

PREA Facility Audit Report: Final

Name of Facility: Bay County Jail

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/25/2022

Auditor Certification	
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.	☒
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	☒
Auditor Full Name as Signed: Robert Manville	Date of Signature: 10/25/2022
AUDITOR INFORMATION	
Auditor name:	Manville, Robert
Email:	robertmanville9@gmail.com
Start Date of On-Site Audit:	09/06/2022
End Date of On-Site Audit:	09/08/2022
FACILITY INFORMATION	
Facility name:	Bay County Jail
Facility physical address:	5700 Star Lane , Panama City , Florida - 32404
Facility mailing address:	
Primary Contact	
Name:	Alan Strunk
Email Address:	alan.strunk@bayso.org
Telephone Number:	850-896-1194
Warden/Jail Administrator/Sheriff/Director	
Name:	Rick Anglin, Major
Email Address:	rick.anglin@bayso.org
Telephone Number:	850-215-5146
Facility PREA Compliance Manager	
Name:	
Email Address:	
Telephone Number:	
Facility Health Service Administrator On-site	
Name:	Mike Medeiros
Email Address:	mike.medeiros@bayso.org

Telephone Number:		602-206-3355
Facility Characteristics		
Designed facility capacity:		1250
Current population of facility:		1274
Average daily population for the past 12 months:		1200
Has the facility been over capacity at any point in the past 12 months?		Yes
Which population(s) does the facility hold?		Both females and males
Age range of population:		18-65
Facility security levels/inmate custody levels:		Min/Med/High
Does the facility hold youthful inmates?		Yes
Number of staff currently employed at the facility who may have contact with inmates:		214
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:		17
Number of volunteers who have contact with inmates, currently authorized to enter the facility:		25
AGENCY INFORMATION		
Name of agency:	Bay County Sheriff's Office	
Governing authority or parent agency (if applicable):		
Physical Address:	3421 N Highway 77, Panama City , Florida - 32405	
Mailing Address:		
Telephone number:		

Agency Chief Executive Officer Information:	
Name:	
Email Address:	
Telephone Number:	

Agency-Wide PREA Coordinator Information			
Name:	Alan Strunk	Email Address:	alan.strunk@bayso.org

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

Number of standards exceeded:	
3	• 115.16 - Inmates with disabilities and inmates who are limited English proficient • 115.18 - Upgrades to facilities and technologies • 115.54 - Third-party reporting
Number of standards met:	
42	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2022-09-06
2. End date of the onsite portion of the audit:	2022-09-08

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	☒ Yes ☐ No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Gulf Coast Sexual Assault Program

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1250
15. Average daily population for the past 12 months:	1200
16. Number of inmate/resident/detainee housing units:	7

17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	☒ Yes ☐ No ☐ Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)
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Audited Facility Population Characteristics on Day One of the Onsite Portion of the Audit

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1200
37. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	4
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	12
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	1

40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	0
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	0
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	3
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	5
44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:	2

45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:	1
46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:	11
47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:	0
48. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations):	No text provided.

Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit

49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:	214
50. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	24
51. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:	17
52. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews	
53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	30

54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	☐ Age ☐ Race ☐ Ethnicity (e.g., Hispanic, Non-Hispanic) ☐ Length of time in the facility ☒ Housing assignment ☒ Gender ☒ Other ☐ None
If "Other," describe:	At Risk detainees
55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?	Interview detainees from each housing unit including segregation unit.
56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?	☒ Yes ☐ No
57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Targeted Inmate/Resident/Detainee Interviews	
58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:	10
As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".	
59. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:	4

60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:	1
61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☐ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☒ The inmates/residents/detainees in this targeted category declined to be interviewed.
62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The medical director, classification supervisor and PREA coordinator indicated they were none housed at the facility during the audit. The auditor asked staff and detainees during the tour if there were any detainees that were blind.
63. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The medical director, classification supervisor and PREA coordinator indicated they were none housed at the facility during the audit. The auditor asked staff and detainees during the tour if there were any detainees that were blind.
64. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:	2
65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	5
66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:	2
67. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:	1
68. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:	3
69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	☒ Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. ☐ The inmates/residents/detainees in this targeted category declined to be interviewed.

b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	The medical director, classification supervisor and PREA coordinator indicated they were none housed at the facility during the audit. The auditor asked the supervisor for the segregation unit and one of the detainees that was housed in the segregation unit who was gay if his sexual orientation or any incidents that he had was the reason he was in the segregation unit.
70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	There were three detainees that were housed in the medical area that were not interviewed due to advance medical conditions. One was the detainee that is cognitively difunctionally due to recent stroke. It was marked as declined to be interviewed.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
71. Enter the total number of RANDOM STAFF who were interviewed:	18

72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	☐ Length of tenure in the facility ☒ Shift assignment ☒ Work assignment ☐ Rank (or equivalent) ☐ Other (e.g., gender, race, ethnicity, languages spoken) ☐ None
73. Were you able to conduct the minimum number of RANDOM STAFF interviews?	☒ Yes ☐ No
74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	Interviewed six staff that are assigned to the Youthful Offender Population

Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	11

76. Were you able to interview the Agency Head?	☒ Yes ☐ No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	☒ Yes ☐ No
78. Were you able to interview the PREA Coordinator?	☒ Yes ☐ No
79. Were you able to interview the PREA Compliance Manager?	☐ Yes ☐ No ☒ NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

80. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)	☒ Agency contract administrator ☒ Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment ☒ Line staff who supervise youthful inmates (if applicable) ☐ Education and program staff who work with youthful inmates (if applicable) ☒ Medical staff ☒ Mental health staff ☐ Non-medical staff involved in cross-gender strip or visual searches ☒ Administrative (human resources) staff ☒ Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff ☒ Investigative staff responsible for conducting administrative investigations ☒ Investigative staff responsible for conducting criminal investigations ☒ Staff who perform screening for risk of victimization and abusiveness ☒ Staff who supervise inmates in segregated housing/residents in isolation ☒ Staff on the sexual abuse incident review team ☒ Designated staff member charged with monitoring retaliation ☒ First responders, both security and non-security staff ☒ Intake staff ☐ Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of VOLUNTEERS who were interviewed:	2

b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Education/programming ☐ Medical/dental ☐ Mental health/counseling ☒ Religious ☒ Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	☒ Yes ☐ No
a. Enter the total number of CONTRACTORS who were interviewed:	3
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	☐ Security/detention ☐ Education/programming ☐ Medical/dental ☒ Food service ☐ Maintenance/construction ☒ Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

84. Did you have access to all areas of the facility?	☒ Yes ☐ No
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Was the site review an active, inquiring process that included the following:

85. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	☒ Yes ☐ No
86. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	☒ Yes ☐ No
87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	☒ Yes ☐ No
88. Informal conversations with staff during the site review (encouraged, not required)?	☒ Yes ☐ No

89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).

During the site review the locations of cameras and mirrors, room layout, restrooms, and the placement of PREA posters and information was observed. Facility Notices in English and Spanish provided to the facility during the Pre-Onsite Audit Phase were found displayed in various locations throughout the facility. PREA reporting information and other PREA posted information is in both English and Spanish and posted in all housing units and in numerous locations throughout the facility. Reminders of opposite gender announcements are stenciled near the entries of housing units. Auditor observed the location of staff in the sub control rooms to ensure that there is no direct view of inmate taking showers. The showers are half walls, with shower curtains covering the entrance of the showers. Some showers were cages. The cameras from the main control room were viewed to ensure that the control staff could not view inmates fully nude while showering. The camera views do not allow for the viewing of inmates. The facility has installed a multitude of mirrors based on previous audits showing blind spots. There were no blind spots noted during this tour. The inmate's cells were equipped with individual toilets and sinks. All toilets not located in the detainees' cells had partitions and walls in front of the toilet area. The detainee telephone system was tested in several living units. Each number was answered in a timely manner by a live staff person. Each asked if I wanted to make a report of speak to a victim advocate. Inmates are not required to utilize a PIN to contact the Gulf Coast Sexual Assault Program, or National Rape Crisis Center. A detainee showed me the PREA screen on a Kiosk machine. It included the comprehensive education program the victim advocate programs, report option including a Kiosk grievance system. The auditor also had informal conversations with inmates in each area. Every detainee understood what PREA was, could tell me how to file an allegation and recalled seeing the educational video at intake. The detainees explained that staff of the opposite gender usually announce before entering and the inmates were never seen when undressed by staff of the opposite gender. The auditor asked questions about the grievance form process. Most grievances are submitted on the portable kiosk and go directly to the grievance coordinator. Staff did confirm that inmates can submit grievance forms to supervisors, if requested. The auditor had informal conversations with several staff members throughout the building. Each person was able to properly identify the appropriate steps to take if they identified an incident of sexual abuse or sexual harassment. They could also explain inmate rights, prohibitions against retaliation, signs of abuse and ways to avoid staff sexual misconduct. The medical area of the jail was visited. There were several PREA signs posted with the hotline number and the inmate's right to be

free from victimization. The auditor viewed exam rooms and areas, direct supervision cells and staff offices. Inmates were not allowed in the offices and exam areas had curtains to provide privacy for exams. The medical area includes a specialized room for SANE and included Rape Kit and evidence collection bags.

The auditor watched the inmate booking process and could see the flow for inmates from the initial pat search through their move to initial housing. The auditor saw the strip search room, which is near the facility sally port and is a small room, with no camera and no window on the door. Intake staff stated that strip searches are performed by one officer, only in this room, only for those inmates that can legally be strip searched by state statute. The strip searches are performed by an officer of the same gender as the inmate. The auditor could see many cameras in the intake area, except in the strip search room and in the inmate bathroom.

Detainees sit in main room where they are provided a television. The television is showing inmate orientation information that includes initial PREA information, in two languages, English and Spanish. During booking detainees are told that to access the kiosk for services such as commissary they are required to view the complete comprehensive education program. The intake staff indicated when there is time the is accomplished during the intake process. During the intake process detainee were going into a private office where a classification staff member was conducted the initial screening. At the time of the booking, there was a detainee being interviewed by mental health staff for suicide precaution. Mental Health staff interviewed during the intake process indicated they attempt to have a staff member in the area during bookings. They are notified by the intake staff when detainees arrive for bookings.

Documentation Sampling

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

90. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?

- ☒ Yes
- ☐ No

91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).

Inmate Files Reviewed: Twenty-four (24) resident records were reviewed. These records included the following information. • Identification Number • Date of Birth • Date of Arrival • Date of Screening • Date of Follow-up Screening • Date of Initial PREA notification • Date of PREA orientation/education: Employee Background Checks: Fifteen (15) background clearance files including five (5) new hired staff, five (5) staff that had been promoted and five (5) employees that had over five years tenure at the facility. Five (5) background checks for contractors were reviewed. One volunteer file was reviewed. All background checks had been completed for staff and contractors prior to contact with inmates or prior to promotion or over 5 years tenure at the facility: Employee Training Records: Reviewed Fifteen (15) employee training records were reviewed. Included in the employee training records were random monitors (direct care staff), supervisors, Investigator, PREA Compliance Coordinator. All training has been completed in the last 12 months: Interviews with random staff indicated they had received refresher training during the last six (6) months. Most staff interviewed stated they had received the questionnaire for their specific duties prior to the audit and were prepared for the audit. Investigations: There were a total of twentytwo (22) reported allegations of sexual abuse/sexual harassment. All investigative files were reviewed. Unannounced Rounds: The logbooks and computerized unannounced rounds were reviewed in each housing unit and the control rooms for specific dates.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-oninmate sexual abuse	6	3	3	6
Staff-on-inmate sexual abuse	1	0	1	0
Total	7	3	4	6

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	10	0	10	0
Staff-on-inmate sexual harassment	5	0	5	0
Total	15	0	15	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	3	1	1	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	3	1	1	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	3	3	3	0
Staff-on-inmate sexual abuse	0	1	0	0
Total	3	4	3	0

Sexual Harassment Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	3	0	0	0	0
Staff-on-inmate sexual harassment	2	0	0	0	0
Total	5	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	3	8	2	1
Staff-on-inmate sexual harassment	2	4	1	0
Total	5	12	3	1

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

98. Enter the total number of SEXUAL ABUSE investigation files reviewed/sampled:

7

99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:

6

101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?

☒ Yes

☐ No

☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)

102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)
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Staff-on-inmate sexual abuse investigation files

103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	1
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104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
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105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)
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Sexual Harassment Investigation Files Selected for Review
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106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	10
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107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any sexual harassment investigation files)
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Inmate-on-inmate sexual harassment investigation files

108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5
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109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	5
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	☐ Yes ☒ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	☒ Yes ☐ No ☐ NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	The one allegation of inmate on inmate has been substantiated by the investigator, however it has gone forward for prosecution and thus it is considered ongoing until final outcome of the incident.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	☐ Yes ☒ No

Non-certified Support Staff

116. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

- ☐ Yes
- ☒ No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

- ☐ The audited facility or its parent agency
- ☐ My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)
- ☒ A third-party auditing entity (e.g., accreditation body, consulting firm)
- ☐ Other

Identify the name of the third-party auditing entity

The Nakamoto Group

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Sheriff's Office Organizational Chart Bay County Jail Organization Chart Bay County Sheriff's Office Policy 905.0 PREA 115.11 (a): The agency and center policies outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment. The policy and practices provide a zero-tolerance for all forms of sexual abuse and sexual harassment. Residents are informed orally about the zero-tolerance policy and the PREA program during in processing and additional admission and orientation presentations. The orientation is offered in English and in Spanish. Additional program information is contained in the detainee's manual, and postings distributed throughout the center (observed during the tour). All written documents are available in English and Spanish. Additional interpretive services are available for residents who do not speak or read English. Both center staff and residents are provided with a wealth of opportunities to become aware of PREA policies and procedures. All employees receive initial training and annual training, as well as updates throughout the year. The agency and center exceed the standards with all the programs they have implemented to ensure the residents and staff understand its position on zero- tolerance. 115.11 (b): Bay County Sheriff's office employs an upper-level PREA Coordinator. The agency's organizational chart depicts his position within the agency. The PREA Coordinator oversees the agency's efforts to comply with the PREA standards at Bay County Jail and any Contracted jails that house detainees from Bay County, Florida. The PREA Coordinator reports to the jail administrator which in the Sheriff's Office organization has the rank of Major. 115.11 (c): Bay County Sheriff's office ensures that the jail includes a PREA Compliance Manager with sufficient time and authority to coordinate the facilities PREA efforts. The facility's organizational chart illustrates PREA Compliance Manager's position within the facility. Facility Administrator's memo outline the responsibilities of the PREA Compliance Manager. At Bay County Jail (BCJ) the PREA Compliance Manager works directly to the Facility Administrator. Interview with the Facility Administrator confirmed that he supervises the PREA Compliance Manager. The PREA Compliance Manager interviewed indicated the work closely with investigator that also serves as PREA support staff. The PREA compliance manger and Facility Administrator indicated they have several support staff outside the facility to provide PREA related issues. The Facility Administrator interview confirmed that the center meets on a regular basis to discuss facility's efforts to comply with PREA and to develop a culture to maintain a Safe environment for staff and residents. The facility meets expectations through the collaborative measures that operations, therapist, unit managers, PREA Coordinator and Jail Administrator (Major) to DCJ a sexual safe environment. The facility has implemented PREA tools to assure a safe environment for detainee and staff. This includes the screening instrument, rescreening instrument, videos that provide PREA orientation and training, and reviewing the standards on a regular basis.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard

Auditor Discussion
The following policies, directives and documentation were reviewed in formulating compliance with this standard: Contract Administrator Contract with Fort Walton Jail PREA coordinator The County has a contract with Fort Walton Jail to house up to 140 detainees. The contract was provided for review and included a stipulation that the jail will comply with all PREA standards. The PREA Coordinator has visited the jail two time a year to review for compliance with PREA. The Facility Administrator at Fort Walton Jail was contacted and indicted the jail is in compliance with PREA.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard Auditor Discussion The following policies, directives and documentation were reviewed in formulating compliance with this standard: Bay County Jail (BCJ) Policy 905.0 PREA Facility Staffing Plan Annual Florida Jail Inspection PREA Unannounced Supervisor Round Log Security Staff Schedule Sample Facility diagram with cameras locations 115.213 (a): Bay County Jail has developed and documented a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect detainees against sexual abuse. The agency took into consideration the physical layout of the facility, the composition of the population and the prevalence of substantiated incidents of sexual abuse, and the resources the facility has available to commit to ensure adequate staffing levels in the development of the facility's staffing plan. 115.213 (b): There were no deviations from the mandatory post designated in the approved staffing plan during the review period. The facility maintains the required two alert staff at all times. In the event of staff vacancies, callouts or PTO requests, the facility uses overtime as needed to ensure all shifts are covered in accordance with staffing plan. 115.213 (c): The PREA coordinator conducts an annual PREA facility assessment. The present staffing plan is based on 1250 detainees while the number of detainees assigned to the facility during the audit was 1205. The facility has a mandatory staffing plan that requires the center to provide over time, call in, and use of specialized staff to provide staff to meet the mandatory posts. All staff at the facility are provided training on providing direct care supervision of detainees. 115.13 (d): According to BCJ policy and facility document practice requiring department heads, facility executive staff and intermediate and higher-level custody supervisors conduct and document unannounced rounds on all shifts within their respective areas to identify and deter employee sexual abuse and sexual harassment. Policy also mandates that other staff are prohibited from telling other staff when supervisors are making unannounced rounds. The review of Institution Duty Officer (IDO) unannounced PREA rounds logs confirmed that intermediate-level or higher-level supervisors, including shift supervisors and department heads, conduct and document such visits throughout the institution, during the day, at night and on the weekends. Additionally, the IDO was interviewed. IDO visits areas of the facility during days, evenings, and weekend. The IDO document the visits on logbooks located in housing unit control room. Staff members are prohibited from alerting other employees regarding unannounced rounds. Interviews with inmates and housing unit officers also confirmed that random, unannounced rounds are conducted by Institution Duty Officers daily, including nights and weekends. The administrative Lt. for each shift was interviewed. Each indicated that they visit each living unit a minimum of once per shift. The control room staff document these visit on the unit log. The auditor reviewed logbooks during the tour and found multiple signs in documentation on each shift. While touring the control room, the control room officers showed her PREA rounds documentation. The facility provided a page on one of the logbooks that documented that a supervisors visited the unit on each shift. An examination of policy and supporting documentation and all interviews confirms compliance with this standard During the tour of the facility, there were staff noted in the general areas wherever detainees were located. The camera system provides additional support for providing supervision of the population. Random staff interviewed during the tour indicated they are required to be relieved from their post prior to leaving their assigned post. The facility director and his administrative staff were actively engaged with the detainee population during the tour of the facility. The detainees indicated if they were sexually abused or sexually harassed they would notify staff Compliance was determined by review of policies, documents viewed during the tour of the facility, review of the cameras and interviews with PREA Coordinator and Facility Administrator.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation was reviewed in formulating compliance with this standard: Bay County Jail Policy 905.0 PREA Youthful Offender housing unit plan PAQ 115:14 (a) Bay County Jail has a unit designated for youthful inmates. During the onsite audit the Auditor identified four (4) youthful inmates housed in a separate living unit away from adult inmates. Moreover, the housing unit was separate from adult inmates by sight, sound, and physical contact. The accommodations for the youthful inmates did not allow for the sharing a dayroom, common space, shower area, or sleeping quarters with adult inmates. The youthful inmate confirmed that in areas outside of the designated housing unit for youthful inmates, 115:14 (b) The youthful inmate confirmed that in areas outside of the designated housing unit for youthful inmates, Bay County Jail provides direct and constant staff supervision when youth are in sight, sound, or physicality of adult inmates. The youth interviewed indicated they have not been in sight or physically around adult inmates. They indicated they could hear them in the hall during mass movement but were separated by two security doors. The access to the unit can be breached by doors from the main hall or from the administrative area of the jail. 115:14 (c) BCJ allows youthful inmate daily large-muscle exercise, educational programming and legally required special education services if necessary. At the time of the audit the educational program was still on summer break. Compliance was determined by review of policies, tour of the youthful offender area, interviews with staff that supervise youthful offender, and youthful offenders.

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Training Presentation (Pat Down Search)

Bay County Jail policy 905.0 PREA

Training records- Cross Gender Pat Searches & Searches of Transgender & Intersex Strip Search Log

Shift Logs- Announced gender presence

Statement of Fact

PAQ

115.15 (a): Bay County Jail policy 905.0 mandates that cross-gender strip or cross-gender body cavity searches are prohibited, except in emergency situations or when performed and documented by a medical practitioner. Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. All security staff of the BCJ receive training on how to conduct cross-gender pat searches and searches of transgender and intersex detainees in a professional and respectful manner. training on how to conduct cross-gender pat searches and searches of transgender and intersex detainees in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they were aware of the prohibition of visual body cavity or strip searches of the detainees of the opposite sex except in exigent circumstances

115.15 (b): The facility houses male and female detainees. It may house transgender offenders that are in hormone therapy. Each transgender meets with the Classification Committee and are allowed to provide staff preference for pat down searches.

115.15 (c): Officers are required to document all cross-gender strip searches and cross-gender visual body cavity searches. The facility also maintains a log of all strip searches. This log indicates date, time, purpose and offender's gender and gender of persons conducting the strip searches.

115.15 (d): BCJ Policy 905 enables detainees to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks. The living areas showers have curtains that provides for detainee privacy while showering. Toilet areas have partitions with door to allow detainees to use the restroom without being viewed by staff. The medical area has a wraparound curtain for privacy during examinations. All toilets in the living units have partitions and a wall in front of the toilet to provide privacy. All other areas that were reviewed during the tour had partitioned or single toilets with a door to provide privacy. All residents stated they can shower, use the toilet and change clothes without being seen by staff members.

The facility has implemented a policy that all opposite gender staff working the units will announce themselves prior to walking the range to allow detainees the opportunity to prepare themselves from a privacy perspective. Detainees interviewed acknowledged they were allowed to shower, dress and use the toilet without being viewed by staff of the opposite gender. Postings are located throughout the living units that female staff are assigned to work in housing units. The facility maintains a log for staff of the other gender to announce their presence when entering housing units.

115.15 (e): BCJ Policy 905.0 address searches of transgender and intersex offenders. Facilities shall not search or physically examine a transgender or intersex offender solely to determine their genital status. If the genital status is unknown, it may be determined during private conversation with the individual, by reviewing medical records or by learning this information as part of a broader medical examination conducted in private by a medical practitioner. At the time of the onsite audit, there were one detainee who disclosed being transgender or intersex.

115.15 (f): All staff at BCJ receive training on how to conduct cross-gender pat searches and searches of transgender and intersex offenders in a professional and respectful manner. Staff receive Limits to Cross Gender Viewing & Searches training. The lesson plan of this training was provided for review. Staff sign a PREA Basic Acknowledgement form acknowledging receipt and understand of the training received. Review of random staff training records and in interview with security staff, revealed staff are receiving this training at pre-service and annually. Interviews with staff confirmed that they

were aware of the prohibition of visual body cavity or strip searches of the detainees of the opposite sex except in exigent circumstances.

Female and transgender female detainees interviewed indicated they had not been pat searched or stripped search by male staff. Male staff indicated they have received training on cross gender pat searches however have not conducted any searches of female or transgender female detainees. Based on the review of policies and notices regarding the presence of female staff in the units, observation of the showering/dressing areas and interviews with staff and detainees it has been determined that BCJ is in compliance with this standard.

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Bay County Jail policy 905.0 PREA Training (English/Spanish) Offender Handbook (English/Spanish) PREA Brochures English/Spanish 115.16 (a): Bay County Jail policy 905.0 mandates that the facility shall not discriminate against offenders with known disabilities and shall provide reasonable accommodations to ensure access to programs, activities, and services in accordance with the Americans with Disabilities Act and the provisions established in this Policy. BCJ has established a procedure to medically classify offenders including ADA target offenders. The intake staff indicated that when an offender arrives at the facility, intake first responsibility is to interview the offender to determine if he meets the ADA targeted population. If they are not certain they notify medical to access the offender before beginning the intake process. Through policy and practice, the facility staff ensures that detainees with all disabilities listed in 115.16a have an equal opportunity to participate in and benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment. The facility has TTY machines for hard of hearing offenders and access to sign language contracted staff. At the time of the audit there were no offenders that had any ADA communications that could not be addressed by the facility. The facility coordinator indicated that the facility are authorized to solicit support from the court administration office to access any blind, death or other ADA needs to communicate with the jail population. The jail also employs two bilingual staff members. The auditor utilized a translator employed by BCJ to provide interpretive services. The staff member indicate he was fluent in 6 languages. The facility has ADA approved rooms in each of the population age, sexual orientation, security levels and protective custody. The classification committee in consultation with medical and mental health staff will determine the appropriate housing assignment of residents. 115.16 (b)(c): All PREA related information (written information), including postings, brochures and handouts are available in English, and Spanish. The facility has access to translation services and written access in other languages. Through Language Line Contact. Staff also may read information to detainees when necessary. Agency and facility policies prohibit offenders to be relied on as readers or any types of assistants, except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the offender's safety. The facility maintains a list of staff that are bilingual. Exceed Compliance of this standard was confirmed by review of agency policy, full time interpreters and interviews with PREA Coordinator, Classification Manager, Medical Administrator and Facility Administrator.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in determining compliance with this standard:

Bay County Jail policy 905.0

Background Promotion Letter and PREA Promotion Disclosure Waiver

Personnel Records

115.17 (a): The Departmental Policy for Background Investigation and Appointment of Certified Officers does not allow hiring or promotions of anyone who has been convicted of sexual abuse in prison/jail or in community. Background checks are done on all employees, contractors, and volunteers. Background checks (NICI) are conducted on all new hires. In interviews with the Human Resources any perspective employee or contractor completes an application that includes PREA questions. This is then forwarded to the NCIC division to conduct the background checks and employment history checks. Bay County will notify the human resources that the NCIC and history has been completed and the outcomes of their investigations. At that time the facility is authorized to offer employment to perspective employees.

115.17 (b): Prior to a transfer to the facility or promotions, employee background review is conducted utilizing the NCIC division and answer the following questions.

1. Have you engaged in sexual abuse in a prison, jail, lock up, community confinement facility, Juvenile facility, or other institution? (Please note that sexual abuse in this setting includes sexual acts with the consent of detainee, detainee, resident etc.).
2. Have you ever been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion or if the victim did not consent or was unable to consent or refuse?
3. Have you ever been civilly or administratively adjudicated 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?

115.17 (c): The agency requires that all applicants and employees who may have contact with offenders have a criminal background check. Criminal background checks for all potential employees are completed through the Bay County Sheriff's office for those considered for promotions or who transfer from another facility, an internal BCJ PREA verification and a background check are completed. If an applicant answers on their application they are a prior institutional employee, information from prior institutional employers shall be requested.

115.17 (d): The facility performs criminal background checks through the Bay County Sheriff's office before enlisting the services of any contractor or volunteer. The auditor reviewed random contractors background and found all had background checks completed prior to employment.

115.17 (e): A review of random staff and contractor with five years tenure verified that criminal background checks are conducted every five years for all employees and contractors.

115.17 (f): The agency requires a complete investigation for law enforcement staff that includes all areas of this standard. The agency did not utilize a formalized form to document this information. While the background checks include all of the information required it does not document the questions requested in this standard. The agency has agreed to implement a questionnaire to ask all applicants and employees who have contact with offenders directly about previous sexual misconduct delineated in this standard. The agency does do a yearly staff appraisal and as a law enforcement entity for Bay County the agency would do all investigations and notifies the jail of any apprehensions, civil complaints and calls to the 911 numbers involving staff.

115.17 (g): Employees and contractors have a duty to disclose such misconduct referenced in this standard. Material omissions regarding this type of misconduct would be grounds for termination. The submission of false information by any applicant is grounds for not hiring the applicant.

115.17 (h): Unless prohibited by law, BCJ will provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom the individual has applied for work.

Compliance was determined by pre audit documentation, the PAQ, interviews with the human resources director and review of 20 random staff files including new hires, promotions and five-year tenure and five contractor files.

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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 903E.02 Ensuring Safe Prisons Interview with Agency regarding Additional Monitoring Statement of Fact BCJ Policy 903E.02 Ensuring Safe Prisons mandates the company will consider the effect of new or upgraded design, acquisition, expansion, or modification of physical plant or monitoring technology might have on the facility's ability to protect offenders from sexual abuse. Based on statement of fact, there have been additional modifications during the last audit period. The facility has upgrades to the camera systems by replacing older cameras with new high definition and pivoting cameras. Compliance was determined by review of facility camera coverage and interviews with Agency Head Designee, Facility Administrator, and PREA Coordinator.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Proper Handling and Collection of Sexual Assault Evidence MOU with Gulf Coast Sexual Assault Program (GCSAP) Conversation with GCSAP 115.21 (a): Bay County Jail and sheriff's office is responsible for conducting administrative and sexual abuse investigations. The Sheriff's Office CID team conducts criminal investigations involving staff. 115.21 (b): The agency and the facility follow a protocol developmentally appropriate for youth where applicable and adapted from or otherwise based on the U.S. Department of Justice's office on Violence Against Women Publication, 115.21 (c): The facility uses Gulf Coast Sexual Assault Program to conduct SANE or SAFE. The Jail Administrator has issued a memo for the audit to document. Gulf Coast Sexual Assault Program has been trained in the proper collection, handling and documenting of evidence in the event of a sexual assault. In information reported on the Pre-Audit Questionnaire, in the last 12 months there was one (1) SANE exams performed during the last 12 months. The Gulf Coast Sexual Assault Program SANE staff conducted the SANE at the jail. The GCSAP victim advocate accompanied the SANE staff to the jail and provided advocacy services to the victim. The investigation is ongoing. 115.21 (d): BCJ has a MOU with Gulf Coast Sexual Assault Program for victim advocate service. Detainees are made aware of the confidential emotional support services available to them and how to access them in the Detainee Handbook and on PREA posters displayed throughout the facility in both English and Spanish. 115.21 (e): The terms of the require an advocate to accompany and support the victim through the forensic medical exam process and the investigatory process and provide additional emotional support services. 15.21 (f): Based on statement of fact by PREA coordinator, the center has conducted all investigations in the last 12 months. However, the center jail is part of the Sheriff's office CID team and would be kept apprised of any investigations that were deduced by this team. The GCSAP interviews indicated that they provide services to the Bay County Sheriff's office including SANE staff as needed for victims or accused predators of Sexual Assaults. This includes criminal investigations accused of Sexual Assault. The staff indicated they have men to provide victim advocates for male accused of Rape and they receive the same services regardless of the charge, including Victim Advocate services. Compliance of this standard were confirmed by review of the policy, MOUs, PAQ, and investigative files.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

PREA allegation review

Bay County Jail policy 905.0

115.22 (a): BCJ or Bay county Sheriff's office CID team conducts sexual abuse allegations and sexual harassment investigations that administrative or criminal in nature. Facility staff is required to preserve the crime scene until the investigator arrives to process and collect the evidence. Facility investigators and the CID staff are trained in conducting sexual assault investigations in confined settings/prisons. The CID and jail staff are law enforcement staff. A review of documentation and staff interviews confirmed compliance with this standard. A review of training documents confirmed that all investigators received instruction in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff, as well as an examination of policy/supporting documentation, confirm compliance with this standard. A review of training documents confirmed that all investigators received training in conducting sexual assault investigations in confined spaces/prisons. Interviews with staff as well as an examination of supporting documentation, confirm the facility's compliance with this standard.

115.22 (b): Based on Policies all allegations of sexual abuse or sexual harassment that appear to be criminal be referred for investigation to an agency that has the legal authority to conduct criminal investigations. Based on practice there were four (4) residents claimed to have been sexually assaulted that were transferred to CID for investigations. In the PAQ there were 24 allegations of sexual abuse or sexual harassment. Twenty-three involved Detainee on Detainee and one involved staff on detainee. Based on the investigative reports and interviews with one of the offenders, the allegation was criminal in nature and should have been referred to CID for investigations.

115.22 (c): Information published on the Bay County Sheriff's office website describes the responsibilities of the agency and the investigating agency in the investigation of allegations of sexual abuse and sexual harassment.

Compliance was determined by review of investigations, policy, statement of fact, BCJ website. Final compliance was determined by review of the corrective action plans, interviews with the Facility Administrator and the BCJ PREA Coordinator.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Bay County Jail policy 905.0

PREA Basic Training Acknowledgment (Pre-Service & In-Service)

Cross Gender Pat Searches & Searches of Transgender & Intersex (Pre-Service & In-Service)

Acknowledgment of Receipt of Training & Brochures (Pre-Service & In-Service) Staff training Rosters Annual In-

Service Training Record

115.31 (a): All staff are provided training that includes all areas of PREA training and protocol for sexual abuse prevention, intervention, reporting, and protecting the detainees and preserving the possible crime scene. The facility receives training developed for BCJ and includes films, power point presentations, and lectures.

Training includes:

- Zero-tolerance policy for sexual abuse and sexual harassment
- How to fulfill staff responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures.
- Detainees' right to be free from sexual abuse and sexual harassment.
- Detainees on the right of detainees and employees to be free from retaliation for reporting sexual abuse and sexual harassment.
- Dynamics of sexual abuse and sexual harassment in confinement.
- 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 detainees.
- How to communicate effectively and professionally with detainees, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming detainees.
- How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.
- How to conduct cross gender pat searches:

Newly hired employees receive training relative to PREA standards during their initial training in a classroom setting. The facility conducts training on a quarterly. The training is conducted in classroom and computer-based training.

115.31 (b): Bay County Jail policy 905.0 recognizes that the facility houses male, female and youthful offenders. Policy mandates that the facility will be required to modify training to meet needs of a different population. Staff assigned to specialized Post such as transportation officers, supervisors, and investigators receive additional training.

115.31 (c): According to the computer data base for training, all staff have received training in the last 12 months. Staff interviewed indicated they had received additional refresher training during the last six months. At BCJ staff received annual in-service training. According to the PAQ there all staff that received initial or annual training in the last 12 months. Between trainings, the facility shifts briefings and staff meetings, and employees receive emails regarding PREA updates and information. Third Party Reporting Posters are displayed in various locations throughout the facility.

115.31 (d): Upon completion of PREA pre-service and annual in-service training, staff sign a an ADOC Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form and a Preservice Training Record and an In-service

Training Record form acknowledging receipt and understanding of all training received, including PREA. They also sign a PREA Basic Acknowledgment Training form upon completion of general PREA training and a Cross Gender Pat Searches & Searches of Transgender and Intersex acknowledgment form. Documentation of annual PREA training for employees is maintained recorded on individual training records maintained by the Training Coordinator.

	A review of the training curriculum, training sign-in sheets and other related documentation, as well as staff interviews, confirmed staff are required to acknowledge, in writing, not only that they received PREA training, but that they understood it. A review of documentation and staff interviews confirmed that the facility is compliant with this standard. The auditor reviewed 20 staff training records including the Facility Administrator, PREA Coordinator, shift supervisor, investigator, medical and random staff.
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Volunteer Training Documentation of Volunteer Training Contractor Training Curriculum Acknowledgment of Receipt of Training and Brochures Bay County Jail policy 905.0 115.32 (a): Bay County Jail policy 905.0 Staff Training mandates that all volunteers and contractors who have contact with detainees have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. The facility trained 20 contractors during the last 12 months. There were 5 volunteers trained in the last 12 months. 115.32 (b)(c): All contractors receive the same PREA training as employees prior to assignment and sign a PREA Basic Acknowledgement Form and an Acknowledgement of Receipt of Training and Brochures Sexual Assault Prevention form. The volunteer training curriculum was provided for review. The training included agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with detainees Volunteers receive this training annually and sign a Documentation of Volunteer Training Form. Volunteer training is maintained in the volunteer files, while contractor documentation of training is maintained by the training coordinator. The facility utilizes contractor for food service and commissary staff. Volunteers are actively involved in the Chaplaincy Program at the facility. During the last 12 months 40 volunteer or contractor received training as required. Compliance with this standard was determined through review of procedure, PREA lesson plan, contractor and volunteer information, signed PREA acknowledgements and interviews

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Receipt of training for new arrivals Bay

County Jail policy 905.0

Receipt of training for transfers

Offender PREA Brochure

Facility PREA Postings

Offender Receipt of PREA Brochure

Offender Receipt of PREA Comprehensive Education

Offender Orientation PowerPoint

20 offender files reviewed

115.33 (a): Bay County Jail policy 905.0 mandates all offenders receive information at time of intake and if transferred from another facility about the zero-tolerance policy and how to report incidents of sexual abuse or sexual harassment, their rights to be free from retaliation for reporting such incidents and are informed of the agency/facility policies and procedures for responding to such incidents. In interview with intake staff, on the day of arrival, offenders receive a Sexual Assault Prevention and Reporting Offender/Student Information Brochure and sign a Receipt. This was observed by the audit during the intake of an offender. Also, during the intake offenders were watching a PREA video that included the same information. The facility has installed a Kiosk system that includes a PREA program. In order to utilize the VIA Path Command Kiosk are required to take the PREA comprehensive training program that is managed by the staff Case Managers. The case managers verify the training and have resident sign for the training in order to receive a PIN number in order to utilize the Kiosk program.

115.33 (b): Offenders receive comprehensive PREA education as part of the orientation process usually on the day of their arrival, however by policy at a minimum within the first seven days of arrival to the facility. Offenders in Prison Rape

Elimination Act (PREA) Offender Education Program acknowledgement form acknowledging receipt of PREA education. The curriculum provided to offenders was provided for review.

115.33 (c): The intake staff and PREA compliance manager stated that all offenders have received the training usually within

2 hours of arriving. According to PAQ all detainees received the comprehensive PREA training in January 2022 and with the new system, all resident receive the orientation and comprehensive training on the first day of arrival.

115.33 (d): All PREA education provided to detainees is in formats accessible to all detainees, including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills. The PREA brochure and all verbal information given is provided in both English and Spanish. A contract for ESL detainees to provide translation of any other languages. The facility has a TTY for deaf or hard of hearing detainees. The facility employs two translators that are available for all intakes and comprehensive education programs if required. The VIA Path Command is in English and Spanish.

115.33 (e): The facility maintains documentation of offenders' participation in PREA education. In review of 20 random offender files, were complete with proper documentation of receipt of written PREA education material.

115.33 (f): Throughout the facility were posters including Sexual Assault Prevention and Reporting Posters; BCJ Zero Tolerance Posters, End the Silence Posters. and Victim Advocacy Services. These posters were informative and included telephone numbers and addresses. Also Notice of Audit was posted throughout the facility.

The auditor reviewed the comprehensive training program that is located on the Kiosk program. The information included all aspects of the training standard. It also provided information on the Victim Advocacy and emotional support program. Detainees interviewed indicated they are provided with the brochure and are required to go through the PREA information in order to access the Kiosk in to order commissary or any other programs.

Based on review of the training curriculum, interviews with residents and staff it was determined that the facility meet the standards for training detainees.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Investigative Training Curriculum Specialized Training Certificates Training Rosters Bay County Jail policy 905.0 Statement of Fact 115.34 (a): Bay County Jail policy 905.0 mandates that in addition to the general training provided to all employees pursuant to §115.31, the agency ensure that, to the extent the agency itself conducts or assist in conducting investigation they will have been trained to conduct sexual abuse investigation in a correction setting. 115.34 (b): The facility Investigators have completed investigating sexual abuse in a confinement setting and additional online training on investigating sexual abuse. Training includes Investigating Sexual Abuse through NIC. The training curriculum was reviewed and included interviewing sexual abuse victims, proper use of the Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. 115.34 (d): The facility has two trained investigators. The agency maintains documentation that investigators have received specialized training on conducting sexual abuse investigations in confinement settings. Upon completion of the training, investigators receive a certificate of completion. In review of investigators' training files, investigators have completed this specialized training, as well as general training provided to all employees and documentation is maintained by the facility. In interview of the facility investigators, they confirmed receiving specialized training and general PREA education provided to all employees and were able to confirm the topics included in the specialized training they received. Bay County investigators are also involved in criminal investigations in the county and are sworn officers with extensive training in investigations. Exceed compliance was determined by review of the training curriculum, investigator training records, investigators certificate of completion, investigative reports, and over ten years' experience as investigators for Bay County Sheriff's office.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

Certificates of Completion of PREA Specialized Training

PREA Training Certification

Mandatory Pre-Service PREA Questions- Nurse

Acknowledgment of Receipt of Training & Brochures- Nurse

115.35 (a): The medical staff at BCJ received the generalized training and specialized training through Vital Core the contracting medical and mental health provider at the institution. The training curriculum includes 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, how and to whom to report allegations or suspicions of sexual abuse and sexual harassment as well of many other medical and mental health topics such as clinical interventions, and local policies.

115.35 (b): The medical and mental health staff do not conduct forensic examinations.

115.35 (c): Staff received a certification on completion for specialized training. They sign an acknowledge to training for the generalized PREA training. Both documents were provided in the pre audit documentation and verified through interviews with medical administrator and mental health director.

115.35 (d): All medical staff and mental health staff assigned to the facility attend the same training as required mandated for employees by §115.31. They sign and acknowledge statement that they received this training. In addition, medical and mental health staff assigned to the jail attend the NIC training module for medical and mental health staff.

Compliance was determined by review of the training curriculums, copy of certificates and acknowledgement statement and interviews with the nurse and mental health staff.

115.41

Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

Bay County Jail policy 905.0

Screening Instrument

Offender Files Reviews

Risk Screening Instrument to Keep Offenders Safe

Completed SRI Questionnaire

115.41 (a): The policies indicate all detainees shall be assessed at intake and upon transfer for their risk of being sexually abused by another individual or being sexually abusive towards another individual housed at the facility. This screening takes place within 72 hours of arrival at the facility utilizing an objective screening instrument. The facility conducts initial and reassessments utilizing the Sexual Risk Indicators (SRI) which is an objective and standardized screening instrument by a trained Classification staff member. On information provided on the PAQ, in the past 12 months, 727 detainees that entered the facility were assessed for their risk of victimization or abusiveness upon arrival. Random sampling of detainee files and detainee interviews confirm detainees were typically screened within 24 hours of arrival.

115.41 (b): Intake screening takes place within 24 hours of offenders' arrival to the facility. The process that is utilized includes part of the initial intake. Once the offender is searched, they receive PREA pamphlets and handbook. During that time the case manager or staff assigned to conduct the screening review the offenders file and meets with the offenders. During this meeting staff introduce PREA to the offender and explains the purpose of the screening with the residents. The offender is then asked to sign to acknowledge they have received the screening. If the offender has past history of victimization or predator behavior the screening staff completes a referral that is sent to the medical staff to refer to the mental health staff to set up an interview with the offender. Medical and mental health staff are available during the screening process conducting a medical review and suicide screening. All screenings are referral to mental health staff for follow up if the detainee claims history of sexual victimization, history of predator sexual actions or if detainee self admits to being transgender

115.41 (c): The Risk Screening Instrument (RSI) is an objective and standardized screening instrument that is conducted by a trained Classification staff member.

115.41 (d)(e): The screening includes the screener's thorough review of any available records available to assist with determining the detainee's risk assessment. The Intake Sexual Violence Assessment Tool was reviewed.

It contains:

- Whether the detainee has a mental, physical, or developmental disability?
- The age of the detainee?
- The physical build of the detainee?
- Whether the detainee has previously been incarcerated?
- Whether the detainees' criminal history is exclusively nonviolent?
- Whether the detainee has prior convictions for sex offenses against an adult or child?
- Whether the detainee is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming?
- Whether the detainee has previously experienced sexual victimization?
- The detainee's own perception of vulnerability?
- Perpetrators of sexual abuse during incarceration?
- Prior conviction of violent offenses?
- History of Assaultive Conduct in DOC in the past 5 years?

- Whether the detainee is detained solely for civil immigration purposes

115.41 (f): The assessment form includes a review of the screening instrument within the first 30 days by the classification team. However, a review of the screening instrument revealed that most detainees were not rescreened within the first 30 days and a corrective action plan was required. The facility has developed a system utilizing the data base program to automatically identify detainees that have been at the facility for 25 to 30 days. Classification staff will download this information and rescreen the resident utilizing a rescreening instrument. Since the screening instrument is maintained in the detainee medical/mental health file and since the detainees undergo a full physical 14 to 25 days of being housed at the facility, the rescreening will be included by mental health and classification staff at the time of the physical examination.

115.41 (g): An offender's risk level will also be reassessed when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information. Annually during annual classification review assessments, offenders are reassessed for risk of victimization or abusiveness using the Annual & Reassessment Sexual Violence Assessment Tool. Transgender detainees are reassessed a minimum of every six months. A review of the transgender offender confirmed they had been rescreened more than requirement of the standard.

115.41 (h): Policy mandates that offenders are not be disciplined for refusing to answer any questions or for not disclosing complete information. Interviews with screening staff confirmed they would not discipline or coerce an offender to answer Screening questions.

115.41 (i): BCJ implemented appropriate controls on dissemination of responses to questions asked related to sexual victimization or abusiveness in order to ensure sensitive information is not exploited by employees or other individuals. Sensitive information is limited to need-to-know employees only for the purpose of treatment, programming, housing and security and management decisions.

All detainees are screened when the transfer into the facility including detainees that leave the facility for court appearance in other counties or other administrative transfers to the facility from other county jail.

Compliance was determined by reviewing the corrective action plan, interviews with the PREA Coordinator and documentation of the corrective action plan implementation.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The following policies, directives and documentation were reviewed in formulating compliance with this standard: Bay County Jail policy 905.0 Risk Screening Instrument Transgender preference log 115.42 (a): Procedures state screening information shall be used to determine housing, bed, work, education, and programming assignments within the Facility in order to keep potential victims away from potential abusers. The computerized management system will initiate a code for identified predator, potential predator, high aggression risk, moderate aggression risk, identified prey, potential prey, high victimization risk, moderate victimization risk. All bed assignments made at BCJ are processed through the Classification Division. Classification utilizes gang intel, risk screening instrument and housing plan to determine appropriate housing of residents. There is a count room with each housing unit on a board that designates they type of housing which includes at risk detainee, predator detainees and gang affiliation. 115.42 (b): Individualized determinations are made about how to ensure the safety of each offender. Offenders who score at risk of victimization or abusiveness are referred for further evaluation with the Mental Health provider. Offenders have an option of refusing these services. 115.42 (c): Policy and practice mandates that making housing and programming assignments for transgender or intersex offenders, the facility will consider on a case-by-case basis whether the placement would present management or security problems. Offenders who self-disclose being gay, bisexual, transgender or intersex are tracked on at risk log that is maintained by the PREA Compliance Manager 115.42 (d) – (f) A transgender or intersex offender’s housing and program assignments will be reassessed every six months to review any threats to safety experienced by the offender. Transgender and intersex offenders’ placement and programming are reviewed as needed, but at least every six months. A transgender or intersex offenders’ own views of their safety is taken into consideration. When the classification committee meets with transgender or intersex detainees, they are given an opportunity to express their views. Two transgender detainees were interviewed and validated that they meet with mental health staff biweekly, and with the classification staff to discuss their safety. They were not able to articulate how often they meet with the classification committee. When interviewed the classification team indicated that they meet with them quarterly. Transgender and intersex offenders are offered the opportunity to shower separately from other offenders as indicated in their Statement of Search/Shower/Pronoun Preference Form. BCJ does not place lesbian, gay, bisexual, transgender or intersex offenders in dedicated units or wings solely based on such identification. In interview with the one offender who self-disclosed being gay, he did not feel he was housed any differently because of his sexual orientation. Detainees that claim prior victimization or prior sexual predator behavior. Each was referred to the mental health staff. During the onsite audit 4 gay detainees, 3 detainees that claim victimization and two transgender detainees were interviewed. All detainees interviewed indicated on the first day of arrival they were seen by Mental Health or PREA compliance manager. Compliance was determined by review of policy, forms, the at-risk log, and interviews with the PREA coordinator, agency head, and Facility Administrator.
115.43	Protective Custody

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA Statement of Fact PAQ 115.43 (a): The facility does not place offenders at high risk for victimization in involuntary segregated housing unless an assessment of all available alternatives has been made and a determination has been made that there is no available alternative. Based on the PAQ and Statement of Fact, no detainee has been housed in segregation due to detainee being at high risk of being sexually victimized. 115.43 (b): Offenders placed in segregated housing for this purpose have access to programs, privileges, education and work opportunities to the extent possible. The facility will document and justify any restrictions imposed. 115.43 (c): The facility will assign such offenders to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, not to exceed a period of 30 days. 115.43 (d): If involuntary segregated housing assignment is made, the facility will document the basis for the facility's concern for the offender's safety and the reason no alternate means of separation can be arranged. 115.43 (e): In cases where involuntary segregated housing is used for longer than the initial 30 days, the facility will review the status every 7 days to determine if ongoing involuntary housing is needed. According to information provided on the Pre-Audit Questionnaire and in interview with the Facility Administrator and security staff who supervise offenders in RHU, in the past 12 months there has not been a time that an offender found at high risk of victimization or an offender who alleged sexual abuse was placed in involuntary segregated housing. Compliance with this standard was determined through review of procedures, observation during tour and interviews.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

PREA Brochure English/Spanish

PREA Posters

PREA Reporting Hotline report

Documentation of Verbal Reports.

115.51 (a): BCJ policy mandate that facilities provide multiple internal ways for detainees to privately report sexual abuse and sexual harassment, provides multiple internal ways for detainees to privately report retaliation by other detainees or staff for reporting sexual abuse and sexual harassment, provide multiple internal ways for detainees to privately report staff neglect or violation of responsibilities that may have contributed to such incidents. Policies also mandate that a private entity or office able to receive and immediately forward detainee reports of sexual abuse and sexual harassment to agency officials and that the private entity or office allow the detainee to remain anonymous upon request. Offenders are informed in the Offender Handbook and on poster located throughout the facility and by almost all detainee telephones.

The PREA Brochure and PREA Posters specifically provide the following ways for offender to report:

Report to any staff

Write Directly to PREA Compliance Manager

File a grievance

Call National Hotline speed dial

Victim Advocate Information Third

Party (friends/family)

Offender interviewed new of the multiple way to report. Most stated they would tell a staff member they trusted.

The auditor called the speed dial numbers several times during the tour. Each telephone call was completed in a timely manner and appropriate staff answered the calls and were ready to take the report. The Victim Advocate phone was answered by a victim advocate staff.

115.51 (b): The facility also provides multiple external ways for offenders to report allegations to a public or private agency that is not part of BCJ. Offenders are informed on posted information they can dial National Hotline

115.51 (c): Staff interviewed were aware of the requirement to accept reports made verbally, anonymously and from third parties. All staff interviewed indicated they would document verbal reports immediately and notify the shift supervisor by phone or in person.

115.51 (d): Staff have access to private reporting by calling the BCJ Coordinator. Employee Handbook informs employees of their responsibility of reporting sexual abuse and sexual harassment and their reporting options. Staff interviewed knew how to privately report sexual abuse and sexual harassment of offenders.

Compliance was determined by testing the telephone system, reviewing policies and procedure, posters, and the resident handbook. Compliance was also determined by interviews with residents, staff, shift supervisors, PREA Coordinator and Facility Administrator

115.52

Exhaustion of administrative remedies

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

Third Party Reporting

Kiosk Grievances filing

PREA Posters

115.52 (a) BCJ Policy 950 PREA provides a procedure in place for offenders to submit grievances regarding sexual abuse and the agency has procedures for dealing with these grievances. Poster located throughout the facility advise resident that they may file a grievance. The resident and third-party brochure explains the process for filing a grievance. Any grievance that alleges sexual abuse, sexual harassment, retaliation for reporting an allegation or for cooperating in an investigation will be immediately forwarded to the facility Investigators and Jail Administrator.

115.52 (b): There is no time limit when an offender can submit a grievance regarding sexual abuse. BCJ does not impose a time limit to any portion of a grievance that does not allege an incident of sexual abuse. Offenders are not required to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse. Agency policy does not restrict BCJ's ability to defend against a lawsuit filed by a detainee on the ground that the applicable statute of limitations has expired. The PREA Compliance Manager receives all copies of grievances related to sexual abuse or sexual harassment for monitoring purposes. In interview with the PREA Compliance Manager and information provided on the Pre-Audit Questionnaire, in the past 12 months there were four (4) PREA related grievances filed. There were 18 grievance that claimed to be PREA related, however, only 4 were PREA related grievances. The other grievances were managed as a routine grievance. All grievance were investigated and resolved within 10 working days.

115.52 (c): Policy provides that offenders have a right to submit grievances alleging sexual abuse to someone other than the staff member who is the subject of the complaint and the grievance will not be referred to the subject of the complaint. If a third-party file a grievance on a detainee's behalf, the alleged victim must agree to have the grievance filed on his behalf.

115.52 (d): A final decision shall be issued on the merits of any portion of the grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90-day time period shall not include time consumed by individuals in the facility in preparing any administrative appeal.

115.52 (e): Third parties such as fellow offenders, family members, attorneys or outside advocates may assist offenders in filing requests for administrative remedies relating to allegations of sexual abuse and may file on behalf of offenders. The alleged victim must agree to have the request filed on his or her behalf; however, he/she is not required to personally pursue any subsequent steps in the administrative remedy process. If the offender declines to have the request processed on his or her behalf, the agency shall document the offender's decision. In interview with the PREA Compliance Manager and on information provided in the Pre-Audit Questionnaire, in the past 12 months, there were no grievances filed by a third party.

115.52 (f): Policy provides offenders may file an emergency grievance if he/she is subject to substantial risk of imminent sexual abuse. After receiving an emergency grievance of this nature, the facility administrator or designee will ensure that immediate corrective action is taken to protect the alleged victim. An initial response to the emergency grievance to the individual is required within 48 hours and a final decision will be provided within five calendar days. In interview with the PREA Compliance Manager and on information provided on the Pre-Audit Questionnaire, in the past 12 months, there were no emergency grievances alleging sexual abuse filed.

115.52 (g): An offender can be disciplined for filing a grievance related to alleged sexual abuse if it is determined that the detainee filed the grievance in bad faith. There were 3 detainees disciplined for filing a grievance in bad faith.

The jail has installed a new Kiosk system that includes a grievance form. Detainee can file a grievance using the Kiosk system and it will go directly to the PREA coordinator who will meet with the detainee and provide a copy of the grievance to the investigator for investigations. If it an emergency grievance the PREA coordinator will notify the Jail Administrator and act on the grievance within 24 hours.

Compliance was determined by review of the policies, grievances, and by interviews with PREA Coordinator and Facility Administrator

115.53

Inmate access to outside confidential support services

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Acknowledgement of Receipt of Orientation BCJ Policy 950 PREA MOU with Gulf Coast Sexual Assault Program Interviews with GCSAP Victim Advocacy PREA posters (English and Spanish) 115.53 (a): BCJ Policy 950 PREA addresses the agency/facility's policies on providing offenders with access to outside victim advocates for emotional support services related to sexual abuse. The facility enables reasonable communication between the offenders and these agencies in a confidential manner. The offenders are informed by the facility and according to interviews with the emotional support staff of the extent to which communications will be monitored. According to the PREA compliance manager the facility would monitor only to the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws. Detainees that are being housed due to an immigration detainers are provided with immigration telephone numbers during their initial booking. 115.53 (b): Residents PREA Brochure provides a phone number and address of the Gulf Coast Sexual Assault Program in the detainee Brochure and poster located throughout the facility. The auditor called the number and spoke with a counselor with the GCSAP. 115.253 (c): The facility has a MOU with GCSAP to provide emotional support. The center indicated that detainees that call or write their office are provided with emotional support during the call and the center would work with the facility to set up a time for a victim emotional support staff member to visit with the detainee or talked to the detainee in a private office. In interview with the Victim Support staff at GCSAP, staff indicated they go to the jail several time a year to meet with detainees about sexual abuse. Often time these meetings are about instances that happened prior to be incarcerated and in some cases they are to help victims of domestic violence prior to coming to jail. Compliance was determined by review of PREA brochure, poster located throughout the center and interviews with the GCSAP staff, PREA Coordinator and Facility Administrator.

115.54	Third-party reporting
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ PREA Website

Poster – Information on the PREA compliance manager and Jail Administrator.

Third Party reporting posters

115.54 (a): Reporting Posters are visible in the visitation room, lobby and is found in the PREA brochure. BCJ provides third party reporting in multiple ways. The auditor called the jail hotline and spoke to a dispatcher who notified the PREA coordinator within thirty minutes.

The third-party poster provides the following options for third party reporting:

1. Formal Grievance Process
2. Tell a Case Counselor
3. Tell a staff member
4. Chaplain or volunteer
5. Rape Crisis Center 866-218-4738
6. National Sexual Abuse Hotline 1-800-656-4738
7. Jail Telephone #215-5077
8. Sheriff's office website

This information is posted in areas visible to staff and visitor poster include anyone needed to report abuse/ sexual harassment or to report an allegation of Sexual Abuse/ Sexual Harassment on behalf of an individual who is or was housed in any BCJ facility or program, may contact the Facility Administrator's Office in the facility where the alleged incident occurred or where the individual is housed.

Exceed compliance was determined by review of the postings, reviewing the websites and interviews with PREA Coordinator and Facility Administrator. Additional compliance was determined by calling the Rape Crisis Center, National Sexual Abuse Hotline and Jail Telephone.

115.61	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard: Staff training

Specialized medical training.

Mandatory reporting Survey of Vulnerable Persons

PREA Lesson Plan

Statement of Fact

Staff Report

BCJ Policy 950 PREA

115.61 (a): BCJ Policy 950 PREA mandates staff, volunteers and contractors must take all allegations of sexual abuse and sexual harassment seriously and are required to report immediately any knowledge, suspicion or information regarding an incident of sexual abuse or sexual harassment and any retaliation against offenders or staff who reported such an incident, and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. This information is to be reported the Shift Supervisor, the PREA Compliance Manager, or facility executive staff. In interview with random staff, volunteer, and contractors, they knew their reporting duties. Staff receive training on reporting. BCJ provides specialized training program for medical and mental health professionals that includes duties to report, State's vulnerable persons reporting duties and confidential reporting duties. The facility provided a statement of fact that there have been no allegations by vulnerable persons in the last 12 months.

115.61 (b): Policy and training mandates that apart from reporting to designated supervisors, staff are not to reveal any information related to a sexual abuse report to anyone. Staff, volunteers and contractors interviewed knew this information is to be kept confidential and knew whom to report allegations. During the tour of the facility and during subsequent visits in the facility the auditor asked non custodial staff how they would report an allegation of sexual abuse or sexual harassment. All staff indicated they would report information to the nearest custodial staff.

115.61 (c)(d): Medical specialized medical training includes medical staff are required to report sexual abuse and to inform offenders of their duty to report and the limitations of confidentiality at the initiation of services. The training also provides reporting of a vulnerable adult under a State or local vulnerable persons statute, under applicable mandatory reporting laws. The facility houses offenders under the age of 18. Medical and mental health staff interviewed confirmed this practice. The Nurse indicated that the offenders sign a statement that includes her limitation of confidentiality.

115.61 (e): In interview with the facility administrator and his executive team, the BCJ reports all allegations of sexual abuse and sexual harassment, including third party and anonymous reports to the facility investigators, BCJ PREA coordinator and Bay County Sheriff.

According to statement of fact there have been no reports from third parties, contractors or volunteers in the last 12 months. Compliance was determined by review of the policies, training curriculum and interviews with random staff, medical staff, and Facility Administrator. Interviews with the Agency PREA Coordinator and agency head confirmed that BCJ mandates staff, volunteers, and contracts report all sections of this standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

PREA lesson plan

Statement of Fact

115.62 (a): BCJ Policy 950 PREA mandates when the facility learns that an offender is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the alleged victim. All allegations of sexual abuse are to be handled in a confidential manner and conversations with the victim sensitive, supportive, and nonjudgmental.

The PAQ indicated in the past 12 months there were no times it was necessary for the facility to take immediate action regarding an offender being in substantial risk of sexual abuse. The facility administrator stated that if it was suspected an offender was at substantial risk of sexual abuse, he would immediately move the offender and investigate. Staff interviewed was aware of their responsibilities if they felt an offender was at risk for sexual abuse. Random staff and shift supervisor indicated the offender that was in imminent danger would be separated from the accuser and would be moved to another area of the jail. If the imminent danger involved a staff member, the staff would be move to another area of the jail and the shift supervisor would ensure the staff and detainee were placed on keep separate list or staff would be placed on administrative leave or non-jail duty.

Compliance was determined by review of policy and interviews with the BCJ agency head, PREA Coordinator, Facility Administrator, random staff, and segregation supervisor.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA Statement of Fact PAQ 115.63 (a)-(c): BCJ Policy 950 PREA mandates on receiving an allegation that an offender was sexually abused while confined at another facility, the incident will be reported to the PREA Compliance Manager. The Facility administrator will notify the agency or facility head where the abuse is alleged to have occurred. but no later than 72 hours of receiving the allegation. The PREA Compliance Manager will maintain documentation that notification was made and include all actions taken regarding the incident. 115.63 (d): Interview with the facility administrator and PREA compliance manager they indicated along with notification to the sending facility director the facility administrator will notify facility investigator and will document notification of an allegation of sexual abuse or sexual harassment and offer to provide whatever services needed by the facility investigator during the investigative process. According to the PAQ and statement of fact there have been no allegations of offender being sexually abused while confined at another facility and one allegation that an offender was sexually abused at Bay County Jail. The investigator indicated that he was notified of the allegation and sent a copy of the investigation to Leon County Jail. Compliance was determined by review of the policy and interviews with intake staff, jail investigator, agency head, PREA Coordinator and Facility Administrator.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA BCJ PREA Procedure 403.00 Staff Training Volunteer Training Contractor Training PAQ Statement of Fact BCJ Policy 905.0 and PREA procedure 403 and staff training requires that correction staff that are the first responders of a sexual assault shall: · Separate the alleged victim and abuser, · Preserve and protect any crime scene until appropriate steps can be taken to collect any 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, 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, if the abuse occurred within a time period that still allows for the collection of physical evidence. · Notify the shift supervisor by telephone or in person and tell only those staff need to know in assisting you in carrying out these responsibilities. · Staff are issued a card that includes steps to take as first responders. All random staff were able to articulate their responsibilities and have received training on preserving and protecting the crime scene. 115.64 (b): Staff training requires that non correctional staff that are first responders are required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff. All non-contact staff interviewed that were interviewed knew their duties and reported they received the training during yearly in service and on reminder training that is sent out by the PREA compliance managers from time to time. During the last 12 months there were 27 allegations of sexual abuse or sexual harassment at the facility. Sixteen times the first responder separated the alleged victim and abuser. Four time the alleged incident happened in a timeframe that allowed staff to collect physical evidence. One was reported to the medical director. In interviews with him, he was able to articulate all actions that was taken as a non-correctional staff first responder. Compliance was determined by review of the policies and training and by interviewing non-contact staff during the onsite audit. As an auditor I randomly tour the administrative, classification area and educational areas and ask staff if I could ask them a question. After reminding them that they don't have the answer the questions I ask them, "what would you do if an offender came to you and said it was sexual assaulted". All staff were able to articulate they would follow the above requirements.
115.65	Coordinated response

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: Bay County Jail PREA Coordinated Response Plan BCJ PREA Procedure 403.00 BCJ Policy 950 PREA PREA Coordinated Response Plan Checklist Medical and Mental Health Screening 115.65 (a): BCJ Policy 950 PREA mandates that facility will have a coordinated response plan. BCJ PREA Procedure 403.00 provides written guidance to staff and administration regarding actions to take and notifications to be made. A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Coordinated Response Plan includes action required after report of sexual abuse: Initial response Shift supervisors Responsibility Facility Crime Scene Notification required when a sexual abuse is alleged Evidence Protocol Medical Response Mental Health Response Investigative Responsibilities Responsibilities when sexual harassment is alleged Responsibilities when sexual activity is alleged Each of the above responses includes but not limited to staff, contractors, victim advocates, OIG, and BCJ PREA coordinator A PREA Incident Checklist for Incidents of Sexual Abuse and Harassment is completed to ensure that all steps of the plan are carried out and proper notifications are made. The Captain, Lieutenants, the PREA Compliance Manager, the Lead Investigator, and members of the administrative staff are responsible to ensure compliance to the plan. Staff interviewed confirmed that they are knowledgeable of the plan and the necessary actions to be taken in response to an allegation of sexual abuse.

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

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

Statement of Fact

BCJ and or the facility did not enter into a collective bargaining agreement or other agreements that would limit the agency's ability to remove an alleged staff sexual abuser from contact with any offender pending the outcome of an investigation. Per the statement of fact, Bay County Sheriff's Office does not participate in collective bargaining agreements.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA Documentation of Monitoring Protection from Retaliation Logs Statement of Fact 115.67 (a): BCJ has as policy to protect detainees who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other detainees or staff. BCJ designated the PREA Coordinator and Classification Supervisor as responsible for monitoring retaliation (PC monitors staff, Classification staff monitors detainees). as the person responsible for monitoring retaliation. 115.67 (b): The procedure states the agency has multiple protection measures, such as housing changes or transfers for detainees, victims or abusers, removal of alleged staff or detainee abusers from contact with victims and emotional support services for detainees or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. If any other individual who cooperates with an investigation expresses a fear of retaliation, appropriate measures to protect that individual against retaliation are put in place. 115.67 (c): Detainees who allege sexual abuse will be monitored by the PREA Compliance Manager who will meet weekly with the alleged victim beginning the week following the incident and continue monitoring for at least 90 days or longer if there is a continuing need. The Human Resource Manager and Jail Administrator will monitor conduct and treatment of employees who reported staff misconduct or employee witness who cooperate with these investigations every 30 days for 90 days. Retaliation monitoring of detainees is documented with the investigative files. A resident that made an allegation indicated he was told they would monitor him, and he met with his Mental Health staff member for several times and asked how he was doing and so forth. He said the investigation is ongoing and he meets with the Classification Supervisor usually every week. 115.67 (d): Procedure also requires Monitoring of detainees includes periodic status checks. The PREA Coordinator was interview and indicted he would review the monitoring logs on the data base on an ongoing basis and randomly will see the detainee during tour to check on his/her status. 115.67 (e): Retaliation monitoring may be terminated if it is determined that the allegation was unfounded. The Retaliation monitor indicated while the official monitoring will end, the facility would continue to check on the detainee for retaliation for making a report. In interview with Retaliation Monitor, the PREA coordinator and classification supervisor and information provided on the PreAudit Questionnaire, in the past 12 months there were no incidents of retaliation that occurred. Compliance was determined by review of the monitoring logs, agency policy and procedures, investigative files and interviews with the retaliation monitor, detainee that made an allegation, agency head, PREA Coordinator and Facility Administrator.
115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

BCJ PREA Procedure 403.00

PAQ

115.68 (a): BCJ Policy 950 PREA requires involuntary segregated housing may be used only after an assessment of available housing alternatives has shown there is no other means of protecting the detainee. Any and all use of segregated housing to protect a detainee who is alleged to have suffered sexual abuse subject to the requirements of § 115.43. The facility has not utilized volunteer or involuntary restrictive housing for a PREA related incident or for protection of detainees for sexual abuse in the last 12 months. This was verified by statement of fact, PAQ, and PREA coordinator. A review of the logs for residents in the Segregation unit did not reveal any PREA related segregation. One gay resident was in protective custody and was interviewed to determine if it was a PREA incident. Detainee indicated he was 19-year-old, never been in any trouble and was scared to be in population. He had a bond hearing the following week and asked for protective custody when he arrived at the jail.

Compliance was determined by review of the PAQ and interviews with segregation supervisor, PREA Coordinator and Facility Administrator. .

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ PREA Procedure 403.00

BCJ Policy 950 PREA

Investigative Reports

PAQ

115.71 (a): BCJ Policy 950 PREA and BCJ PREA Procedure 403.00 requires an administrative or criminal investigation is completed for all allegations of sexual abuse and sexual harassment at the BCJ, promptly, thoroughly, and objectively, including third party and anonymous reports. Bay County Sheriff's office Criminal Investigative Division (CID) conducts criminal investigation. The BDJ investigator is a sworn law enforcement trained investigator and may conduct the investigation or refer to CID for investigative support or requested to conduct the criminal investigation, especially when it involves staff.

115.71 (b): The facility has two (2) trained investigators and facility investigators have completed specialized training in the investigation of sexual abuse allegations. The facility provided documentation of completion of specialized investigative training completed by facility investigators. The investigators were interviewed and were extremely knowledgeable regarding conduct investigations in a confinement setting.

115.71 (c): It is the responsibility of Investigators or CID, with the assistance of the facility investigators to gather and preserve circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data. Investigator will interview alleged victims, suspected perpetrators and witnesses and review prior reports of sexual abuse involving the suspected perpetrator.

115.71 (d): When the quality of evidence supports criminal prosecution, CID may conduct compelled interviews only after consulting with prosecutors.

115.71 (e): The credibility of an alleged victim, suspect or witness shall be assessed on an individual basis and shall not be determined by the person's status as a detainee or staff. A detainee who alleges sexual abuse is not required to submit to a polygraph examination.

115.71 (f): In interviews with the investigators, they indicated that investigator review an effort to determine whether staff actions or failures to act contributed to the abuse. The administrative investigation shall be documented in a written report and include a description of the physical and testimonial evidence, the reasoning behind credibility assessments and investigative facts and findings.

115.71 (g): A criminal investigation shall be documented in a written report that contains a thorough description of physical, testimonial and documentary evidence. The facility shall request a copy of completed investigative reports from CID.

Allegations will be tracked on the PREA Tracking Log.

115.71 (h): Substantiated allegations of conduct that appears to be criminal shall be referred for criminal prosecution. On information reported on the Pre-Audit Questionnaire and in interview with facility investigators, since the last PREA audit there were 3 allegations of sexual abuse referred for prosecution.

115.71 (i): The agency will retain all written reports as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

115.71 (j): The departure of an alleged abuser or victim from employment or control of the facility or agency, shall not provide a basis for terminating an investigation

115.71 (l): When outside agencies investigate sexual abuse allegations, the facility will cooperate with investigators and will try to remain informed about the progress of the investigation. In interview with the PREA Coordinator, he reported that facilities are required to check in with outside investigators at a minimum of every 30 days and document that contact was made to ensure that requirements such as retaliation monitoring and notices of outcome of investigations are completed as required.

In interview with facility investigators, they were knowledgeable of their responsibilities of conducting administrative

investigations of all allegations received and knew when to refer allegations that appear to be criminal for criminal investigation. The facility utilizes facility investigators and Sheriff's criminal investigative division to conduct investigations.

Compliance was determined by review of the agency policy and procedures, training curriculum, PAQ, investigative reports and interviews with facility investigator and agency head designee, PREA Coordinator and Facility Administrator.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA BCJ PREA Procedure 403.00 Administrative report of investigation Investigator training curriculum 115.72 (a): Based on BCJ Policy 950 PREA and Investigator training the facility shall impose no standard higher than the preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. In interview with facility investigators, they confirmed this practice. Compliance was determined by review of policy, training curriculum, and interview with trained investigators.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 BCJ PREA Procedure 403.00 Investigative files PAQ Notice of Outcome of Investigations 115.73 (a): BCJ Policy 950 PREA and BCJ PREA Procedure 403.00 indicate that following an investigation of sexual abuse of an detainee, the detainee shall be informed in writing as to whether the allegation has been determined to be substantiated, unsubstantiated or unfounded. The investigator is responsible for preparing the Notification of Outcome of Allegation form and presenting it to the alleged victim for his signature. The detainee receives a copy of the form, and a copy is forwarded to the PREA Coordinator office. 115.73 (b): According to policy and PREA Coordinator if the facility did not conduct the investigation, the facility shall request the relevant information from the investigative agency in order to inform the detainee. 115.73 (c): Per the procedures, every allegation is investigated, and every investigated allegation outcome was reported to the detainee with a finding as to whether it was substantiated, unsubstantiated or unfounded. if the allegation is against a staff member, the facility shall inform the detainee whenever the staff member is no longer posted within the detainee's unit, no longer employed at the facility, has been indicted on a charge related to sexual abuse within the institution, or has been convicted on a charge related to sexual abuse within the institution; if the detainee allegation is against an detainee, the facility shall inform the detainee whenever the alleged abuser has been indicted on a charge related to sexual abuse within the facility, or has been convicted on a charge related to sexual abuse within the facility. 115.73 (d): Policy and procedure requires following a detainee's allegation that he has been sexually abused by another detainee, the agency will inform the alleged victim if the alleged abuser has been indicated on a charge related to sexual abuse within the facility or if the alleged abuser has been convicted on a charge related to sexual abuse within the facility. 115.73 (e): All Notification of Outcome of Allegation or attempted notifications are documented and filed in the corresponding investigative file. There were 18 notifications during the last 12 months. Compliance was determined by review of the agency and facility policy and interviews with investigators, PREA Coordinator and Facility Administrator and review of investigative files.

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy

950 PREA

PAQ

115.76 (a): BCJ Policy 950 PREA establishes the standard that employees shall be subject to disciplinary sanctions up to and including termination for violating agency sexual abuse policy.

115.76 (b): Based on policy termination shall be the presumptive disciplinary sanction for staff who have engaged in sexual abuse.

115.76 (c): Based on policy and facility administrator and human resources staff disciplinary sanctions for violations of agency policies related to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) shall be commensurate with the nature and circumstances of the act committed, the staff member's disciplinary history and the sanctions imposed for comparable offenses by other staff with similar histories.

115.76 (d): All terminations for violations of the agency's policies on sexual abuse and sexual harassment, or resignations, shall be reported to law enforcement and licensing agencies unless the activity was clearly not criminal.

In interview with the Facility Administrator and in information provided on the Pre-Audit Questionnaire, in the past 12 months, no staff member was terminated or received any adverse action due regarding a PREA violation. There were no substantiated cases of staff-on-detainee sexual abuse. Staff training includes personnel policies involving violation of PREA standards or having any sexual activity with detainees.

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA BCJ PREA Procedure 403.00 Contractor PREA training curriculum PAQ Statement of Fact 115.77 (a): Any contractor or volunteer who engages in sexual abuse/sexual harassment would be prohibited from contact with detainees and would be reported to the appropriate investigator and law enforcement or relevant professional licensing/certifying bodies unless the activity was clearly not criminal in nature. Any contractor or volunteer who engages in sexual abuse even though it was not criminal will be reported to professional licensing/certifying bodies. 115.77 (b): In cases that were not criminal in nature, the facility would take appropriate remedial measures and consider whether to prohibit further contact with detainees. During the previous year, there no incident where a contractor or volunteer was accused of, suspected, or found guilty of sexual abuse or sexual harassment at BCJ. Compliance was determined by review of the volunteer and contractor training and statement acknowledging violation of PREA standards. Also interviews with contractors and one volunteer, PREA Coordinator and Facility Administrator confirm compliance with this standard.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA BCJ Inmate Rules Statement of Fact Posters located throughout the facility 115.278 (a): According to BCJ rules and sanctions, if a detainee is found guilty of engaging in sexual abuse involving another resident, either through administrative or criminal investigations, the resident will be subject to formal disciplinary sanctions. The Detainee Program PREA Brochure outlines violations a detainee will be disciplined for and the sanctions to be imposed. 115.278 (b): Sanctions will be commensurate with the nature and circumstances of the abuse committed, the resident's disciplinary history and the sanctions imposed for comparable offenses by other detainees with similar histories. 115.278 (c): Based on BCJ Policy 950 PREA the disciplinary process may consider whether an individual's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction, if any, should be imposed. 115.278 (d): If the facility offers counseling or other interventions designed to address the reasons or motivations for the abuse, the facility shall consider requiring the offending individual to participate. 115.278 (e): Disciplining a resident for sexual contact with an employee is prohibited unless it is found that the employee did not consent to the contact. 115.278 (f): A report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred shall not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. 115.278 (g): The agency prohibits all sexual activity between residents. Facilities may not deem that sexual activity between detainees is sexual abuse unless it is determined that the activity was coerced. In information provided on the Pre-Audit Questionnaire and in interview with the jail administrator, in the past 12 months there were 2 disciplinary sanctions imposed for detainees violating the sexual abuse policies. There was one allegation that resulted in criminal charge of Aggravated Battery Charge during 2021. Compliance was determined by review of the policy, review of an incident report and interviews with the investigator, PREA Coordinator and Facility Administrator.

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

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

Mental Health evaluation notes

115.81 (a): If during initial PREA screening, the detainee reports prior sexual victimization, whether in an institutional setting or in the community, staff will ensure the detainee will be referred to mental health for further evaluation within 14 days. In review of the 30-day follow-up assessments the detainee discloses prior victimization not reported during initial screening, the

PREA Compliance Manager will refer the detainee to mental health for further evaluation. Medical and the Mental Health Provider, according to their professional judgement, determine the nature and scope of these services. In information reported by the staff that conducts screening, 100% of the detainees assigned to the facility in the past 12 months who disclosed prior victimization were offered a follow-up meeting with the Mental Health Provider. The mental health staff indicated that she sees any victims of sexual abuse that is reported at the jail or when they are screened during intake at the jail.

115.81 (b)(c): Any detainee who reports during initial PREA screening or in follow-up screenings he has previously perpetrated sexual abuse in an institutional setting or in the community will offered a follow meeting with medical or mental health within 14 days of the screening. Any detainee that was charged with a sex offense or had history of being a sexual predator was offered mental health follow-ups but declined these services.

115.81 (d): Information related to sexual victimization or abusiveness in an institutional setting is limited only to medical and mental health practitioners and other employees as necessary to inform treatment plans, security and management decisions or otherwise federal, state or local law.

115.81 (e): Medical and mental health providers obtain consent from detainees before reporting information about prior sexual victimization that did not occur in an institutional setting. Detainees have a right to refuse these services.

Based on interview with medical provider that coordinates for mental health services detainees who report prior sexual victimization and those who disclose previously perpetrating sexual abuse are being referred for evaluation and consent forms or refusals are being obtained. The mental health staff are available during the intake process and conduct suicide screening and interviews with transgender detainees. In interview with the mental health provider, typically the mental health staff will interview detainees with history of victimization during their intake process.

Compliance with this standard was based on policies, mental health referrals, interview with the medical administrator, intake staff and PREA coordinator.

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

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

BCJ PREA Procedure 403.00

Statement of Fact

115.82 (a): BCJ Policy 950 PREA and the coordinated response plan provide a procedure for Victims of sexual abuse to receive timely, unimpeded access to emergency medical treatment and crisis intervention services. Medical and mental health providers, according to their professional judgement, determine the nature and scope of these services.

115.282 (b): All staff first responders are trained to take preliminary steps to protect the victim. Security staff first responders are to take preliminary steps to protect the victim and notify facility medical and mental health staff immediately. The Mental Health Provider would present a Consent to Evaluate: Sexual Abuse Allegation form to the alleged victim prior seeking their consent to conduct a mental health evaluation of an alleged victim of sexual abuse.

115.82 (c): BCJ Policy 950 PREA mandates victims are offered access to emergency contraception and prophylactics for sexually transmitted infections in accordance with professionally accepted standards of care, where medically appropriate.

DCJ has a full-time medical department including examination areas, private, semi-private and ward rooms. It as full-time physicians and nurses. GCSAP has on call SANE and victim advocate staff. The medical area is behind the secure perimeter however it is part of the administrative building. Forensic examinations are conducted at the jail by forensic examiners (SANE) and or accompanied to the jail with victim advocates. In interviews with the medical staff, Bay County jail will support the SANE staff and discuss with female patients' information about and timely access to emergency contraception and to all patient's information on sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Random interview with detainees were conducted in a private office in the medical area. During that time the lead nurse and physician showed the auditor the SANE examination room, Rape Kit, forensic examination bags. The attending physician and mental health staff would determine the appropriate medical follow up care and would continue the care while housed at the Bay County Jail. If a detainee is released from the jail, the physician would write a discharge plan and mental health care would write a plan of care summary for the detainee and the medical staff would make an appointment with the detainee for medical and mental health care through GCASP or Ascension Sacred Heart Bay Medical Center.

115.82 (d): Based on review of policy and in interviews with PREA compliance manager all services are provided without financial cost to the victim, regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

Compliance was determined by review of the coordinated response plan, MOU with GCSAP. Compliance was also determined by interviews with nurse, first responders, random staff, PREA Coordinator and Facility Administrator. The facility provides a statement of fact that there are medical staff on duty 24 hours a day.

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

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

BCJ PREA Procedure 403.00

Detainee Brochure

115.283 (a): The facility offers ongoing medical and mental health care to all residents who have been victimized by sexual abuse.

115.283 (b): According to BCJ Policy 950 PREA treatment services would include the evaluation and treatment would include follow-up services, treatment plans and referrals for continued care upon transfer or release. According to the mental health and medical administrator medical and mental health care provided is consistent with the community level of care.

115.283 (d): The facility does house females. Per interview with the medical staff the facility would provide the appropriate pregnancy services as required by the standard.

115.283 (e): The facility does house females. Per interview with the medical staff, if pregnancy results from vaginal penetration, victims will receive timely and comprehensive information about and timely access to all lawful pregnancyrelated medical services.

115.283 (f): Resident victims of sexual abuse while incarcerated will be offered tests for sexually transmitted infections as medically appropriate.

115.283 (g): All services will be provided without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.

DCJ has a full-time medical department including examination areas, private, semi-private and ward rooms. It as full-time physicians and nurses. GCSAP has on call SANE and victim advocate staff. The medical area is behind the secure perimeter however it is part of the administrative building. Forensic examinations are conducted at the jail by forensic examiners (SANE) and or accompanied to the jail with victim advocates. In interviews with the medical staff, Bay County jail will support the SANE staff and discuss with female patients' information about and timely access to emergency contraception and to all patient's information on sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Random interview with detainees were conducted in a private office in the medical area. During that time the lead nurse and physician showed the auditor the SANE examination room, Rape Kit, forensic examination bags. The attending physician and mental health staff would determine the appropriate medical follow up care and would continue the care while housed at the Bay County Jail. If a detainee is released from the jail, the physician would write a discharge plan and mental health care would write a plan of care summary for the detainee and the medical staff would make an appointment with the detainee for medical and mental health care through GCASP or Ascension Sacred Heart Bay Medical Center.

Compliance was determined by review of the BCJ policy and procedure, interviews with medical, mental health staff and GCSAP staff.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREA

BCJ PREA Procedure 403.00

Investigative Report

Report of Investigation

Critical Incident Team Reviews

115.86 (a-b): BCJ PREA Procedure 403.00 requires facility to conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation in which the allegation has been determined to be substantiated or unsubstantiated within 30 days of the conclusion of the investigation. At the time of the PAQ there were 7 allegations of sexual abuse in the last twelve month that required an incident review team meeting at the time of the audit. An incident team meeting was completed on all substantiated and unsubstantiated investigations unless the investigation had not been completed in time for a team meeting.

115.86 (c): The Incident Review Committee consists of the facility administrator, Gang Intel investigator, PREA Coordinator, Major (Jail Administrator), Lead Investigator, Classification Supervisor and the Physician.

115.86 (d): The team considers whether the incident was motivated by race, ethnicity, gender identity, perceived status or gang affiliation. The team examines the area where the incident was alleged to have occurred and assesses whether physical barriers in the area may have contributed to the abuse, whether monitoring technology should be deployed or augmented and whether the staffing levels at the time of the incident were adequate.

115.86 (e): The facility will implement the recommendations for improvement or documents the reasons for not doing so. When interviewed, the members of the incident review team knew their responsibilities as they relate to the review of sexual abuse incidents.

Compliance was determined by agency and facility policies, BCJ investigative data base which mandates after action reports on all allegations of sexual abuse or sexual harassment except when they are unfounded.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Annual Report

PREA Tracking Log

BCJ Policy 950 PREA

115.87 (a): BCJ Policy 950 mandates that all facilities under the BCJ umbrella collect uniform data for every allegation of sexual abuse at all facilities under their control. BCJ requires facilities to utilize a standardized instrument that includes clearly defined definitions. The incident-based data collected shall include, at minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. Policy also requires that all private facilities contracted for housing detainees comply with PREA standards and provide information that is required for DOJ survey monthly.

115.87 (b): The PREA Coordinator ensures that the data is compiled on the Monthly PREA Incident Tracking Log. The PREA coordinator ensures that a PREA Survey is created, updated, and submitted for review and approval in the PREA Portal for every allegation of sexual abuse, sexual harassment and sexual activity. At least annually, the PREA Coordinator aggregates this data.

115.287 (c): The data collected, will be at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Bureau of Justice Statistics (BJS). The facility was requested to conduct the DOJ Survey during the on-site audit.

115.287 (d): The agency shall maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

115.287 (e): Bay County does not contract with private facilities for confinement of detainees. It has contracted with Walton County Jail to house up to 120 detainees. The agency obtains incident-based and aggregated data from the contracted Walton County Jail that is presently housing detainees for Bay County.

115.287 (f): Upon request, BCJ shall provide such data from the previous calendar year to the Department of Justice no later than June 30.

The facility provided a copy of the annual log for review. The log contained all elements required by policy. The review of the log and interview with PREA coordinator confirmed compliance with this standard.

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

The following policies, directives and documentation were reviewed in formulating compliance with this standard:

BCJ Policy 950 PREAs

BCJ Annual PREA Data Report

Corrective Action Plan

115.288 (a): BCJ reviews all the data and aggregates that data annually to assess and improve the effectiveness of its sexual abuse prevention, detection and response policies, practices and training by identifying problem areas, taking corrective action on an ongoing basis and preparing an annual report of its findings. This information is provided in the annual report.

115.288 (b): The PREA Coordinator reviews the data collected and the annual report includes a comparison of the current year's data and corrective actions with those from prior years and provides an assessment of the agency's progress in addressing sexual abuse.

115.288 (c): The PREA Coordinator forwards the annual report to the Jail Administrator and Sheriff for approval. The report is made public on the BCJ website.

115.288 (d): Before making aggregated sexual abuse data public, all personal identifiers are redacted as stated on the last page of BCJ's annual report.

Compliance of this standards was determined by reviewing annual reports for BCJ, review the facility policy and interviews with the PREA

Coordinator and Facility Administrator.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 BCJ Annual PREA Data Report MDOC Annual PREA Data Report 115.289 (a): BCJ Policy 950 PREA ensures that data collected are securely retained for at least 10 years according to BCJ policy. Investigative Files are maintained in a locked cabinet in the investigators detective's office. The information is also uploaded on a data based that is password protected and limits access to the jail administrator and the investigative team. 115.289 (b): BCJ makes all aggregated sexual abuse data from all its facilities made public annually on their website at A review of the website confirmed that the agency has PREA reports from 2017 until 2021 uploaded in the above website. 115.289 (c): Before making aggregated sexual abuse data public, BCJ removes all personal identifiers. 115.289 (d): BCJ Policy 950 PREAs Sexually ensures that data collected are securely retained for at least 10 years. Compliance was determined by review of three (3) annual report, policy, and interview with the PREA Coordinator. Compliance was also determined by review of the locked cabinet and having the investigator access the investigative data base.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following policies, directives and documentation were reviewed in formulating compliance with this standard: BCJ Policy 950 PREA PREA Audit Postings 115.401 (a): BCJ Policy 950 require during the three-year period starting on August 20, 2013, and each three-year period thereafter. Bay County Jail was audited in 2016 and 2019. It was scheduled to be audited during April of 2022. 115.401 (b): The jail was scheduled to conduct the audit in the last 3-year cycle. However, due to Coronavirus it was postponed on several occasion to have the audited completed in a safe environment for the detainees, staff, and auditor. 115.401 (h): During the audit, I was allowed access to all areas of Facility. I was allowed to visit areas throughout the facility during the official tour and additional visits to different areas of the facility while interviewing and observing camera locations. 115.401 (i): I requested personnel files, resident files, training records, investigation files, logbooks, and pertinent forms utilized to carry out the requirement of the audit process. Each document was provided in a timely basis. 115.401 (m): I interviewed random staff on duty for the for the first 24 hours of the audit and random sample of detainee during the onsite audit. One detainee declined to be interviewed and the facility did not prohibit me from interviewing detainees selected for interview. Interviews were conducted in a private area of the facility. 115.401 (n): Posting were displayed throughout the facility with the name and address of the PREA auditor. The auditor did not receive any correspondences from residents. The information was posted on March 19, 2022 and has been updated several times to meet the 6-week period for posting. The latest posting was August 1, 2022.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	115.403 (f): The facility is the only facility operated by the Bay County Sheriff's office. The facility was audited in 2016 and 2019. Those audits are maintained in the sheriff's office. A copy of the report may be reviewed in the sheriff's office.

Appendix: Provision Findings

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

	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes

	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higherlevel supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes
115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a)	Limits to cross-gender viewing and searches	

	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the facility does not have female inmates.)	yes
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes

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

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

	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	

	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	

	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes

	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes

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

115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes

115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes

115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes

115.32 (a)	Volunteer and contractor training	
	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes

115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes

115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes

115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	

	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

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

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	

	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
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115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes

	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	yes
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	

	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	

	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	

	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes
115.61 (b)	Staff and agency reporting duties	

	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
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115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including thirdparty and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

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

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

115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	

	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes
115.73 (b)	Reporting to inmates	

	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	

	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na
115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	

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

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	

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

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

115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	na