of facility/agency resources to commit to the staffing plan to ensure compliance with the staffing. Anytime the staffing plan is not complied with documentation is forwarded to Chief of Security and Major. Review shows the staffing plan is not being complied with for short times due to call in or hospital trip. This was generally less than one hour.

The facility requires that intermediate-level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment. Logs show the rounds being made and documented on the housing log and master log. Video checks verity the rounds are being conducted.

Interviews with the Warden, Chief of Security, PREA Coordinator, Shift Supervisors and line staff confirm the unannounced rounds and staffing plan are being complied with.

Bay County Jail Procedure 403.000

Standard 115.14 Youthful inmates

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

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.

Policy 403.000 page 6 paragraph G Youthful inmates will not be placed in any housing unit within sight, sound, or physical contact with any adult inmate through the use of shared day room or other common space, shower area, or sleeping quarters. The Bay County Jail Facility has available housing units in C-5, C-6, B-Dorm and J-Dorm to house youthful inmates. These dorms and housing units provide sight and sound separation between youthful and adult offenders. The Jail Facility maintains sight, sound, and physical separation between youthful inmates and adult inmates in areas outside housing units. The Bay County Jail Facility maintains direct staff supervision in outside areas of normal housing units where direct sight, sound, or physical contact with adult inmates can be made.

Facility physical plant toured show no youthful inmates have sight, sound or physical contact with any adult inmate unless they in direct staff supervision. At no time during the previous twelve months have youthful inmates been placed in segregation to separate from adult inmates. Youthful inmates are permitted outdoor large muscle group exercise daily. Inmate recreation schedules reviewed showing daily outdoor exercise. Control room logs show youthful inmates out to exercise.

Policy and Procedure 403.000 Page 6 paragraph G.

Standard 115.15 Limits to cross-gender viewing and searches

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

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.

The Bay County Sheriff's Office Jail Division employees does not conduct cross-gender strip searches or cross-gender visual body cavity searches (anal or genital opening) except in exigent circumstances or when performed by a medical doctor. The Bay County Jail Facility does not permit cross-gender pat down searches of female inmates, absent exigent circumstances. The Facility does not restrict female inmates' access to regularly available programs or other out of cell opportunities based on the inability to perform cross-gender pat-down searches. There are no cross-gender strip searches and cross-gender visual body cavity searches conducted at the facility. Should a cross-gender pat-down searches of female inmates shall be documented on the search log. A incident report documenting the exigent circumstances would be submitted to the administration. Inmates are allowed to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing by camera). Staff announce "Male on the floor, or female on the floor" when an officer of the opposite gender enters an inmate's housing unit for the first time during their tour of duty; to inform inmates that an officer of the opposite gender will be working the floor. (knock, announce, enter) This announcement is documented in the jail daily log.

Staff is trained to Pat search, strip search/trans-gender - Inter sex inmates to includes and requires: A member of the same sex and in compliance with Florida Statute 901.211 searches inmates upon admission. A statement of search and an incident report will be completed indicating the action taken. The officer performing the pat search should be of the same sex as identified by the inmate on the incident report. The inmate can choose to have a male or female officer pat search different areas based on the anatomy of the inmate

Standard 115.16 Inmates with disabilities and inmates who are limited English proficient

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

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.

The facility has established procedures to provide inmates with limited English proficiency equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The facility ensures written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities, including inmates who have intellectual disabilities, limited reading skills, or who are blind or have low vision. For inmates with disabilities and inmates who are limited English proficient, the following procedures are established to provide disabled inmates equal opportunity to participate in or benefit from all aspects of the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. All inmate materials are in a format accessible to all inmates in accordance with Title II of the Americans with Disabilities Act, 42 U.S.C. Formats include, but not limited to: Interpreter services for the deaf or hard of hearing inmates; Interpreter services for non-English speaking inmates; Reading of the material by staff to inmates. The facility will not rely on inmate interpreters, inmate readers or other types of inmate assistants, except in limited circumstances, and the interpreter must be fully documented. Where an extended delay in obtaining, an effective interpreter could compromise the inmate's safety, the performance of first-response duties, or the investigation of the inmate's allegations. The following interpreter services have been cleared by court system for court certification:
a. Link Translations 877-272-5465
b. Default number: 850-209-0369
c. Hearing disabilities: 850-769-6890

Bay County Jail Procedure 403.000 Page 7 Section III Paragraph K-L

Standard 115.17 Hiring and promotion decisions

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

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.

The Bay County Jail Facility does not hire or promote anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution; 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 coercions, or if the victim did not consent or was unable to consent or refuse; Has been civilly or administratively adjudicated to have engaged 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.
The Bay County Jail Facility shall consider any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor, who may have contact with inmates. Before this Facility hires any new employees, who may have contact with inmates, investigators conduct a criminal background record check; The background is consistent with federal, state, and local law; the Facility investigator makes their best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during pending investigation of an allegation of sexual abuse. This Facility requires that a criminal background record check be completed before enlisting the services of any contractor who may have contact with inmates. Employee's must disclose any such misconduct. Any material omissions regarding such misconduct, or the provision or materially false information, are grounds for termination
During the previous twelve months, there were background checks completed on 50 new hires. The facility is connected to the LIVE II scan with Florida Department of Law Enforcement. Any arrest is reported to the facility the next business day. Complete Background checks are completed on all employees every 5 years. Driver License checks are completed annually

Standard 115.18 Upgrades to facilities and technologies

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

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.

The Bay County Sheriff's Office Jail Facility considers the effect of the design, acquisition, expansion or modification in reference to the Facility's ability to protect inmates from sexual abuse during any planned expansions, modifications, or video equipment updates to the Facility. When installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the Facility considers how such technology may enhance the agency's ability to protect inmates from sexual abuse.

The facility has added camera's and replaced camera's enhancing the facility's ability to protect the inmate population. The facility has two hundred seventy seven camera's within the facility.

Bay County Jail Procedure 403.000

Standard 115.21 Evidence protocol and forensic medical examinations

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

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.

Bay County Sheriff's Office investigators assigned to the Jail Facility are responsible for conducting administrative or criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). When conducting a sexual abuse investigations, Facility investigators follow the Sheriff's Office uniform evidence protocol. All victims of sexual abuse are offered access to forensic medical examinations. Such examinations are offered without financial cost to the victim. Forensic examinations are conducted at Gulf Coast Hospital or through the Gulf Coast Sexual Assault Program Nurse. Any urgent care will be performed on sight until transportation services have been set up and the inmate will be transported to local Gulf Coast hospital or Bay Medical Center.
The facility provides a qualified staff member from a community based organization or a qualified agency staff member Gulf Coast Sexual Assault Program.
If requested by the victim, a victim advocate, qualified agency staff member, or qualified community based organization staff member will accompany and support the victim through the forensic medical examination process and investigatory interviews to provide emotional support, crisis intervention, information, and referrals. The Hot-Line Number is 1-866-218-4738.

There were 2 SART exams conducted during the previous twelve months.

Standard 115.22 Policies to ensure referrals of allegations for investigations

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

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.

The Bay County Sheriff's Office ensures that an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment including inmate-on-inmate sexual abuse or staff sexual misconduct. This policy and any other regarding the referral of allegations of sexual abuse or sexual harassment for a criminal investigation is published on the agency website. All referrals of allegations of sexual abuse or sexual harassment for criminal investigations are documented. There were nine allegations of abuse at Bay County Jail. The auditor reviewed the files of all closed cases. Of the nine allegations, two staff sexual misconduct reported two closed as unfounded; six were inmate on inmate sexual abuse six closed three unfounded, three not sustained and two cases inmate sexual harassment two closed not sustained.

Standard 115.31 Employee training

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

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.

The Bay County Jail Facility trains all employees who have contact with inmates on the following matters: Agency's Zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures; The right of inmates to be free from sexual abuse and sexual harassment; The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and sexual harassment in confinement; The common reactions of sexual abuse and sexual harassment victims; How to detect and respond to signs of threatened and actual sexual abuse; How to avoid inappropriate relationships with inmates; How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, trans-gender, inter sex, or gender-nonconforming inmates; How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Each employee, regardless of his or her position, is trained as a first responder. Interviews of random staff and general questions asked during the tour clearly indicated staff understanding of all aspects of responding to allegations of sexual abuse. Training records, staff interviews and curriculum reviewed indicated that the staff at is trained. In the past 12 months, 267 of 267 employees assigned to the facility were trained on the PREA requirements. Employees sign and state that they understand the training they receive. Between annual trainings the facility provides employees who may have contact with inmates with information about current policies regarding sexual abuse and harassment during shift briefings.

Bay County Jail Procedure 403.000 Page 9-10 Section V Paragraph A

Standard 115.32 Volunteer and contractor training

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

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.

All volunteers and contractors, who have contact with inmates, are trained on their responsibilities under the facility's Prison Rape Elimination Act procedures. The type and level of training is based on the services they provide and level of contact they have with the inmates. All volunteers and contractors who have contact with inmates, are advised of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and be informed on how to report such incidents. A signed training document is on file in the volunteers personnel file and be maintained in the PREA Coordinators files. There are eighty volunteers receiving training in the previous twelve months.

Bay County Jail Procedure 403.000 Page 11 Section 2 B

Standard 115.33 Inmate education

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

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.

All inmates during intake process receive orientation explaining the facilities zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or harassment. There are three forms of educational awareness available to inmates on PREA: Pamphlets; Videos, and read and sign document provided with intake booking papers. Inmate PREA education is available in accessible formats for inmates including those who are: Limited English proficient, Visually impaired, Deaf, Limited in reading skills or Otherwise disabled. Inmates sign documentation of participation in the PREA education. Information provided included: inmate rights; how to report; what to expect after you report; and how to protect yourself against sexual assault. During the tour and interviews most inmates acknowledged the information being provided upon arrival and orientation. They definitely knew the agency zero tolerance policy; the difference between sexual abuse and sexual harassment; and that they have the right to be free from retaliation for reporting such incidents. The facility ensures that key information about the facility's PREA procedures are continuously updated and readily available or visible through posters, annual and refresher training, or other formats.

Bay County Jail Procedure 403.000 Page 12 Section III Paragraph C

Standard 115.34 Specialized training: Investigations

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

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.

In addition to the general training provided to all employees annually Bay County Jail Investigators who investigate allegations of sexual abuse are trained in conducting sexual abuse/assault investigations in confinement settings. The Bay County Jail Facility maintains documentation showing that investigators have completed specialized training. Investigators completed the NIC PREA Investigating Sexual Abuse in Confinement Setting: Advance Investigations. As part of the interview the investigators covered the techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings and the collection of sexual abuse evidence in the confinement setting. Both investigators explained the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Training records are maintained with the PREA Coordinator.

Bay County Jail Procedure 403.000 Page 12 Section III Paragraph D

Standard 115.35 Specialized training: Medical and mental health care

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

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.

Medical and mental health practitioners who work regularly at Bay County Jail Facility are trained. Interviews of medical and mental health staff demonstrated they understood: how to detect and assess signs of sexual abuse and sexual harassment; how to preserve physical evidence of sexual abuse; how to respond effectively and professionally to victims of sexual abuse and sexual harassment; and how and to whom to report allegations or suspicions of sexual abuse and sexual harassment. The facility medical staff do not conduct forensic examinations. Forensic exams are conducted at Bay Medical Center, Gulf Coast Hospital or Gulf Coast Sexual Assault Program. The number and percent of all medical and mental health care practitioners who work regularly at Bay County Jail Facility and have received training by the agency policy are fifteen medical staff and three mental staff and 100% respectively. There are fourteen part time staff that work on a PRN schedule. PREA training records are maintained in the PREA Coordinator's office.

Bay County Jail Procedure 403.000 Page 12 Section III Paragraph E

Standard 115.41 Screening for risk of victimization and abusiveness

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

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.

Bay County Jail policy 403.000 Section VI paragraph A requires screening upon admission (booking) for risk of sexual abuse victimization or sexual abusiveness toward others. This is accomplished within 72 hours of arrival and normally completed on the day of arrival. Upon admission to the facility, the medical staff and mental health ask the questions on the screening form. The screening form is completed prior to being escorted to housing area. The medical staff completes the assessment they ask: 1) if the inmate has a mental, physical, or developmental disability; (2) The age of the inmate; (3) the physical build of the inmate; (4) Whether the inmate has previously been incarcerated. (5) Whether the inmate's criminal history is exclusively nonviolent; (6) Whether the inmate has prior convictions for sex offenses against an adult or child;(7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, trans-gender, inter-sex, or gender nonconforming; (8) Whether the inmate has previously experienced sexual victimization; (9) the inmate's own perception of vulnerability; and (10) whether the inmate is detained solely for civil immigration purposes. The medical staff determines if the inmate is perceived to be gender nonconforming. Inmates may not be disciplined for refusing to answer any of the questions, or for not disclosing complete information.
Procedure 403 Section VI paragraph B also requires that the classification staff reassess each inmate's risk of victimization or abusiveness not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. Typically, this reassessment is done within 7-14 days of arrival. Any time new information is received a reassessment is completed. All information is placed in the Jail Management System. This information is restricted and only available to staff (Classification, Medical and Mental Health Staff) with a professional need to know. Policy requires that an inmate's risk level be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the

Standard 115.42 Use of screening information

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

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.

Information from the risk screening is used to determine housing, bed, work, education, and program assignments to prevent inmates with the high risk of being sexually victimized from those at the risk of being sexually abusive. The Bay County Jail Facility makes individualized determinations about how to ensure the safety of each inmate. The facility makes housing and program assignments for trans-gender or inter-sex inmates in the Facility on a case-by-case basis. The review team consist of the following or designee: Health Services Administrator or Mental Health Counselor, Chief of Security/Chief of Administration, Booking Supervisor/Classification Counselor, and PREA Coordinator. They review the vulnerability list on a daily basis.

Bay County Jail Procedure 403.000 Page 13 Section VI Paragraph B

Standard 115.43 Protective custody

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

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.

Inmates at high risk for sexual victimization will not be placed 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. Inmates placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. Restrictions to access to programs, privileges, education, or work opportunities, shall be documented. The opportunities that have been limited, the duration of the limitations, and the reasons for such limitations. Inmates in involuntary segregated housing will be reviewed at least every 30 days by Classification and the PREA Coordinator to determine whether there is a continuing need for separation from the general population.
The review is completed on a daily basis. The review team consist of the following or designee: Health Services Administrator or Mental Health Counselor, Chief of Security/Chief of Administration, Booking Supervisor/Classification Counselor, and PREA Coordinator.
There were no inmates placed in protective status for high risk of sexual victimization without an assessment of all available alternatives being made.

Bay County Jail Procedure 403.000 Page 13-14 Section VI Paragraph C

Standard 115.51 Inmate reporting

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

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.

The Bay County Sheriff's Office Jail Facility allows for internal reporting, by inmates to report privately to agency officials about Sexual abuse or sexual harassment or Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment. Staff neglect or violation of responsibilities that may have contributed to such incident are reported in the following ways: Verbal reporting; request forms, grievance forms; Rape Crisis Hot Line or to National Sexual Abuse Hot line. Bay County Jail Facility provides ways for inmates to report abuse or harassment to a public or private entity or office that is not part of the agency by: Bay County Rape Crisis Center 850-763-0706, National Hot line 1-800-656-4673 and Gulf Coast Sexual Assault Program 1-866-218-4738. Inmates detained solely for civil immigration purposes are provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security. Staff accept reports of sexual assault and sexual harassment made verbally, in writing, anonymously, and from third parties Staff are required to immediately document verbal reports on an incident report and forward to shift supervisor. The Bay County Sheriff's Office Jail Facility personnel can privately report sexual abuse and sexual harassment of inmates to their Supervisor or any other facility or departmental supervisor. Staff are informed of these procedures during annual in service training, policies and procedures, departmental meetings, on shift meetings and shift briefings. Lesson plans and staff sign in rosters were reviewed.

Bay County Jail Procedure 403.000 Page 14-15 Section VII Paragraph A

Standard 115.52 Exhaustion of administrative remedies

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

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.

The Bay County Jail Facility has an administrative procedure for dealing with inmate grievances regarding sexual abuse and sexual harassment. Agency policy allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time regardless of when the incident is alleged to have occurred. Inmates are not required to use an informal grievance process, or otherwise to attempt to resolve with staff, an alleged incident of sexual abuse. Inmates may submit a grievance alleging sexual abuse without submitting said grievance to the staff member who is the subject of the complaint. Any inmate grievance alleging sexual abuse shall not be referred to the staff member who is the subject of the complaint. Administration will issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. The Bay County Jail Facility procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. If the inmate declines to have third party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. Emergency grievances can be filed when substantial risk of imminent sexual abuse is detected. Initial response will be within 48 hours of grievance notification. Substantial risk grievances require final agency decision within 5 working days. The agency shall only discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith. There were three grievances filed during the previous twelve months. All were responded to within time frames. There was no emergency grievances filed.

Bay County Jail Procedure 403.000 Page 15 Section VII Paragraph B

Standard 115.53 Inmate access to outside confidential support services

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

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.

Bay County Jail provides 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 for local, state, or national victim advocacy or rape crisis organizations. The facility enables reasonable communication between inmates and victim organizations in as confidential a manner as possible.

The facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply to disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant federal, state, or local law.

Bay County Jail has a memorandum of understanding with Gulf Coast Sexual Assault Program, 310 East 11th Street, Panama City, Florida 32401 to provide outside victim services.

Bay County Procedure 403.000 Page 15-26.

Standard 115.54 Third-party reporting

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

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.

The facility has third party reporting of sexual abuse or sexual harassment. The facility has brochures and forms at visiting checkpoint for third party reporting and Bay County Jail website has a page for PREA with a contact number for questions and reporting. Web site is located on Bay County Sheriff's Office website, click on Jail Division, and at the bottom of the page is PREA. Information is also posted throughout the facility that provide the inmates a telephone number to make third party reports, along with numbers to tell family and friends to make third party reports. Interview of inmates demonstrated they knew how third party reporting could be accomplished. Family members or other individuals may report verbally or in writing any time they have knowledge or suspect an offender has been sexually abused, sexually harassed or requires protection. Inmates and staff interviewed were aware of third party reporting.

Bay County Jail Procedure 403.000 Page 16 Section VII Paragraph D

Standard 115.61 Staff and agency reporting duties

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

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.

Bay County Jail policies require all staff to report immediately any knowledge, suspicion, or information regarding an incident of sexual abuse or harassment; and for staff not to reveal any information related to a sexual abuse report to anyone other than extent necessary. The facility reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports, by the incident reporting system. Random interviews with staff revealed that staff is very aware of their responsibilities to report incidents of sexual abuse or harassment and know not to reveal any information about a sexual abuse incident to anyone other than to the extent necessary.

Bay County Procedure 403.000 Page 16 Section VIII Paragraph A

Standard 115.62 Agency protection duties

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

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.

When the Facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, staff shall take immediate action to protect the inmate. Ensure alleged inmate victim and alleged inmate aggressor are separated. Ensure alleged inmate victim is evaluated by Medical. Ensure alleged inmate aggressor is seen and evaluated by Medical. Prepare complete PREA Packet: PREA sexual assault checklist; Incident report; supporting documentation. Notify Administrative Duty Officer, PREA Coordinator, Facility Investigator and Medical. The PREA packet will be forwarded to the PREA Coordinator or designated individual, Investigator, or Chief of Security. All procedures in regards to the sexual assault complaint will be completed by the shift Supervisor receiving the complaint prior to going off duty.
When the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the inmate In the past twelve months, ten times the inmate was removed from population so the facility could determined that an inmate was subject to substantial risk of imminent sexual abuse. The facility made the determinations immediately of learning of the threat.

Bay County Jail Procedure 403.000 Page 16 Section VIII Paragraph B

Standard 115.63 Reporting to other confinement facilities

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

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.

Facility policy requires when a sexual abuse allegation that an inmate was sexually abused while confined at another facility, the Warden shall notify the Warden where the alleged abuse occurred within 72 hours after receiving the allegation. Interviews of the Warden, Chief of Security and PREA Compliance manager demonstrated they knew the procedures to follow. In the previous twelve months, one allegations was received during the intake process. In the previous 12 months, the no allegations of sexual abuse was received from other facilities.

Bay County Jail Procedure 403.000 Page 16 Section VIII Paragraph C

Standard 115.64 Staff first responder duties

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

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.

The facility has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report is required to separate the alleged victim and abuser; Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and 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, smoking, drinking, or eating. In the past 12 months, there were eleven allegations that an inmate was sexually abused: Of these allegations eleven times the first security staff member to respond to the report separated the alleged victim and abuser:
In the past 12 months, there were five allegations where staff were notified within a time period that still allowed for the collection of evidence as the first responder. The following were covered in the staff training curriculum: Separate the alleged victim and abuser; Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence; If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and/or 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, smoking, drinking, or eating. Staff training records were reviewed.

Standard 115.65 Coordinated response

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

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.

Bay County Jail has a coordinator response in place. The plan outlines what is to take place in response to an incident of sexual abuse among staff first responders, medical, and mental health practitioners, Inspectors, and facility leadership. Interviews with specialized staff confirmed they were knowledgeable about their individual and collaborative responsibilities.

Bay County Jail Procedure 403.000 Page 17 Section VIII Paragraph E

Standard 115.66 Preservation of ability to protect inmates from contact with abusers

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

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.

Not applicable Facility is a at will work facility. There is no collective bargaining agreements.

Standard 115.67 Agency protection against retaliation

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

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.

The facility procedure describes the policy and practice to be followed to ensure that there is no retaliation against any inmate or staff member who reported sexual abuse or sexual harassment. The facility has designated the PREA Coordinator with monitoring for possible retaliation. The facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. The coordinator monitors inmate retaliation by reviewing inmate disciplinary reports, housing, and or program status changes. The monitoring is completed in 30-60-90-day time frames. The chief of security assists in monitoring staff reviewing shift changes, performance reports, etc. Policy clearly states the coordinator will act promptly to remedy any retaliation. The facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. There were no reported incidents of retaliation occurring in the past 12 months.

Bay County Jail Procedure 403.000 Page 17 Section VIII Paragraph F

Standard 115.68 Post-allegation protective custody

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

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.

There were two inmates alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment. There were two inmates alleged to have suffered sexual abuse who were assigned to involuntary segregated housing in the past 12 months for longer than 30 days while awaiting alternative placement:
From a review of case files of inmates who allege to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months, there were two of case files that include a statement of the basis for facility's concern for the inmate's safety, and the reasons why alternative means of separation could not be arranged. If an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population.

Bay County Jail Procedure 403.000 Page 19 Section X Paragraph A

Standard 115.71 Criminal and administrative agency investigations

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

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.

All investigations into allegations of sexual abuse and sexual harassment will be done promptly, thoroughly, and objectively, including third-party and anonymous reports. The Bay County Sheriff's Office Jail Facility investigators have received special training in sexual abuse and sexual harassment. Investigators shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator. When the quality of evidence appears to support criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether criminal will be referred for prosecution. Administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse. Administrative Investigations are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. The Bay County Jail Facility retains all written reports pertaining to administrative or criminal investigations of alleged sexual assault or harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus 5 years.

Bay County Jail Procedure 403.000 Page 18 Section IX Paragraph A-C

Standard 115.72 Evidentiary standard for administrative investigations

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

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.

Facility Procedure indicates that only a preponderance of evidence is the standard when determining allegations of sexual abuse or sexual harassment is substantiated. During the interview with the Inspector he indicated that this is the threshold used by both inspectors in their investigations.

Bay County Jail Procedure 403.000 Page 18 Section IX Paragraph D

Standard 115.73 Reporting to inmates

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

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.

The auditor reviewed completed investigative files at Bay County Jail Facility. In each case file was documentation of notification where the inmate was informed of the outcome of the investigations whether it had been determined to be substantiated, unsubstantiated, or unfounded. If there were any substantiated allegations of sexual abuse by a staff member, the inmate would be informed in writing to include whenever: the staff member is no longer posted within the inmate's unit; the staff member is no longer employed at the facility; the department learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility. If the inmate was alleged to have been sexually abused by another inmate, the Investigator informs the alleged victim whenever: the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or been convicted on a charge related to sexual abuse within the facility. There were no allegations investigated by an outside agency. In the past 12 months, there was nine notifications with documentation to inmates that were provided pursuant to this standard.

Bay County Jail Procedure 403.000 Page 18 Section IX Paragraph E

Standard 115.76 Disciplinary sanctions for staff

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

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.

Staff is subject to disciplinary sanctions up to and including termination for violating sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who has engaged in sexual abuse. Disciplinary sanctions for violations of policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. 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, are reported to law enforcement agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. Certified Officers are reported to the Florida Department of Law Enforcement Criminal Justice and Training Standards. There was no reported violations of facility policy during the previous twelve months.

Bay County Jail Procedure 403.000 Page 19 Section X Paragraph A

Standard 115.77 Corrective action for contractors and volunteers

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

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.

The Bay County Jail Facility requires that any contractor or volunteer who engages in sexual abuse be reported unless the activity was clearly not criminal. Any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates. The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of facility sexual abuse or sexual harassment policies by a contractor or volunteer. There were no reported violations of sexual abuse policy by any contractor or volunteer.

Bay County Jail Procedure 403.000 Page 19 Section X Paragraph B

Standard 115.78 Disciplinary sanctions for inmates

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

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.

Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse. Inmates are subject to disciplinary sanctions pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on- inmate sexual abuse. The Bay County Jail Facility does not offer therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for abuse. The Facility disciplines inmates for sexual conduct with staff only upon finding that the staff member did not consent to such contact. The Facility prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation. The Bay County Sheriff's Office Jail Facility prohibits all sexual activity between inmates. Although all sexual activity is prohibited between inmates, the Facility only deems such activity to constitute sexual abuse if it determines that the activity is coerced. There were two administrative findings and one criminal finding of inmate on inmate abuse in the previous twelve months.

Bay County Jail Procedure 403.000 Page 19 Section X Paragraph C

Standard 115.81 Medical and mental health screenings; history of sexual abuse

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

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.

All inmates who have disclosed any prior sexual victimization during a screening are offered a follow-up meeting within 14 days with a medical or mental health practitioner. Medical and mental health staff maintain medical records, nursing notes, secondary materials, documenting compliance with the standard. Information related to sexual victimization or abusiveness that occurred in an institutional setting is not limited to medical and mental health practitioners. The information shared with other staff is strictly limited to informing security and management decisions, including treatment plans, housing, bed, work, education, and program assignments, or as otherwise required by law. 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. Inmate victims of sexual abuse shall receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided. The provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis. Interviews with medical and mental health staff and record reviews verified services are provided. There were 26 reports of victimization during the previous twelve months.

Bay County Jail Procedure 403.000 Page 20-21 Section XI Paragraph A-G

Standard 115.82 Access to emergency medical and mental health services

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

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.

Inmate victims of sexual abuse while incarcerated are 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. Treatment services shall be provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The Bay County Jail Facility offers 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. Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, victims shall receive timely and comprehensive information about and timely access to, all lawful pregnancy-related medical services. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate.

Bay County Jail Procedure Page 21 Section XI Paragraph H-M

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

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

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.

The Bay County Jail Facility offers 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. Female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests. If pregnancy results from sexual abuse while incarcerated, victims shall receive timely and comprehensive information about and timely access to, all lawful pregnancy-related medical services. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. The standard was verified with interviews and records checks with medical and mental health staff.

83H The Bay County Jail Facility is a county jail facility. Section H is not applicable facility is not a prison.

Bay County Jail Procedure 403.000 Page Section XI J-N

Standard 115.86 Sexual abuse incident reviews

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

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.

The Bay County Jail Facility shall conduct a sexual abuse incident review at the conclusion of every sexual abuse incident review at the conclusion of every sexual abuse investigation, unless the allegation has been determined to be unfounded. Sexual abuse incident reviews will be conducted within 30 days of concluding the investigation. This was confirmed in interviews with the Warden and PREA Compliance Manager. The sexual abuse incident review team will include upper management officials and allow for input from line supervision, investigators, and medical or mental health staff. A report is prepared of its findings from the sexual abuse incident review with any recommendations for improvements and submit such report to the Major. The Facility implements the recommendations or documents the reason for not doing so. There were three incident reviews completed in the previous twelve months. The review team consist of the following or designee: Health Services Administrator or Mental Health Counselor, Chief of Security/Chief of Administration, Booking Supervisor/Classification Counselor, and PREA Coordinator.

Bay County Jail Procedure 403.000 Page 21 Section XII
Bay County Jail Procedure 403.000 Page 11 Section A.2.b

Standard 115.87 Data collection

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

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.

The Facility provided documents demonstrating data was being collected, aggregated and maintained. The department maintains reviews and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice. The facility aggregates the incident-based sexual abuse data at least annually.

Bay County Jail Procedure 403.000 Page 21-22 Section XIII

Standard 115.88 Data review for corrective action

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

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.

The Bay County Jail Facility reviews data collected and compile in order to assess and improve effectiveness of its sexual abuse prevention, detection, response policies, and training to include identifying problem areas, taking corrective action on an ongoing basis, preparing an annual report of its findings from its data review and any corrective actions for each facility, as well as the agency as a whole. The annual report includes a comparison of the current year's data and corrective actions with those from prior years.
The annual report provides an assessment of the agency's progress in addressing sexual abuse. The agency makes its annual report readily available to the public at least annually. The annual reports are approved by the Warden.

Bay County Jail Procedure 403.000 Page 22 Section XIV

Standard 115.89 Data storage, publication, and destruction

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

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.

Bay County Jail Facility ensures that incident-based and aggregate data are securely retained. Facility policy requires that aggregated sexual abuse data from facilities under its direct control be made readily available to the public at least annually through its website. Before making aggregated sexual abuse data publicly available, the department removes all personal identifiers. The facility maintains sexual abuse data for at least ten years. Up to date survey information is submitted and verified by the PREA Coordinator. In addition to keeping the paper documents according to retention schedule a retention folder is located on the computer.

Bay County Jail Procedure 403.000 Page 22 Section XV

AUDITOR CERTIFICATION

I certify that:

- ■ The contents of this report are accurate to the best of my knowledge.
- ■ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and
- ■ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

Hubert L. "Buddy" Kent — July 18, 2017

Auditor Signature — Date