

PREA Facility Audit Report: Final

Name of Facility: Hernando Correctional Institution

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/13/2022

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input checked="" type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input checked="" type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input checked="" type="checkbox"/>
Auditor Full Name as Signed: Darla P. O'Connor	Date of Signature: 10/13/2022

AUDITOR INFORMATION	
Auditor name:	O'Connor, Darla
Email:	darla@preaauditing.com
Start Date of On-Site Audit:	09/12/2022
End Date of On-Site Audit:	09/13/2022

FACILITY INFORMATION	
Facility name:	Hernando Correctional Institution
Facility physical address:	16415 Spring Hill Drive, Brooksville, Florida - 34604
Facility mailing address:	

Primary Contact	
Name:	Winfred Warren
Email Address:	Winfred.Warren@fdc.myflorida.com
Telephone Number:	352)754-2163

Warden/Jail Administrator/Sheriff/Director	
Name:	Tamera Poynter
Email Address:	tamera.poynter@fdc.myflorida.com
Telephone Number:	352-754-2140

Facility PREA Compliance Manager	
Name:	Winfred Warren
Email Address:	Winfred.Warren@fdc.myflorida.com
Telephone Number:	
Name:	Julie Beasley
Email Address:	julie.beasley@fdc.myflorida.com
Telephone Number:	O: (352) 754-2166

Facility Health Service Administrator On-site	
Name:	Toni Alese, RN, MSN
Email Address:	talese@teamcenturion.com
Telephone Number:	352-754-2195

Facility Characteristics	
Designed facility capacity:	470
Current population of facility:	430
Average daily population for the past 12 months:	380
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Females
Age range of population:	22-75
Facility security levels/inmate custody levels:	Com (83) Min (183) Med (113) CLS (96)
Does the facility hold youthful inmates?	No
Number of staff currently employed at the facility who may have contact with inmates:	120
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	4
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	140

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

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

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

SUMMARY OF AUDIT FINDINGS	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
2	<ul style="list-style-type: none"> • 115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA coordinator • 115.31 - Employee training
Number of standards met:	
43	
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:	2022-09-12
2. End date of the onsite portion of the audit:	2022-09-13

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Panhandle Forensic Nurse Specialist The Dawn Center The inmates housed at HCI are provided the treatment services through Panhandle Forensic Nurse Specialist, Inc (SAFE/SANE exams) and Dawn Center (Victim Advocacy Services). When a SAFE/SANE examination is conducted, Dawn Center provides a victim advocate for the alleged victim.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	470
15. Average daily population for the past 12 months:	380
16. Number of inmate/resident/detainee housing units:	4
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

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

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	882
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:	3
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:	6

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:	6
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:	3
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:	5
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:	53
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:	6
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:	0
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:	2
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):	<p>Twenty inmates from targeted groups were interviewed. The Auditor interviewed the following:</p> <ul style="list-style-type: none"> Five transgender inmates. Six gay or bisexual inmates. One physically disabled inmate. Two Cognitively disabled inmates. One hearing impaired inmate. One visually impaired inmate. Two LEP inmates. Two inmates who disclosed abuse in screening. Zero inmates in segregation housing for PREA.
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:	120
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:	70
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:	30

<p>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:</p>	<p>The vast majority of volunteers are serving in a religious services capacity. Thirty contractors are staffing Suncoast. The remainder of the contractors are at Hernando CI. They are in the food service, canteen services, commissary, Johnson Control, Global Tel Tech, and Firemaster.</p>
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INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>15</p>
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<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<ul style="list-style-type: none"> <input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None
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<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The institutional count the first day of the on-site audit was 882. The Auditor used the alphabetical housing unit rosters of inmates to randomly select inmates from various age groups, ethnicities, and races. The Auditor randomly chose inmates from Hernando and satellite facility Suncoast to interview, ensuring diversity in age and race.</p> <p>During the on-site tour, the Auditor had several conversational encounters with inmates regarding sexual safety, including education, reporting, communication, responses, etc. This information was used to supplement the overall audit information gathering process. A total of fifteen formal random inmate interviews were conducted.</p> <p>As a result of the audit notice posting the Auditor did not receive any correspondence.</p> <p>At the beginning of each interview the Auditor made clear to the inmate why she was at the facility, what her role was in the PREA process and explained why interviews were needed. The Auditor also discussed the inmate's participation as voluntary and while helpful, was not required or mandated in any way. The Auditor then asked if the inmate wanted to participate and if so, could she ask a few questions. The Auditor would then ask the protocol questions. All random inmates willing participated in the interview process. All responses were handwritten onto the protocol form.</p> <p>During the random interviews, no PREA issues were revealed, no other interview protocols were accessed. All random inmates responded they were aware of the zero-tolerance policy, they knew how to report an incident, they felt they could report anonymously, they knew they had a right to be free from retaliation.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>The facility population the first day of the on-site audit was 882. According to the PREA Auditor Handbook, a minimum of fifteen random inmates were to be interviewed. The Auditor interviewed fifteen random inmates.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>20</p>
<p>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".</p>	
<p>60. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>

61. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:	2
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:	1
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:	1
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:	6
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:	5
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:	0
a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:	<input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees. <input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.
b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).	At the time of the on-site audit, all inmates who had reported sexual abuse and sexual harassment had been transferred to different facilities.
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:	2

<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>HCI provided a written statement acknowledging there were zero inmates placed in segregation for PREA issues in the past twelve months.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>The Auditor requested and received a roster of inmates who fell into the targeted categories. There were inmates who fell into eight targeted categories. The Auditor randomly chose inmates from each category to interview, ensuring diversity in age and race. Once selected each inmate was put on "call- out" with a time to report to the private space designated for interviews.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>15</p>
<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input checked="" type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input checked="" type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>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):</p>	<p>The random staff were chosen from a list of staff that were not interviewed under a specialized protocol.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	

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):	29
76. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

<p>b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input type="checkbox"/> Mental health/counseling</p> <p><input checked="" type="checkbox"/> Religious</p> <p><input type="checkbox"/> Other</p>
<p>82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>a. Enter the total number of CONTRACTORS who were interviewed:</p>	<p>1</p>
<p>b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)</p>	<p><input type="checkbox"/> Security/detention</p> <p><input type="checkbox"/> Education/programming</p> <p><input type="checkbox"/> Medical/dental</p> <p><input checked="" type="checkbox"/> Food service</p> <p><input type="checkbox"/> Maintenance/construction</p> <p><input type="checkbox"/> Other</p>
<p>83. Provide any additional comments regarding selecting or interviewing specialized staff.</p>	<p>Using the list of specialized staff provided, the Auditor was able to select individuals for interviews. All specialized staff answers were based on the line of questioning on the specific interview protocols for their position and responsibilities.</p> <p>In several instances a single person was responsible for covering multiple, separate protocols, i.e. First responder/Intermediate or higher staff, Intake staff/Monitor for retaliation, Intake staff/Screening for risk of victimization and abusiveness, etc. There were twenty-nine individuals interviewed using twenty-two protocols.</p>

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

<p>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)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>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)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>87. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>88. Informal conversations with staff during the site review (encouraged, not required)?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>89. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p>	<p>During the on-site tour the following areas were toured: administration, medical, food service, recreation, barber shop, library, laundry, holding cells, multi purpose building, religious services, housing units, adult recreation pavilion, basketball court, volleyball court, education, maintenance department, leisure library, law library, medical, and mental health.</p> <p>The Auditor observed zero tolerance posters, PREA information posters, Hotline telephone number, Victim support services information posted throughout the facility. All cells have a toilet and sink combination unit inside the cells, with a single stall shower outside the cell with a shower curtain. The other bathrooms have single stall showers with partitions. No cameras are located in the bathroom areas.</p> <p>The Maintenance/Warehouse had three employees and three inmates. The zero-tolerance signs were posted in both English and Spanish, victim support services and audit notice. The storage was observed, no cameras or security mirrors in the area; the warehouse had a security mirror; the freezer and cooler were observed to be clean with good lighting and limited access; the inmate restroom was outside with a full door with privacy (one inmate at a time). The Medical department operates from 8 to 5 p.m. which includes mental health staff, medical staff, security, and dental staff. The inmate storage was secured, no infirmary or cameras were observed. The lobby had a capacity of 25 inmates with an inmate restroom with a full door for privacy. The exam rooms had full doors for privacy with zero-tolerance and notice of audit in both English and Spanish. C-dorm (confinement) dayroom had one security mirror, 1 kiosk, 1-TV, 1 storage, PREA zero-tolerance signs, a notice of audit (in both English and Spanish) to include 2 working phones for the inmate population. The auditor observed an open bay (38 capacity) with female staff who made the verbal announcement before entering the dorm. C dorm had three cameras and the auditor viewed the monitors in the officer control.</p> <p>The staff interviewed stated that they would clear the area of all inmates before entering or using the restroom. If they were unable to do so, the staff would use the restroom in another location. The auditor recommended for the facility to label staff/inmate restrooms for identifying purposes (staff restroom was labeled immediately).</p> <p>The auditor observed five showers with privacy and no cross-gender viewing. The food service department and staff dining</p>

were observed with cameras installed. The food service department had six employees and about fifteen inmates assigned during the site review. The auditor observed one cooler, one freezer, the dry storage area with no cameras, wash area, with a full door for the inmate restroom. The wash house was observed to have good lighting, 3 washers, 3 dryers.

The outdoor recreation area does not have any bathrooms. The inmate canteen had one inmate working. The area had good lighting with no inmate restroom.

The Chapel had a capacity of 150, with excellent visibility in all areas.

The library had one inmate restroom with ample privacy. The kitchen was clean with good lighting, no hidden areas. The tool room had locked shadow-boards.

At the Suncoast Work Release Satellite campus, the auditor observed the zero-tolerance signs and notice of audit in both English and Spanish in all areas of the facility. At the officer station at the entrance all staff and visitors were required to show ID and sign in. The facility had two floors with housing units on both floors. The first floor had an extra common area with two wings; zero tolerance signs in English and Spanish and working phones for the residents. The strip searches are conducted in the restroom area on the first floor by female staff with privacy. The laundry on both floors are moderate sized rooms with washers and dryers. The door of the laundry room has a glass window for clear visibility. The second floor had a common area and had the same type laundry area as on the first floor. According to resident interviews, the male staff do not enter the housing units. The Suncoast Community Release Center provided plenty of privacy for the female residents on the facility.

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.).

Personnel and Training Files:

The PAQ reflects 120 staff at HCI. There was a total of forty-seven record reviews conducted on staff from various categories. The records were selected by randomly choosing the records of new hires; newly promoted employees and employees who had been at HCI for longer periods of time. All records contained the required documentation, i.e., initial criminal history check, administrative adjudication, initial PREA education with acknowledgment form signed, PREA annual training and five-year criminal history check, when applicable.

Inmate Records:

There were one-hundred inmate records, chosen randomly from the master roster, with varying arrival dates. All records had a signed acknowledgment sheet, had received PREA information and viewed the PREA video. All thirty-five inmates had received PREA information during intake, had their PREA screening within 72 hours of admission, and had comprehensive PREA education within 30-days of intake.

Sexual Abuse and Sexual Harassment Allegations:

According to the PAQ, HCI reported they had nine allegations of sexual abuse and sexual harassment in the past twelve months. The Auditor was provided the incident report and the investigative report for each of the allegations.

All nine reports were reviewed using the PREA audit investigative records review tool to record the following information relative to each investigative report:

- Case# / ID
- Date of Allegation
- Date of Investigation
- Staff-or-Inmate-on-Inmate
- Sexual Abuse or Sexual Harassment
- Final Disposition
- Is Disposition Justified?
- Investigating Officers
- Notice Given to Inmate

Investigation Files:

Information received regarding the allegations of sexual abuse and sexual harassment indicate in the past twelve-months there had been a total of nine allegations made. Of those nine allegations, two were inmate-on-inmate sexual harassment, which were deemed unsubstantiated after investigation. One was staff-on-inmate sexual harassment which remains open. One was inmate-on-inmate sexual abuse, which remains open. Five were staff-on-inmate sexual abuse, which remain open.

Inmates involved in closed cases were notified within the appropriate time frame.

The Auditor scheduled the exit briefing with the executive staff, for the final day of the audit, September 13, 2022. During the exit briefing the executive staff members were provided with an overview of what had been observed and information about the interim or final report which is due no later than October 28, 2022. The institution staff I encountered were courteous, knowledgeable, and professional. Their combined demeanors and attitudes displayed a culture that is acutely aware of the significance of sexual safety and view the responsibility to protect inmates and staff from sexual victimization as a high priority.

SEXUAL ABUSE AND SEXUAL HARASSMENT ALLEGATIONS AND INVESTIGATIONS IN THIS FACILITY

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

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

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	1	0	1	0
Staff-on-inmate sexual abuse	5	5	0	0
Total	6	5	1	0

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	2	0	2	0
Staff-on-inmate sexual harassment	1	0	1	0
Total	3	0	3	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	1	0	0	0	0
Staff-on-inmate sexual abuse	5	0	0	0	0
Total	6	0	0	0	0

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

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

Sexual Harassment Investigation Outcomes

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

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

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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

6

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>1</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>5</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>3</p>

<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
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Inmate-on-inmate sexual harassment investigation files

<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>2</p>
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<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
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Staff-on-inmate sexual harassment investigation files

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

DOJ-certified PREA Auditors Support Staff

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

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

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

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Materials Reviewed:

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC) Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- FDC, Inmate Orientation Handbook, dated November 9, 2018.
- FDC PREA Organizational Chart
- Institution PREA Organizational Chart

Interviews with the following

- Agency PREA Coordinator (PC)
- Institution PREA Compliance Manager (IPCM)

Provision (a)

The Pre-Audit Questionnaire (PAQ) indicates the facility has zero-tolerance as it relates to all form of sexual abuse or sexual harassment in the institution, as well as any contracts over which it has control. The PAQ states the policy outlines how the facility will implement prevention, detection and response to sexual abuse and sexual harassment. It further asserts the policy includes clear definitions of prohibited behaviors and approved sanctions for participation in those behaviors.

FDC procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 2, specifically asserts the zero-tolerance policy. Additionally, policy language outlines staff responsibilities, procedures for the prevention of, response to, and the reporting and investigation of sexual abuse and sexual harassment.

FDC, Inmate Orientation Handbook, dated November 9, 2018, p. 19, addresses the Florida Department of Corrections and HCI zero tolerance policy against sexual abuse and sexual harassment. Any sexual conduct, whether inmate-on-inmate or staff-on-inmate, whether consensual or coerced, is strictly prohibited.

HCI policy and procedure are consistent with the PREA standards.

Provision (b)

FDOC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, specifically addresses the requirements of this provision. Additionally, it identifies the role of an Institutional PREA Compliance Manager (IPCM). The reviewed policy is consistent with the PREA Standards and outlines the agency's approach to sexual safety.

The positions and hierarchy within the Florida Department of Corrections for PREA personnel was confirmed through a review of the agency PREA organization chart. The positions and hierarchy within Hernando Correctional Institution (HCI) for PREA personnel was confirmed through a review of the Institution PREA organization chart.

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, outlines the responsibilities of the Agency PREA Coordinator (PC) and the Institutional PREA Compliance Manager (IPCM) and relates directly to the implementation, management and monitoring of the Florida Department of Corrections and member institutions compliance with the PREA Standards, including collaboration with various levels of management.

The PC is classified at the Executive Level as confirmed through a review of the agency organizational chart. The PC has regular contact with all Florida Department of Corrections facilities throughout the state. According to the agency organization chart, the PC reports directly to the Deputy Director Institutional Operations.

The interview notes of the PC indicate the PC is a full-time position dedicated solely to PREA compliance. The PC feels she has sufficient time to manage her PREA related responsibilities. Each facility has one PREA Compliance Manager (IPCM), for a total of fifty- six throughout the agency.

The PC provides training to all new IPCMs. She is a resource for the IPCMs and interacts with them via email, telephone, and in-person, when she visits their facilities.

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp 15-17, establishes, identifies, and outlines the roles and responsibilities of the IPCM, which includes the collaboration with various levels of institutional management. Further, it establishes and identifies the responsibilities and procedures for the IPCM to coordinate the institutions efforts to comply with PREA standards. Each of the reviewed policies is consistent with PREA standards and outlines the agency's approach to sexual safety.

The IPCM is the Assistant Warden of Programs, who reports directly to the Warden of the facility, which was confirmed by a review of the institutional organizational chart. Through interviews with the agency PC and the IPCM, it was confirmed the IPCM has the responsibility to ensure the institution's compliance with the PREA standards and has the authority to address all PREA issues.

During interviews with IPCM, he indicated he has sufficient time to complete his responsibilities. It is evident that he is deeply knowledgeable with the expectations and responsibilities of his position and is able to fulfill them.

Conclusion:

Based upon the review and analysis of the available evidence, combined with the fact that every individual interviewed, formally or informally, could articulate the zero tolerance policy, the Auditor has determined HCI exceeds the standard which addresses zero tolerance of sexual abuse and sexual harassment: PREA coordinator. No recommendations or corrective action.

115.12	Contracting with other entities for the confinement of inmates
	<p data-bbox="242 145 738 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 451 237">Auditor Discussion</p> <p data-bbox="242 271 440 300">Materials reviewed:</p> <ul data-bbox="242 327 1011 356" style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) and supporting documentation provided. <p data-bbox="242 383 531 412">Interviews with the following:</p> <ul data-bbox="242 439 756 528" style="list-style-type: none"> · Institution PREA Compliance Manager (IPCM) · Agency Contract Administrator <p data-bbox="242 555 371 584">Provision (a)</p> <p data-bbox="242 611 1445 707">The Pre-Audit Questionnaire (PAQ) revealed the FDC requires all entities who contract with them for the confinement of inmates to adopt and adhere to PREA standards. All agency contracts for confinement of inmates contain PREA specific language, expectations, and requirements.</p> <p data-bbox="242 734 1493 866">HCI does not individually contract for the confinement of inmates. The agency contracts with Goodwill Industries-Suncoast, Inc. to provide operation of a residential contractor-operated work release center in Pinellas County to include the facility, staff, supervision, and related transitional services. Section VII., EE., of the contract specifies the Prison Rape Elimination Act (PREA). HCI is the parent institution for Goodwill Industries-Suncoast, Inc.</p> <p data-bbox="242 893 1445 990">The interview notes of the Agency Contract Administrator indicate FDC contracts include verbiage related to the vendors obligation to comply with PREA standards prior to entering into agreement with the agency. If the entity is not PREA compliant the contract will not be executed. The contract administrator pointed out:</p> <ul data-bbox="242 1016 1469 1205" style="list-style-type: none"> (a) A public agency that contracts for the confinement of its inmates with private agencies or other entities, including other government agencies, shall include in any new contract or contract renewal the entity's obligation to adopt and comply with the PREA standards. (b) Any new contract or contract renewal shall provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards. <p data-bbox="242 1232 1477 1328">According to the Agency Contract Administrator, there are seventy-five total contracts for the confinement of FDC inmates. The DMS contract facilities that operate in Florida submit their completed audit report to the FDC PREA Coordinator. These reports are then posted on the FDC public page along with FDC facility PREA reports.</p> <p data-bbox="242 1355 1493 1420">The PREA compliance results for the 75 contracts for confinement of inmates with other entities are managed by the contract manager in accordance with the verbiage of the contract that is in place with each entity.</p> <p data-bbox="242 1447 371 1476">Provision (b)</p> <p data-bbox="242 1503 1477 1635">According to the Agency Contract Administrator, the policies and procedures of each contractor are reviewed by FDC who ensure appropriate adherence to the national standards. Each entity is contractually required to notify the FDC of any PREA allegation; as well as forward a copy of the allegation, investigation, and findings to the agency PREA Coordinator for review.</p> <p data-bbox="242 1662 363 1691">Conclusion:</p> <p data-bbox="242 1718 1493 1814">Based upon the review and analysis of the available evidence, the Auditor has determined that the HCI meets every provision of the standard which addresses contracting with other entities for the confinement of inmates. No recommendations or corrective action.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC) Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- HCI Annual Staffing Plan Review dated March 8, 2022
- Florida Department of Corrections (FDC), Procedure 602.030, Security Staff Utilization, effective date February 12, 2019
- FDC Post Order #3 – Shift Supervisor
- HCI Housing Logs (all shifts)
- FDC form DC6-207, Control Room Log
- FDC form DC6-209, Housing Unit Log
- FDC form DC6-210, Incident Report Log
- FDC form DC6-228, Inspection of Special Housing Record

Interviews with the following:

- Facility Head or Designee – Warden
- Institution PREA Compliance Manager (IPCM)
- Agency PREA Coordinator (PC)
- Intermediate-or-Higher Level Facility Staff

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.030, Security Staff Utilization, effective date February 12, 2019, p. 9, specifies security staffing levels are designated to assist supervisors in the daily staffing of their shifts by establishing priorities for post staffing which will assist in ensuring continued security and safety of staff, visitors and inmates. Additionally, it outlines the way Level I through Level III are to be staffed.

Florida Department of Corrections Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 7, indicates each institution will develop a staffing plan that provides adequate staffing levels, and where applicable, video monitoring, to protect inmates against sexual abuse, sexual battery, staff sexual misconduct and sexual harassment. This plan shall be reviewed at least once per year, both by the Warden of the institution and by the Agency PREA Coordinator, to assess, determine, and document whether adjustments are necessary.

The PAQ indicated HCI has a staffing plan and the plan addresses each of the thirteen items listed in Provision (a). In addition, the HCI Staffing Plan indicates it is the policy of the facility to ensure that all relieved posts are staffed at the times specified.

Provision (b)

HCI has established a staffing plan predicated on the daily average of 380 inmates. In the event a mandatory post is vacant, the post is filled with on-call staff or staff re-directed from non-mandatory posts.

The PAQ reported the five most common reasons for deviations from the staffing plan in the past 12-months:

1. Military Leave
2. Personal and Family Leave
3. FMLA

4. COVID-19

5. Supervision of inmates assigned to an outside hospital

HCI does not experience excessive deviations from the staffing plan. The Auditor randomly reviewed several documented deviations for a one-month period. Each notice documented the date/time/shift, the reason for the deviation as well as the expected time to resume, including the next time the post resumed coverage.

The Auditor did not find any occurrence when an inmate education or program time was shut down due to limited staff coverage in the past 12 months. However, some programs have been suspended due to COVID-19 protocols and requirements.

Provision (c)

Policy requires the staffing plan review be completed in consultation with the IPCM and other executive staff at least annually. The Auditor was provided a copy of the HCI Annual Staffing Plan Review dated March 8, 2022. This review discussed the staffing plan, video monitoring and the resources needed to adhere to the staffing pattern.

Policy requires an internal audit of the staffing plan be conducted on an annual basis. This assessment is an extensive review of all areas of the facility to ensure adequate staffing levels exist where inmates may be present. Justification for the need for additional staff or modifications to the facility, to include the deployment of video monitoring equipment, is addressed on an annual basis. The annual review of the staffing plan includes facility and department management level staff which include: the IPCM and other institutional Executive Staff.

The Auditor reviewed shift rosters for respective shifts and was able to verify that every mandatory post was covered by an assigned staff member.

HCI has a comprehensive camera system, with a fully staffed monitoring control room. The camera system has been well thought out, and strategically designed to optimize oversight of all aspects of the facility. Camera and video surveillance are monitored by specially trained staff, who are assigned specifically to the monitoring control room. In addition to the camera and video system, HCI also uses security mirrors throughout the institution to enhance the level of safety and security for staff and inmates.

Provision (d)

FDC, Shift Supervisor Post Order #3, p. 2, 11, mandates the Shift Supervisor conduct daily unannounced rounds and security inspections of all inmate housing and activity areas. All security posts will be visited, and these inspections will be documented daily on the DC6-107 Control Room Log, as well as the DC6-209 Housing Unit Log or DC6-228 Inspection of Special Housing Record maintained in each area. Unannounced rounds were documented on the appropriate logs and are being conducted at the frequency required by standard.

FDC, General Post Order #3, expressly prohibits staff from alerting other staff members that supervisor rounds are occurring.

During the days the Auditor was on site; numerous supervisors were observed walking and working in various capacities throughout the facility. When interviewing inmates, it was confirmed the IPCM, and other supervisory staff routinely walk around and through the institution and are visible and available to all inmates.

There were interviews and informal discussions with three intermediate or higher-level staff. These interviews and discussions affirmed that staff are making unannounced rounds to all areas of the facility, with no warning to staff.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the HCI meets every provision of the standard regarding Supervision and Monitoring, ensuring the safety of staff and inmates is a priority. No recommendations or corrective action.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Material Reviewed</p> <ul style="list-style-type: none"> · Pre-Audit Questionnaire (PAQ) and supporting documentation provided · Florida Department of Corrections (FDC), Procedure 601.211 Designation of Youthful Offenders, Young Adult Offenders, and Youthful Offender Facilities effective date October 12, 2020 <p>Observations during on-site review</p> <p>Interviews with the following:</p> <ul style="list-style-type: none"> · Facility Head or Designee – Warden · PREA Compliance Manager (IPCM) <p>Provision (a)</p> <p>On the PAQ, HCI reported they do not house youthful inmates. In an interview with the Warden, she confirmed HCI does not house youthful inmates.</p> <p>During the on-site tour, the Auditor did not observe any youthful inmates.</p> <p>The Florida Department of Corrections (FDC), Procedure 601.211 Designation of Youthful Offenders, Young Adult Offenders and Youthful Offender Facilities, effective date October 12, 2020, pp 2, 5, specifies guidelines of how youthful offenders would be managed if they were in the facility.</p> <p>Provision (b)</p> <p>N/A</p> <p>Provision (c)</p> <p>N/A</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding youthful inmates. No recommendations or corrective action.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.204 Search of Inmates, Chapter 33, Sections 2, 3
- FDC, Procedure 602.018, Contraband and Searches of Inmates, effective July 21, 2021
- FDC, Procedure 602.036, Gender Specific Security Positions, Shifts, Posts and Assignments, effective February 22, 2022

Observations made during on-site review

Interviews with the following:

- Random Staff
- Random and Targeted Inmates

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.018, Contraband and Searches of Inmates, effective July 21, 2021, pp. 4, 5 and Florida Department of Corrections (FDC), Procedure 602.036, Gender Specific Security Positions, Shifts, Posts and Assignments, effective February 22, 2022, p. 4, both express a staff member of the same gender as the inmate shall conduct all unclothed body searches of inmates, except where circumstances are such that delay would constitute an immediate threat to the inmate, staff, others or institution security. Further they specify that unclothed body searches of inmates will not be conducted in areas where staff of the opposite gender can observe. Cross gender searches of inmates are only allowed in exigent circumstances.

The Auditor questioned random staff formally and informally about cross gender search practices. All the staff recalled having the training specific to this and reported that cross gender strip searches or cross gender body cavity searches do not occur at this facility.

Provision (b)

Random inmates were interviewed formally and informally. Each of the inmates interviewed confirmed they had never been part of a cross gender search.

Random staff were questioned formally and informally about cross gender search practices. When asked how the female staff would proceed if a male staff member was not available, they indicated there is always a male staff member on duty, who can be directed to the area to conduct the search. All staff recalled receiving training on opposite gender searches; however, each of them articulated that in all instances cross gender searches are not conducted at the facility. All staff (both male and female) reported cross gender strip searches or cross gender body cavity searches do not occur at this facility.

Provision (c)

On the PAQ, HCI reported there had not been any cross-gender searches of any kind, i.e., strip, visual or pat conducted in the past 12 months.

FDC Procedure 602.204 Search of Inmates, Chapter 33, Sections 2 and 3 asserts the facility shall document all exigent circumstance cross-gender strip or visual body cavity searches. The reviewed policy is consistent with the PREA standard.

Random staff indicated there were sufficient male staff members available to conduct any searches that needed to occur, and that male staff would be diverted to address this issue if needed.

Provision (d)

FDC, Procedure 602.036, Gender Specific Security Positions, Shifts, Posts and Assignments, Effective February 22, 2022, p. 3, proclaims inmates are to be allowed to shower, perform bodily functions, and changer clothing without nonmedical staff of the opposite gender viewing their buttocks or genital area, except in exigent circumstances or when such viewing is incidental to routine cell checks. To date, there have been no exigent circumstances at HCI or Suncoast requiring cross gender viewing of an inmate by a staff member.

On the PAQ, HCI indicated they allowed inmates to shower, perform bodily functions, and change clothes without staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when viewing is incidental to routine cell checks. Further the PAQ indicated opposite gender staff are required to announce their presence when entering an inmate housing unit.

Transgender inmates were interviewed. Each stated they were given the option of an alternate time to shower when the remainder of the housing unit was not using the shower.

When staff were specifically asked would transgender or intersex inmates be able to shower privately, the answer was affirmative. When asked how this would be arranged, each staff member reported alternative showering times would be implemented as needed. Each staff member further stated the transgender or intersex inmate would have the opportunity for input into the decision-making process of alternative shower times and the inmate's input would carry great weight in the decision-making process.

During the facility tour, opposite gender staff were observed entering the housing units and announcements of their presence was made. The Auditor was also announced by HCI staff when entering inmate housing and restroom areas as she was of opposite gender. The Auditor was the same gender as the inmate population at Suncoast, therefore announcements were not required.

Inmates interviewed reported opposite gender staff announce their presence when entering living areas, and always announce and wait extended periods of time before entering the bathroom areas. Every inmate interviewed confirmed they were able to dress without being viewed by staff of the opposite gender.

The Auditor interviewed inmates formally and informally; all reported hearing opposite gender staff announce their presence when entering the housing unit. All inmates indicated opposite gender staff will rarely enter the bathroom area, preferring same gender staff enter, unless there are no same gender staff present, and then will only enter after the announcement has been made several times and the opposite gender staff have waited for a response. All staff interviewed reported opposite gender staff announcements are made when entering the housing units and bathrooms.

Most housing units are designed in an open bay setting, with a bathroom at one end of the housing unit. Each bathroom has several toilets and several shower stalls. Segregated housing cells contain toilets inside the cell. The showers are outside of the cell yet allow for privacy. All the showers in the open bay housing units and segregated housing either have doors, curtains or privacy screens which protect against opposite gender viewing. The toilets have surrounds or are situation in a way that prevents opposite gender viewing.

Goodwill Industries – Suncoast, Inc. housing units are smaller rooms with multiple inmates in a room. Each room has two private showers and two private toilets to provide privacy from opposite gender staff.

Provision (e)

Florida Department of Corrections (FDC), Procedure 602.018, Contraband and Searches of Inmates, Effective June 9, 2020, p. 5, states that female staff will search clothed transgender/intersex inmates. Further it states unclothed searches of transgender/intersex inmates will be conducted out of the view of unnecessary staff, visitors, and inmates, except in exigent circumstances. Lastly all exigent circumstances will be immediately reported on an "Incident Report," DC6—210. The reviewed policy is consistent with the PREA standard.

The Auditor spoke with random inmates formally and informally. Each inmate confirmed they had never been part of a cross gender search. Of the transgender inmates interviewed, all stated they had never been uncomfortable with any search procedure. Additionally, no one reported being searched for the sole purpose of determining genital status.

The Auditor spoke with random staff formally and informally about transgender and intersex inmate search practices. Each staff member stated that no searches would ever be permitted for the sole purpose of identifying an inmate's genital status.

Provision (f)

The Auditor reviewed copies of the 2021 PREA training sessions for HCI and Suncoast staff. The Auditor verified each name on the attendance sheet correlated to an existing staff member listed on the staff roster, ensuring all staff received the required training. Training topics included appropriate search techniques, specifically cross-gender pat searches and searches of transgender and intersex inmates. Additional training documents provided direction to staff on proper documentation practices when cross gender searches were conducted.

When opposite gender staff were asked how they would proceed if same gender staff were not available, each indicated there was never an instance when same gender staff is not on duty and would be directed to the area to conduct the search to ensure cross gender searches are not performed. All staff interviewed recalled receiving training on opposite gender searches; however, each of them articulated that in all instances opposite gender staff do not conduct cross gender searches and will always defer to same gender staff to complete the search. During the facility tour, opposite gender staff were

observed entering the housing units and announcements of their presence were made. The opposite gender Auditor was also announced by HCI staff when entering the inmate housing and restroom areas. The Auditor was the same gender as the inmate population at Suncoast, therefore announcements were not necessary.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined HCI meets every provision of the standard regarding the limits to cross-gender viewing and searches.

115.16 Inmates with disabilities and inmates who are limited English proficient

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC) Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- FDC requisition agreement with Language Line Services, Inc. for translation services for the fiscal year 2022/2023
- HCI Annual PREA Training Fiscal Year 2021
- Staff attendance record for Fiscal year 2021 PREA Training

Observations of PREA poster locations during on-site tour of facilities

Interviews with the following:

- Facility Head or Designee – Warden
- Random Staff
- Inmates with disabilities or LEP

Provision (a)

On the PAQ, HCI reported established procedures to provide disabled inmates and limited English proficient inmates with equal opportunity to participate in and benefit from all aspects of the agency’s effort to prevent, detect and respond to sexual abuse and sexual harassment.

Florida Department of Corrections (FDC) Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp.8-9 indicates inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department’s zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in “Americans with Disabilities Act Provisions for Inmates,” Procedure 604.101 and other Department resources as appropriate. Resources include:

- Closed captioning (deaf/hard of hearing)
- Large print materials (impaired vision)
- Reading of materials to inmate(s) by staff (blind/limited mental capacity)
- The Department translator list (LEP)
- Language Line services (LEP)

The auditor was provided a copy of the FDC requisition agreement with Language Line Services, Inc. for translation services for the fiscal year 2022; July 1, 2022, to July 31, 2023.

The Auditor was provided written documents, training materials, as well as PREA brochures, which are provided in both English and Spanish to the inmate population. During the tour, the Auditor also observed the PREA posters were prominently displayed in each housing unit, work area, hallways, as well as numerous other areas throughout the facility in both English and Spanish.

During the interview with the Warden, she shared that HCI has established procedures to provide inmates with disabilities or inmates who are Limited English Proficient (LEP), the opportunity to participate in PREA reporting process through several avenues such as, Language Line Services, staff interpreters, outside service providers such as Gulf Coast Children’s Advocacy Center and the Dawn Center. Goodwill Industries – Suncoast utilizes Suncoast Center, Inc. for their outside service provider.

FDC utilizes Language Line Services (LLS). LLS is an on-demand, over-the-phone language interpretation service. This service is available 24 hours a day, 7 days a week. LLS supports 240 different languages. In the unlikely event LLS was out of service, the staff can use Google Translate. Google translate can be accessed via a computer with an attached microphone to address any translation needs for the inmates of the facility. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week.

The Auditor interviewed six inmates with disabilities. Two inmates were Limited English Proficient (LEP); one was physically disabled, and one was cognitively disabled.; one was hearing impaired, and one was vision impaired. The two (2) LEP inmates stated they received all PREA information and facility rules in English and Spanish. They further indicated language was not a barrier in programming or work assignments. The physically disabled inmate reported he felt safe and did not feel at a disadvantage due to his physical disability. The inmates with a cognitive disability, vision impairment and hearing impairment indicated they had a clear understanding of the PREA guidelines and were able to explain their rights and articulate multiple methods by which they could report an issue if necessary.

Provision (b)

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp. 8-9 denote numerous items relative to ensuring each inmate is given information in verbal and written form, and that all information regarding FDC's PREA policy is understood by the inmate. Additionally, it dictates inmate PREA education information will be distributed within the first 24 hours and include: Prevention of sexual abuse and harassment; self-protection; methods of reporting; and treatment and counseling availability. HCI and their satellite facility Suncoast, both conduct the extensive PREA education upon intake.

The Auditor reviewed documentation that all HCI and Suncoast staff had received PREA training, during the previous twelve months. This training was extensive and comprehensive, instructing staff of the various components of Americans with Disabilities Act, including the appropriate treatment of those inmates who are covered under the act. HCI and Suncoast provide full PREA training annually.

Provision (c)

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p, 9, addresses the prohibition of using other inmates for translation services.

FDC requires that only professional interpreters or translation services, including sign language, are available to assist inmates in understanding PREA policy, how to report allegations, and/or participate in investigations of sexual misconduct. The policy states inmates are not authorized to use interpretation/translation services from other inmates, family members or friends for these purposes. The limited exception is when a delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of the first responder duties under §115.64 or the investigation of the inmate's allegations.

The Auditor formally and informally interviewed random staff who recalled the process of how to utilize LLS for interpretation services. Most indicated that in the event translation is required, they would try to find another staff member to provide translation and then contact the Shift Supervisor before using LLS.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding inmates with disabilities and inmates who are limited English proficient. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC), Procedure 208.049, Background Investigation and Appointment of Certified Officers, effective January 25, 2021
- FDC, NI1-088, Moral Character and Background Guidelines, revised 10/19/18
- 2021 Florida Statute, Chapter 435, Section 435.03, Level 1 Screening Standards
- Rules of the Department of Management Services, Personnel Management System, Chapter 60L-40, 60L-40.001 Sexual Harassment, revised April 18, 2019
- 2021 Florida Statute, Chapter 435, Section 435.04, Level 2 Screening Standards
- 2021 Florida Statute, Chapter 435, Section 435.11, Penalties FDC, Procedure 33-601.202, Use of Inmates in Public Works
- Personnel file reviews for current employees, new employees and employees receiving promotions

Interviews with the following:

- Human Resource Staff (HRS)

Provision (a)

On the PAQ, HCI reported to have one-hundred, thirty-seven staff with forty-eight new hires in the past twelve months. Further, they reported one-hundred, four contractors, including Suncoast satellite facility and seventy volunteers who have contact with inmates.

2021 Florida Statute, Chapter 435, Section 435.04, Level 2 Screening Standards declares that FDC agency policy prohibits the employment of an individual who may have contact with inmates who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution
2. 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; or
3. Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a) (2) of this section.

The Auditor reviewed a random sampling of forty-seven staff and contractor files. The Auditor was able to verify all files reviewed contained items required by the standard, including PREA documentation and verification of the completed criminal history checks.

Provision (b)

Florida Department of Corrections (FDC), Procedure 208.049, Background Investigation and Appointment of Certified Officers, effective January 25, 2021, p. 5, states an individual is determined to be disqualified for employment if they are found in violation of FDC, NI1-088, Moral Character and Background Guidelines, Revised 10/19/18.

FDC, NI1-088, Moral Character and Background Guidelines, revised 10/19/18, p. 1, states that sexual misconduct with an inmate or an offender supervised by the FDC is a disqualifier for employment with the FDC.

The Auditor interviewed the Human Resource Staff (HRS) regarding the hiring practices. HRS indicated that the potential hire is required to fill out the personnel documents, which require the disclosure of the standard required items. HRS stated the FDC takes a continually active stance with the requirements of the PREA standards and have developed a very comprehensive system of tracking to ensure that all the required history checks are completed for pre-hires, promotions, and five year reviews. The Auditor conducted a review of the requested personnel files and verified that all the files reviewed contained the items required by the standard, including the PREA documentation and verification of the completed criminal history checks. The three questions listed under Provision (a) were asked and answered on all documents as required by the

standard.

Provision (c)

2021 Florida Statute, Chapter 435, Section 435.04, Level 2 Screening Standards, indicates before hiring a new employee or contractor, the FDC shall: 1) conduct a criminal background record check, 2) make its best efforts to contact all prior institutional employers in regard to substantiated allegations of sexual abuse or any resignation during a period of sexual abuse investigation; 3) ask potential employees and contractors about previous misconduct described in Paragraph V, A, 4, a of this regulation; 4) Apprise potential employees and contractors that false information or material omissions regarding such misconduct shall be grounds for termination and that they have a continuing duty to disclose such conduct.

The Auditor interviewed HRS regarding hiring practices. HRS stated the FDC requires background checks on all new hires, promotions, and existing staff every five years.

In the preceding twelve months there were forty-eight persons hired who may have contact with inmates who had a criminal background check completed. All reviewed personnel files contained the items required by the standard, including the PREA documentation and verification of the completed criminal history checks.

Provision (d)

2021 Florida Statute, Chapter 435, Section 435.04, Level 2 Screening Standards, indicates that before hiring a new employee or contractor, the FDC shall conduct a criminal background records check

HCI reported there are one-hundred, four contractors, including the Suncoast satellite facility, who might have contact with inmates. Additionally, the HCI auxiliary PREA staff provided information on how the contractor and vendor records are tracked. Indicating the one-hundred, four contractor criminal background history checks are current for this reporting cycle.

Provision (e)

2021 Florida Statute, Chapter 435, Section 435.03, Level 2 Screening Standards, requires employees to undergo background screening as a condition of employment and continued employment. This background screening shall include, but not be limited to employment history checks, statewide criminal correspondence through the Department of law Enforcement, a check of the Dru Sjodin National Sex Offender Public Website as well as an NCIC/FCIC background check.

The FDC conducts a criminal background records check, upon application, when being considered for a promotion, and every five years on all current employees and contractors.

The Auditor interviewed the HRS who stated the agency has a centralized database, located in Tallahassee, Florida, which tracks the completion of all background checks, and tracks the due dates of the five-year criminal history background check. The HCI PREA Auxiliary staff, keep records of the due dates of all contractor's five-year criminal history background checks as well.

Provision (f)

During the interview with the HRS, it was reported all applicants and employees who may have contact with inmates are directly asked about previous misconduct described in paragraph (a) of this section in written applications and self-evaluations or interviews for hiring or promotions.

During the interview with the HRS, it was reported that a condition of staff employment is that any arrest activity must be reported through the respective employees reporting structure. Additionally, any information on substantiated allegations of sexual abuse or sexual harassment involving a former employee must be provided upon request.

Provision (g)

2021 Florida Statute, Chapter 435, Section 435.11, Penalties, states that material omissions regarding such misconduct (as stated in this provision) shall be ground for termination and that they have a continuing duty to disclose such conduct.

Provision (h)

During the interview process, HRS confirmed that unless prohibited by law, all information would be provided on substantiated allegations of sexual abuse or sexual harassment involving a former employee would be shared upon request from an institutional employer for whom such employee has applied for work.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding hiring and promotion decisions. No recommendations or corrective ac

115.18	Upgrades to facilities and technologies
	<p data-bbox="240 143 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 239">Auditor Discussion</p> <p data-bbox="240 271 448 302">Materials Reviewed:</p> <ul data-bbox="240 327 1430 448" style="list-style-type: none"> <li data-bbox="240 327 1011 358">· Pre-Audit Questionnaire (PAQ) and supporting documentation provided. <li data-bbox="240 383 1430 448">· Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021 <p data-bbox="240 474 592 506">Observations during on-site review</p> <p data-bbox="240 533 531 564">Interviews with the following:</p> <ul data-bbox="240 589 756 678" style="list-style-type: none"> <li data-bbox="240 589 647 620">· Facility Head or designee - Warden <li data-bbox="240 645 756 678">· Institution PREA Compliance Manager (IPCM) <p data-bbox="240 703 371 734">Provision (a)</p> <p data-bbox="240 761 1477 857">On the PAQ, HCI reported they have not acquired any new facilities or made substantial expansions or modifications of the existing facility. HCI did report on the PAQ that they had added new cameras to their video monitoring system since the last PREA audit.</p> <p data-bbox="240 884 1477 1016">Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 7 specifies that when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facility, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse.</p> <p data-bbox="240 1043 1477 1108">The Auditor conducted a comprehensive tour of HCI. Since the last audit there has not been any substantial expansions or additions to the facility. However the IPCM did point out the new cameras since the last PREA audit.</p> <p data-bbox="240 1135 1477 1332">The Auditor interviewed the Warden, who reported any construction, renovation or modification would be done with full consideration of all PREA standards. She further reported there are meetings that would be held regarding any building or construction considerations and that safety and cameras, or other technologies would be discussed and considered at such meetings. During these meetings HCI executive staff would meet with all key supervisors and managers to discuss any pertinent issues, such as Data/Reporting issues, Grievances, Disciplinary Reviews, Video Summary Reviews, Use of Force Incidents, Incidents of Sexual Abuse, as well as the analysis of key data such as overtime, leave time, morale, etc.</p> <p data-bbox="240 1359 371 1391">Provision (b)</p> <p data-bbox="240 1417 1342 1449">During the interview with the Warden, she confirmed new cameras had been added since the last PREA audit.</p> <p data-bbox="240 1476 1477 1572">FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 7, indicates when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how much technology may enhance the agency's ability to protect inmates from sexual abuse.</p> <p data-bbox="240 1599 1477 1695">HCI camera coverage is monitored in a central control room. The camera coverage at the Suncoast satellite facility is also monitored in a central control room. Each central control room is staffed twenty-four hours a day, seven days a week. The control room has the capability of selecting any area and reviewing footage as needed for that institution.</p> <p data-bbox="240 1722 1477 1818">HCI cameras are positioned normally within the dormitories with front, middle and rear coverage. Every area accessible by an inmate is covered by a camera monitoring capability or a security mirror. The positions allow for privacy in and around areas of showers and restrooms.</p> <p data-bbox="240 1845 1477 1942">During the interview process, the Warden indicated the FDC, HCI and Suncoast, are equally committed to the camera monitoring program and indicated that having the cameras in place has created a sense of comfort for everyone, staff and inmates, knowing that should an incident occur, an independent observation can be reviewed using the stored video.</p> <p data-bbox="240 1968 363 2000">Conclusion:</p> <p data-bbox="240 2027 1477 2092">Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding upgrades to facility and technology. No recommendations or corrective action.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), NI1-120, Sexual Abuse Awareness Pamphlet, Revised 5/23/18
- FDC Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021
- FDC, Procedure 601.211 Designation of Youthful Offenders, Young Adult Offenders, and Youthful Offender Facilities effective date October 12, 2020
- FDC contract #C2978 with Gulf Coast Children's Advocacy Center, Inc., dated February 18, 2020
- FDC contract ATC-19-024 with Panhandle Forensic Nurse Specialist, Inc., dated August 2, 2019
- Florida Crime Prevention Training Institute, Certification of Recognition for Victim Services Practitioner Designation, dated February 14, 2020, for Christina L. Counce
- Florida Crime Prevention Training Institute, Certification of Recognition for Victim Services Practitioner Designation, dated January 2018 for Judy A. Cardinez-Harris
- FDC Form DC6-210 Incident Report
- FDC Adult/Adolescent Forensic Sexual Assault Examination Form

Interviews with the following:

- Random Staff
- SAFE/SANE Staff
- Institution PREA Compliance Manager (IPCM)

Provision (a)

On the PAQ, HCI reported the Office of the Inspector General (OIG) is responsible for conducting investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct. The IPCM provides investigative assistance for those inmate-on-inmate sexual harassment administrative cases.

FDC Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 12, states the Office of the Inspector General shall conduct all investigations of sexual abuse, sexual battery, sexual misconduct, and sexual harassment pursuant to section 944.31, F.S., "Investigative Process," Procedure 108.003, and "Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations," Procedure 108.015. Page 13 of the same Procedure states staff from the Office of the Inspector General will collect evidence as appropriate.

The Auditor discussed informally and interviewed formally random staff regarding the rules of evidence, and their understanding of the process should an inmate report alleged sexual abuse. All staff interviewed were able to articulate the basic preservation of evidence component of both victim and abuser. They were also able to explain their responsibilities up to the point when they transfer responsibility to either investigative or medical staff.

Provision (b)

Florida Department of Corrections (FDC), Procedure 601.211 Designation of Youthful Offenders, Young Adult Offenders, and Youthful Offender Facilities effective date October 12, 2020, outlines the protocol for youthful offenders. The FDC adheres to the National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents, or similarly comprehensive and authoritative protocols developed after 2011.

HCI, including the Suncoast satellite facility, do not house youthful inmates.

Provision (c)

On the PAQ, HCI reported all treatment services are provided to the victim without financial cost.

FDC Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 11, 5, states any inmate who alleges sexual abuse or sexual battery shall be given a copy of the NI1-120 and advised of her/his right to crisis intervention services, to have a forensic examination, and to have a victim advocate present during the forensic examination and/or investigative interview, is s/he chooses.

FDC Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 14 indicates treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with an investigation arising out of the incident.

The FDC contract ATC-19-024 with Panhandle Forensic Nurse Specialist provides for forensic medical services. The Sexual Abuse Response Team (SART) responds to the institution. The SART is made up of SAFEs and SANEs. All forensic examinations are conducted by SAFE/SANE personnel.

The Florida Department of Corrections offers multiple ways to report sexual abuse and sexual harassment. Reports can be made verbally, in writing, anonymously and via a third party. Below are the methods available to report:

- Call an outside entity (Gulf Coast Children's Advocacy Center, (Contract #C2978) to report by dialing 1-850-832-3905,
- Call the TIPS line by dialing 1-866-246-4412,
- Call the Dawn Center hotline by dialing 8499 or 1-352-686- 8430
- Report to any staff member, volunteer, or contractor, including medical and mental health care staff,
- Submit a grievance or an inmate request,
- Report to the facility's IPCM (the Assistant Warden of Programs),
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on the inmate's behalf through a third-party grievance, through the online citizen's complaint form or by contacting the PREA office at PREA@fdc.myflorida.com.

FDC Agreement A3816 with Dawn Center establishes collaboration between FDC, specifically HCI, and Dawn Center to provide confidential support services related to sexual abuse to individuals at HCI. The inmates housed at HCI are provided the treatment services through Panhandle Forensic Nurse Specialist, Inc (SAFE/SANE exams) and Dawn Center (Victim Advocacy Services). When a SAFE/SANE examination is conducted, Dawn Center provides a victim advocate for the alleged victim.

On the PAQ, HCI reported zero exams performed by SANEs/SAFEs during the past 12 months. During the interview process, the IPCM confirmed in the past twelve (12) months there have been zero forensic exams performed by SANEs/SAFEs.

The SAFE/SANE representative confirmed the examinations are provided at no cost to the inmate and that all forensic services are provided when the inmate alleges sexual abuse, sexual assault, or sexual battery. All forensic examinations consist of an assessment, documentation, and collection of evidence as outline in the Attorney General's "Adult and Child Sexual Assault Protocols: Initial Forensic Physical Examination. Further the SAFE/SANE representative reported when notified SAFE/SANE personnel will report to the institution immediately, but no later than 4 hours after the alleged assault. All forensic examinations are performed at the FDC correctional institution.

Provision (d)

As stated in Provision (c), a victim advocate is provided before the forensic medical examination. This advocate is provided, per the FDC Agreement A3816, with Dawn Center.

During the interview with the IPCM, he indicated victim advocacy services are offered through contract and are built into the forensic exam process. The IPCM stated that all requirements of PREA have been incorporated into the contract. During the examination, the inmate meets the victim advocate and arrangements are made to provide any necessary and/or requested counseling services. Follow-up counseling is coordinated through the Dawn Center, in collaboration with mental health services.

At the time of the audit, information received regarding the allegations of sexual abuse in the past twelve months revealed a total of six allegations reported. One was unsubstantiated and five were still open, active cases.

At the time of the audit, information received regarding the allegations of sexual harassment in the past twelve months revealed a total of three allegations reported. Two were unsubstantiated and one was still an open, active case.

The Auditor reviewed nine files of sexual abuse, sexual harassment allegations. In all cases the staff offered the victim

referrals for medical, mental health and advocacy services, regardless of whether the allegation was abuse or harassment. Every victim declined a victim advocate. Two harassment victims declined a mental health referral, and one harassment victim declined a medical referral. The remaining victims accepted their referrals and were evaluated by medical and mental health services and follow-up consistent with the standard.

Provision (e)

As stated in Provision (d) before the examination, the inmate meets the victim advocate. The victim advocate provides emotional support, crisis intervention, information, and referrals as necessary and/or requested.

Provision (f)

As reported in Provision (a) the Office of the Inspector General is responsible for conducting administrative and criminal investigations, including inmate-on-inmate sexual abuse and staff sexual misconduct.

All investigators with the Office of the Inspector General are trained using the curriculum "Investigating Sexual Abuse in Confinement Settings: Training for Corrections Investigators." This training was created by The Moss Group, Inc and is available through the National PREA Resource Center. While on-site, the Auditor reviewed the training records of the investigators utilized by HCI. Each investigator had successfully completed this specialized training.

Provision (g)

Auditor is not required to audit this provision.

Provision (h)

As reported in Provision (d) victim advocacy services are offered through the FDC Agreement A3816, with Dawn Center and are built into the forensic exam process.

Conclusion:

By offering sexual harassment victims medical, mental health and advocacy referrals, HCI exceeds the standard regarding evidence protocol and forensic medical examinations. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC), Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, effective February 22, 2018
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021

Interviews with:

- Random Staff
- Investigative Staff

Provision (a)

Florida Department of Corrections (FDC), Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, effective February 22, 2018, p. 2 states the agency and facility refer all investigations, administrative and criminal, to the Office of Inspector General (OIG).

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, states in addition to the general PREA training investigators who work regularly with inmates shall complete specialized training for investigators. All investigators with the Office of the Inspector General are trained using the curriculum "Investigating Sexual Abuse in Confinement Settings: Training for Corrections Investigators". This training was created by The Moss Group, Inc and is available through the National PREA Resource Center. While on-site, the Auditor reviewed the training records of the investigators utilized by HCI. Each investigator had successfully completed this specialized training. This training meets the requirements of this standard.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 10, states an administrative or criminal investigation is completed for all allegations of sexual abuse or sexual harassment. Further this investigation is initiated in accordance with "Investigative Process," Procedure 108.003 and "Sexual battery, Sexual Harassment, and Sexual Misconduct Investigations," Procedure 108.15.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 4, states any inmate, employee, volunteer, or contractor who commits a sexual battery may be criminally prosecuted pursuant to chapter 794, F.S.

At the time of the audit, information received regarding the allegations of sexual abuse in the past twelve months revealed a total of six allegations reported. One was unsubstantiated and five were still open, active cases.

At the time of the audit, information received regarding the allegations of sexual harassment in the past twelve months revealed a total of three allegations reported. Two were unsubstantiated and one is still an open, active case.

The Auditor reviewed nine files of sexual abuse, sexual harassment allegations. In all cases the staff offered the victim referrals for medical, mental health and advocacy services, regardless of whether the allegation was abuse or harassment. Every victim declined a victim advocate. Two harassment victims declined a mental health referral, and one harassment victim declined a medical referral. The remaining victims accepted their referrals and were evaluated by medical and mental health services and follow-up consistent with the standard.

All staff interviewed knew their responsibility to report any suspicion, or knowledge of an allegation of sexual abuse and sexual harassment. Each reported they were required to make such a report immediately after becoming aware of it. They further stated they are to immediately report the information to their shift supervisor.

Provision (b)

The policies regarding the FDC and HCI obligation to thoroughly investigate all matters relative to sexual abuse and sexual harassment are provided in Provision (a).

Florida Department of Corrections (FDC), Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, effective February 22, 2018, indicates the Office of the Inspector General has investigative responsibilities at

FDC facilities.

As stated previously in Provision (a) FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, confirms the investigators have been provided special training per PREA guidelines.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 4, indicates substantiated allegations of conduct that appear to be criminal shall be referred for prosecution.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 15, 10, (a) states upon completion of the investigation, the facility will also be responsible for notifying the inmate(s) regarding the outcome of the investigation via an "Inmate Notification Administration Investigation Outcome," DC6-2080. Once completed, the DC6-2079 will be forwarded to the PREA Coordinator.

During the interview process, staff indicated all allegations are investigated. Administrative and criminal allegations are investigated by the Office of the Inspector General. The ones which are criminal in nature are investigated by OIG, then referred to the appropriate jurisdiction for prosecution.

Provision (c)

As stated in Provision (a) the agency and facility refer all administrative investigations and criminal investigations to the OIG.

As stated previously, FDC, Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations, effective February 22, 2018 outlines how criminal matters are referred, as well as the responsibilities of those investigating the allegations.

Provision (d)

Auditor is not required to audit this provision.

Provision (e)

Auditor is not required to audit this provision

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that HCI meets every provision of the standard which addresses policies to ensure referral of allegations for investigations. No recommendations or corrective action is required.

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Prison Rape Elimination Act, Bureau of Professional Development and Training, ETRAIN Course Code PREA-001, Revised June 28, 2021
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021
- Bureau of Professional Development and Training, FY 2021-2022, ETRAIN Course Code: PREA-001, revised June 28, 2021
- HCI staff PREA training attendance records

Observations during on-site review of rounds

Interviews with the following:

- Random Staff

Provision (a)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, (c), specifies that all employees will be trained in a minimum of:

1. Zero tolerance policy
2. How to fulfill responsibilities for sexual abuse and sexual harassment prevention, detection, reporting and response
3. Inmate's right to be free from sexual abuse and sexual harassment
4. The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment
5. The dynamics of sexual abuse and sexual harassment in confinement
6. Common reactions of sexual abuse and sexual harassment victims
7. How to detect and respond to signs of threatened or actual sexual abuse
8. How to avoid inappropriate relationships with inmates
9. How to communicate effectively with LGBTI and gender non-conforming inmates
10. How to comply with relevant mandatory reporting laws.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, (c), indicates all employees will receive full PREA training annually. New employees will be trained prior to having contact with inmates.

At a minimum volunteers and contractors will be trained in the FDC's zero tolerance policy regarding sexual abuse, sexual harassment and how to report such incidences.

HCI's curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements in order to facilitate retention of the required elements. The level or complexity of the training will depend on the employee's classification with some specialized training curriculum depending on the employee's job responsibilities.

The Auditor reviewed a total of one-hundred, twenty staff training records. Each reviewed record contained all relevant documentation to reflect the staff had met their initial PREA requirements. In addition, the Auditor also reviewed the sign-in sheets for PREA annual training for the past twelve months which confirmed by staff signatures, each of the employees at HCI had acknowledged receiving the PREA training.

Each of the staff interviewed recalled attending the initial PREA training when they were hired or when PREA went into effect. All staff interviewed confirmed they receive annual PREA training, as well as additional in-service training.

Provision (b)

The policy regarding the FDC's and HCI's responsibility to provide training and education regarding sexual abuse and sexual harassment are provided in Provision (a).

The training provided by the FDC, addresses both male and female issues. However, the HCI training has been tailored specifically to the male inmate population. The Auditor reviewed the training materials utilized for the staff at HCI. The training materials are consistent with this PREA standard. If an employee is reassigned from a facility that houses a different population composition, that employee is retrained or provided refresher training for the population make-up of the new facility prior to be placed in contact with the inmate population.

As stated in Provision (a), the Auditor reviewed documentation for the training that occurred at HCI, verifying attendance of all HCI staff.

Provision (c)

Of the 120 staff presently assigned to HCI, the Auditor reviewed documentation that reflected all 120 staff or 100% of the staff have received PREA training in the past twelve months. HCI staff receive full PREA training every year. HCI also provides additional PREA training in shifts trainings, staff meetings and posters.

Provision (d)

PREA training requirements mandate attendance at all PREA required training to be documented through employee signature, acknowledging the training they have received. In some instances, employees are required to complete an Acknowledgement of Receipt of Training upon completion of the training. A copy of these receipts were observed in every record reviewed by the Auditor. The receipts contained various dates which reflected separate training sessions.

In instances where a receipt of training material was not required, staff would sign-in on a training sheet, verifying their attendance at the required training. The Auditor viewed copies of each training session for the past twelve months, reflecting training completed by HCI staff.

Conclusion:

Because HCI provides full PREA training every year combined with the review and analysis of the available evidence, the Auditor has determined that the HCI exceeds the standard which addresses policies regarding employee training. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Prison Rape Elimination Act, Bureau of Professional Development and Training, ETRAIN Course Code PREA-001, Revised June 2021
- PREA Training for Interns, Volunteers and Contractors, revised 7/31/18
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021
- F.S.S. 110.503, Chapter 110, Title X, Public Officers, Employees and Records
- FDC Procedure 503.004, Volunteers, effective June 26, 2020

Interview with the following

- Contract Staff
- Volunteers

Provision (a)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, (c), indicates at a minimum volunteers and contractors will be trained in the FDC's and HCI's zero tolerance policy regarding sexual abuse, sexual harassment and how to report such incidences.

F.S.S. 110.503, Chapter 110, Title X, Public Officers, Employees and Records, explains what each department or agency utilizing the services of volunteers shall do:

- Take such actions as are necessary and appropriate to develop meaningful opportunities for volunteers involved in state-administered programs.
- Comply with the uniform rules adopted by the Department of Management Services governing the recruitment, screening, training, responsibility, use, and supervision of volunteers.
- Take such actions as are necessary to ensure that volunteers understand their duties and responsibilities.
- Take such actions as are necessary and appropriate to ensure a receptive climate for citizen volunteers.
- Provide for the recognition of volunteers who have offered continuous and outstanding service to state-administered programs. Each department or agency using the services of volunteers is authorized to incur expenditures not to exceed \$100 each plus applicable taxes for suitable framed certificates, plaques, or other tokens of recognition to honor, reward, or encourage volunteers for their service.
- Recognize prior volunteer service as partial fulfillment of state employment requirements for training and experience pursuant to rules adopted by the Department of Management Services.

FDC Procedure 503.004, Volunteers, effective June 26, 2020, p. 3, the training for Interns, Volunteers and Contractors is intended to communicate that the Florida Department of Corrections maintains a zero-tolerance standard for sexual abuse, sexual assault, sexual battery, sexual harassment, and staff sexual misconduct within institutional and community supervision environments. It is directed to all interns, volunteers, and contracted staff who work in a correctional institution, Community Corrections office, or any other facility owned, operated, or under the control of the Florida Department of Corrections. It serves to instruct interns, volunteers, and contracted staff on the purpose and scope of the Prison Rape Elimination Act of 2003 with its focus to prevent, detect, and respond to all reported and suspected cases of sexual abuse and misconduct.

HCI's curriculum and training materials were reviewed by the Auditor. The core training materials contain all ten of the elements required for this provision. Each of the elements is covered in detail in the training and have incorporated numbered training elements in order to facilitate retention of the required elements. The level or complexity of the training will depend on the responsibilities and role of the contractor or volunteer.

The Auditor reviewed documentation indicating that 140 volunteers and 114 contractors, (which includes the Suncoast staff) have received PREA training in the past twelve months.

The Auditor interviewed two volunteers. Both volunteers recalled having PREA training, stating it was specific to their roles or responsibilities in the facility. When the Auditor questioned the volunteers about their knowledge of PREA, they were able to identify what PREA was and more importantly, what their role or responsibility was in the event they were confronted with a situation of sexual abuse or sexual harassment.

The Auditor interviewed two contractors. Both contractors recalled having PREA training, stating it was specific to their roles or responsibilities in the facility. When the Auditor questioned the contractors about their knowledge of PREA, they were able to identify what PREA was and more importantly, what their role or responsibility was in the event they were confronted with a situation of sexual abuse or sexual harassment.

Provision (b)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, indicates the FDC will ensure 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. The level and type of training will be based on the services they provide and level of contact with the inmates. However, all volunteers and contractors shall at a minimum be trained in the following:

1. Zero tolerance policy
2. How to report sexual abuse or sexual harassment

The Auditor conducted two formal interviews with contract staff. During the interviews they verbally demonstrated to the Auditor a comprehensive and complete understanding of the agency's zero-tolerance policy and how to address any instance when an inmate reports a PREA specific issue.

Provision (c)

As indicated in Provision (b) copies of the acknowledgment page from the PREA training is retained in each volunteer and contractor record. The Auditor reviewed the sign in sheets from the PREA training sessions for the past twelve months. Each sign in sheet reflected acknowledgment signatures from contractors and volunteers for the PREA training they received.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the HCI meets every provision of the standard which addresses policies regarding volunteer and contractor training. No recommendations or corrective action is required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 601.210, Inmate Orientation, effective September 17, 2021
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021
- FDC, Inmate Orientation Handbook, revised April 7, 2020
- Dawn Center, brochure Sexual Battery, Your Rights and Services, dated June 2016
- FDC, Electronic Classification Contact Log print out
- FDC, Form DC6-134C, Acknowledgment of Receipt of Orientation on The Prison Rape Elimination Act (PREA) of 2003, revised 10/29/15
- Inmate PREA Education Facilitators Guide, dated February 2014

Observations during on-site review

- PREA Posters
- Miscellaneous Training Materials

Interviews with the following:

- Institutional PRA Compliance Manager (IPCM)
- Intake Staff
- Random Inmates

Provision (a)

Florida Department of Corrections (FDC), Procedure 601.210, Inmate Orientation, effective September 17, 2021, p. 5, d, indicates the PREA (Sexual Assault & Sexual Harassment Orientation) will include:

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

Florida Department of Corrections (FDC), Procedure 601.210, Inmate Orientation, effective September 17, 2021, p. 5, c, specifies the inmate will sign the "Acknowledgement of Receipt of Orientation," DC6-134A verifying the completion of orientation. The original form will be placed in the inmate's institutional file.

Florida Department of Corrections (FDC), Procedure 601.210, Inmate Orientation, effective September 17, 2021, p. 5, 3, e, specifies the inmate will sign the "Acknowledgement of Receipt of Orientation on the Prison Rape Elimination Act (PREA) of 2003, DC6-134C verifying the completion of orientation on PREA. The original form will be placed in the inmate's institutional file.

Florida Department of Corrections (FDC), Procedure 601.210, Inmate Orientation, effective September 17, 2021, p. 5, 4, d, mandate all inmates will receive information on the PREA, the Department's zero tolerance policy and how to report incidents or suspicion of sexual abuse or sexual harassment within 24-hours of receipt at a permanent facility.

FDC, Inmate Orientation Handbook, dated April 7, 2020, pp. 19-20, explains the agency's zero tolerance policy regarding

sexual abuse and sexual harassment. further explains how to report incidents or suspicions of sexual abuse and sexual harassment.

The Inmate Orientation Handbook, as well as the PREA Posters were observed during the on- site tour of the facility by the Auditor. The Auditor reviewed written materials in both English and Spanish.

The Auditor was provided a copy of FDC, Form DC6-134C, Acknowledgment of Receipt of Orientation on The Prison Rape Elimination Act (PREA) of 2003, revised 10/29/15, which is completed by each inmate upon

FDC, Form DC6-134C, Acknowledgment of Receipt of Orientation on The Prison Rape Elimination Act (PREA) of 2003, revised 10/29/15, states "My signature below certifies that in addition to a general comprehensive orientation, I have received orientation from staff members of the Florida Department of Corrections specific to the PREA. I have been provided information orally and in writing." This form as a place for the inmate name and signature, date of orientation and staff name signature. This signed form is maintained in the inmate institutional file. Of the one hundred inmate records reviewed, signed, and dated documentation of PREA education through orientation was retained in every record with the rest of the inmate information.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, pp. 6, Section 2, a, 1, states initial orientation will be provided to all newly received inmates concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with "Inmate Orientation," Procedure 601.210.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 9, e, 6, indicates each institution will ensure that "Sexual Abuse Awareness," NI1- 120 is distributed to inmates within the first twenty-four hours, and the "Zero Tolerance for Sexual Abuse and Sexual Harassment," NI1-132 poster is clearly displayed in both English and Spanish, in areas easily assessable to inmates, family members and the public at each facility.

During interviews with intake staff, it was confirmed all inmates who enter the care and custody of the FDC are provided an Inmate Orientation Handbook upon admission. The inmate signs the acknowledgment form which is retained in the inmate file.

Each housing unit has multiple telephones designated for inmate use. Using any of these telephones, an inmate can call a PREA hotline to report an incident of sexual abuse or sexual harassment. The call is free of charge and confidential. This was confirmed by the Auditor on the on-site tour. The Suncoast inmates have an electronic device, they call the box, they carry on their person which is enabled to directly report PREA incidents if needed, as well as the ability to call the PREA hotline at any time.

During the interviews with inmates, all of them remembered receiving written PREA materials and an Inmate Orientation Handbook. All of the interviewees reported the material they received included information about the facility's zero tolerance policy and ways to report. All interviewees stated the facility took PREA seriously and frequently discussed it with them both formally and informally.

Provision (b)

Per the PAQ, HCI reported during the past twelve months there were 831 inmates whose length of stay at the facility was more than thirty days. The PAQ also indicated all of these inmates were provided the PREA information which included their right to be free from sexual abuse, as well as the policies and procedures for reporting. HCI reported 100% of the inmates admitted to their facility in the past twelve months received the mandated information.

During interviews with intake staff, they indicated inmates receive their PREA training immediately upon arrival, prior to their unit assignment. HCI and Suncoast both conduct their complete thirty-day PREA education at the time of intake.

During interviews with inmates, each were asked to briefly outline what they learned during PREA training. All responses were similar in nature and were generally: zero tolerance for sexual abuse or harassment, right to be free from sexual harassment and retaliation for reporting, who to talk to about a concern, who to report an incident to, to dial the PREA Hotline or use the computer to make a report, and call the number on the posters around the facility.

Provision (c)

As indicated in Provision (b) 100% of inmates who entered the facility during the past twelve-month period received the required PREA training. This training, at intake, is facilitated through staff going over material and answering any questions the inmate may have. Upon arrival, the inmate is also provided an Inmate Orientation Handbook and goes through the A&O process. At the end of the A&O process is a question-and-answer period to reinforce retention of the information presented.

The information was documented with verification of the training retained in the inmate institutional record. It is also electronically recorded on the Classification Contact Log. The Auditor reviewed this documentation.

As indicated in Provision (b) the intake staff provide the PREA information immediately upon arrival into the facility. Interviews

with intake staff revealed that upon arrival at the facility inmates are given orientation materials, including PREA related materials, before being assigned to a housing unit. This is a requirement for all inmates, whether they are a new intake or a transfer from another facility.

Provision (d)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8, e, 2 and 3, require the agency to provide all inmates accessible educational formats if an inmate has special needs (language barriers, visually impaired, deaf, limited reading skills, or otherwise disabled), not relying on inmates for this service.

The various training elements provided to the inmate population range from PREA documents in both English and Spanish, PREA posters in both English and Spanish, to staff members who are fluent in Spanish. The facility also uses the Language Line Services (LLS) for when an interpreter is not available.

LLS is an on-demand, over-the-phone language interpretation service. This service is available 24 hours a day, 7 days a week. The Language Line Services supports 240 different languages. As a back-up, anytime a translation service is needed and should the LLS be down for any reason, the staff can use Google Translate. Google translate can be accessed via a computer with an attached microphone to address any translation needs for the inmates of the facility. At the present time, Google Translate supports 103 different languages, and is available 24 hours a day, 7 days a week.

During the interview with the IPCM, he was asked what the process was if an inmate had a disability not covered under the training elements established by the facility. He stated he would work with the Local Disability Assistance to ensure each inmate is able to understand and retain the PREA materials to a comfort level of comprehension.

Provision (e)

As stated in previous provisions, all inmates sign the "Acknowledgement of Receipt of Orientation on the Prison Rape Elimination Act (PREA) of 2003, DC6-134C verifying the completion of orientation on PREA. The original form will be placed in the inmate's institutional file.

A review of one-hundred inmate files was conducted, and the signed acknowledgment document was in every file.

Provision (f)

HCI and Suncoast have robust PREA programs. They make noteworthy strides to ensure the inmates at HCI and Suncoast receive crucial education about sexual abuse and sexual harassment. Through the use of varying formats, the inmate population receives important information in user friendly, comprehensible ways. The Inmate Orientation Handbook is an excellent tool which specifically lays out the prevention of sexual violence, zero tolerance policy and includes multiple methods inmates can seek assistance regarding sexual violence.

HCI and Suncoast have a variety of PREA posters, in both English and Spanish. These posters are different throughout the facility as not to become easy to overlook. During the on-site, the Auditor observed these posters in every room throughout the facility.

In interviews with inmates, they each reported the IPCM, as well as other staff, check with them formally and informally about PREA issues and practices. They often ask them questions to make sure they are remembering PREA policies and reporting guidelines, as well as feeling safe on the compound.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standards for inmate education. No recommendations or correction action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8
- The Moss Group, Inc. Training Curriculum: Investigating Sexual Abuse in Confinement Settings: Training for Corrections Investigators, as approved by The National PREA resource Center
- Staff Course Completion Documentation, Training Attendance Record, DC2-901

Interviews with the following:

- Investigative Staff

Provision (a)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8, indicates in addition to the general PREA training, investigators, medical health care practitioners and mental health care practitioners who work regularly with inmates shall complete specialized training.

The Moss Group, Inc. Training Curriculum: Investigating Sexual Abuse in Confinement Settings: Training for Corrections Investigators, which has been approved by The National PREA Resource Center. The Curriculum includes:

- Overview of the Prison Rape Elimination Act (PREA)
- Why Investigation in Custodial Settings are Different
- Tools to Ensure Quality Investigations
- Investigative Techniques and Protocols
- Interviewing Sexual Abuse Victims
- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action
- Criteria and evidence required to substantiate a case for prosecutorial referral
- Training for Trainers

FDC, Staff Course Completion Documentation, Training Attendance Record, DC2-901 provided documentation of the specialized training required by this standard.

The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for FDC employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the contracted and direct hire medical staff received the general PREA training mandated for all FDC employees.

Through a review of training records and an interview with a HCI investigator, the Auditor was able to confirm that all training requirements have been met.

Provision (b)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8, indicates in addition to the general PREA training, investigators, medical health care practitioners and mental health care practitioners who work regularly with inmates shall complete specialized training. This training will include, but not be limited to:

- Interviewing Sexual Abuse Victims

- Proper Use of Miranda and Garrity Warnings
- Conducting Sexual Abuse Investigations, including the collection of evidence in a confinement setting
- Criteria and evidence required to substantiate a case for administrative action Criteria and evidence required to substantiate a case for prosecutorial referral

Through staff interview and review of training documents by the Auditor, each of the assigned investigators have attended the required training and meet all training requirements.

Through a review of training records and an interview with the HCI investigator, the Auditor was able to confirm that all training requirements have been met.

Provision (c)

As outlined previously in Provision (a) & (b) FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8, addresses this provision.

The Office of Inspector General conducts all investigations, administrative and criminal, in FDC institutions. Currently, there are 140 investigators statewide, with HCI having two assigned to the facility. HCI conducts all investigations for Suncoast.

Provision (d)

The Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of the available evidence, the Auditor has determined that the HCI exceeds the standard which addresses policies regarding specialized training: investigations. No recommendations or corrective action.

115.35	Specialized training: Medical and mental health care
	<p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 443 300">Materials Reviewed</p> <ul data-bbox="284 349 1449 510" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021 • FDC Health Services Bulletin 15.03.06, Post Sexual Battery Medical Action, effective October 20, 2020 • HCI Staff Course Completion Documentation, Training Attendance Record, DC2-901 <p data-bbox="240 539 592 568">Observations during on-site review</p> <p data-bbox="240 598 531 627">Interviews with the following:</p> <ul data-bbox="284 676 632 705" style="list-style-type: none"> • Medical and Mental Health Staff <p data-bbox="240 734 371 763">Provision (a)</p> <p data-bbox="240 790 1489 887">FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 8, indicates in addition to the general PREA training, investigators, medical health care practitioners and mental health care practitioners who work regularly with inmates shall complete specialized training.</p> <p data-bbox="240 913 1473 976">Staff Training Materials, Health Services Bulletin No. 15.03.36, Post Sexual Battery Medical Action, effective 10/20/2020, p. 4, indicates that all medical and mental health employees, shall receive additional training to include, but is not limited to:</p> <ol data-bbox="240 1003 1374 1263" style="list-style-type: none"> 1. How to detect and assess signs of sexual abuse and harassment. 2. How to preserve physical evidence of sexual abuse. 3. How to respond effectively and professionally to victims of sexual abuse and harassment. 4. How and to whom to report allegations or suspicions of sexual abuse and harassment 5. A review of the provided lesson plan/training materials demonstrate compliance with this training requirement. <p data-bbox="240 1290 1489 1386">Currently there are one-hundred, fourteen contract workers at HCI and Suncoast. There are contract and direct hire medical and mental health staff assigned to HCI. Through staff interview and review of training documents by the Auditor, each of the medical and mental health staff members have attended the required training and meet all training requirements.</p> <p data-bbox="240 1415 371 1444">Provision (b)</p> <p data-bbox="240 1471 1441 1500">N/A - All medical staff at HCI are prohibited by procedure from performing forensic examination on sexual abuse victims.</p> <p data-bbox="240 1529 371 1559">Provision (c)</p> <p data-bbox="240 1585 1484 1682">As indicated in Provision (a), through staff interview and a review of the training documents by the Auditor, each of the assigned staff members have attended the required training and meet all training requirements. All training documentation is retained in the employee file, as required.</p> <p data-bbox="240 1711 371 1740">Provision (d)</p> <p data-bbox="240 1767 1461 1899">The Auditor reviewed sign-in sheets and training materials that reflect the general PREA training that is mandated for FDC employees, contractors and volunteers outlined in policy and PREA standards. The sign-in sheets confirm, in addition to specialized training, the contracted and direct hire medical staff received the general PREA training mandated for all FDC employees.</p> <p data-bbox="240 1928 363 1957">Conclusion:</p> <p data-bbox="240 1984 1497 2080">Based upon the review and analysis of the available evidence, the Auditor has determined that the HCI meets every provision of the standard which addresses policies regarding specialized training: medical and mental health care. No recommendations or corrective action.</p>

115.41 Screening for risk of victimization and abusiveness

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021
- FDC, Procedure 601.209, Reception Process – Initial Classification, effective September 17, 2020
- FDC, Procedure 401.014, Health Services Intake and Reception Process, effective February 23, 2018
- FDC, Procedure 507.201, Substance Abuse Screening at Reception Centers Bureau of Classification Management, IBAS, IRMS Assessment, effective March 29, 2004
- Bureau of Classification Management, Questions and Answers – PREA Assessments

Observations during on-site review

Interview with the following:

- Staff Responsible for Risk Screening
- PREA Compliance Manager (IPCM)

Provision (a)

FDC, Procedure 601.209, Reception Process – Initial Classification, effective September 17, 2020, pp. 5 and 6, requires all FDC facilities during the reception process to adhere to the following guidelines, screening and assessments: Upon arrival, among other things, see all inmates for a social interview, medical review, substance abuse screening and assessment for risk of victimization or abusiveness prior to release to general population. Further, all inmates, at initial intake and upon transfer to another facility, shall be screened for potential risk of sexual vulnerability, potential risk of sexual aggression and self-injurious behavior and/or suicidal ideation within 72 hours of arrival. Inmates who surpass the threshold on the screening form are referred to Mental Health Services for an additional assessment regarding their level of risk, environmental considerations, and treatment needs.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 6, indicates each time an inmate arrives at an institution, Health Services staff will screen the inmate upon arrival as soon as possible and within 24 hours. This screening shall be conducted as part of the intake process to assess the inmate’s sexual orientation including whether the inmates identifies as LGBTI, and whether the inmate has a mental, physical, or developmental disorder that requires particularized medical or mental health care. This information will be documented in OBIS.

Of the thirty-five inmates who were interviewed relative to this provision, thirty-five were able to recall being asked questions relative to their concern for sexual safety, and if they felt like they were going to harm themselves.

During the on-site audit, the Auditor was able to review the intake process. Provision (b)

As stated in (a), according to the listed policies all inmates must be screened within seventy-two hours of arrival. The Auditor reviewed the PAQ which indicated in the past twelve months, 100% of 1,062 inmates were screened for the risk of sexual victimization or sexual abusiveness within 72 hours of their entry into the facility.

A list of inmates’ arrival dates and dates of evaluation demonstrate compliance with this standard. From the roster of inmates, the Auditor chose one hundred records of inmates to review. The records were for inmates from varying housing units, ethnic and racial backgrounds. The names were chosen from a complete alpha roster of inmates. The Auditor went down the list and randomly chose names, in no order or sequence, from the roster.

The Auditor reviewed one-hundred inmate records to ensure they received the training and how that training was completed. All one hundred records had verification that the initial screening had occurred within 72-hours of arrival at HCI.

Of the random and targeted inmates interviewed, all inmates recalled being asked questions specific to previous Sexual Abuse & Harassment within three (3) days of their arrival at the facility.

Provision (c)

The Auditor reviewed a copy of the intake form and screening assessment form. Staff members who conduct Intake Screenings utilize the Bureau of Classification Management, IBAS, IRMS Assessment for guidance in conducting an initial assessment of an inmate's risk of victimization and risk of abusiveness. Inmates who surpass the threshold on the screening form are referred to Mental Health for an additional assessment regarding their level of risk, environmental considerations, and treatment needs. The inmate is reassessed within thirty days, after the initial meeting.

The Auditor was able to verify compliance with this provision through the review of one-hundred inmate records, reflecting copies of the required assessments. A review of the Bureau of Classification Management, IBAS, IRMS Assessment indicates the instrument is weighted and scored based upon responses to specific questions required in the Standard and Provision.

Provision (d)

The Auditor reviewed the Bureau of Classification Management, IBAS, IRMS Assessment form and compared the questions with the requirements of Provision (d). All items required for Provision (d) have been included on the screening instruments. The included items are:

- What is the inmate's sexual orientation
- What is the inmate's gender identity
- Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming
- Whether the inmate has been a victim of sexual abuse while incarcerated, as an adult or juvenile
- Whether the inmate been a perpetrator of sexual abuse while incarcerated, as an adult or juvenile
- Whether the inmate has been a victim of sexual abuse anytime in the life outside of being incarcerated
- Whether the inmate has been a perpetrator of sexual abuse anytime in the life outside of being incarcerated
- Whether the inmate feels adequately familiar with the prison environment Whether the inmate is being approached or pressured by other inmates for sexual favors
- Whether the inmate was previously incarcerated
- Whether the inmate's criminal history is exclusively nonviolent
- Whether the inmate has prior convictions for sex offenses against an adult or child
- Whether the inmate has previously experienced sexual victimization
- The inmate's own perception of vulnerability.
- Whether the assessor notices or has knowledge of anything the inmate is not reporting.

Provision (e)

The Auditor reviewed the Bureau of Classification Management, IBAS, IRMS Assessment and compared the questions with the requirements for Provision (e). All items required for Provision (e) have been included in the screening instrument, which addresses Possible Sexual Predatory Risk Factors.

As stated in (a), the Auditor was able to review the intake process and interview intake staff who were able to explain the intake process.

Provision (f)

The Auditor reviewed the PAQ which indicated of the inmates in the facility longer than thirty days in the past twelve months, 100% of 831 inmates were re-assessed for the risk of sexual victimization or risk of sexually abusiveness of other inmates within 30-days of their entry into the facility.

Of the random and targeted inmates interviewed, all indicated they recalled being asked questions relative to this standard. Most indicated they recalled being interviewed within a couple of weeks after arrival. The inmate records confirmed their recollection.

Out of the one-hundred records which were reviewed by the auditor, all had been reassessed within thirty days. Different staff completed these finished screening documents, with each instrument being finalized consistent with the standard.

Provision (g)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, pp. 7, number 11 and 12, state within 30 days from the initial intake screening, the institution will reassess the inmate's risk of victimization or abusiveness and a reassessed additionally when warranted due to referral, request, incident of sexual abuse or receipt of additional information that bears on the inmates' risk of sexual victimization or abusiveness.

As stated in provision (a), the Auditor was able to review the intake process and interview intake staff who were able to explain the intake process. Intake staff indicated the classification staff monitor the inmate population, and will re-assess when warranted due to a referral, request, incident of sexual abuse or receipt of additional information that may have bearing on the inmate's risk of victimization or abusiveness.

Provision (h)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, pp. 7, number indicate inmates are not to be disciplined for refusing to respond or electing not to disclose complete information with regard to this provision.

HCI staff indicated they do not discipline any inmate for their refusal to answer these questions during an assessment, rather each of them indicated they would explain the reason behind the question and attempt to solicit a response. However, no disciplinary action would be taken if the inmate chose not to respond.

Provision (i)

As stated in provision (a), the Auditor interviewed intake staff. During that interview, the intake staff indicated access to the inmate's classification information is secured, with controlled access by classification staff.

The Auditor interviewed the IPCM regarding who can specifically access the screening information collected during intake and screenings, and was informed that Medical Staff, Mental Health Staff, Classification Staff and the IPCM have access. All information is limited to a need-to-know basis for staff, only for the purpose of treatment and security and management decisions, such as housing and cell assignments, as well as work, education, and programming assignments.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined HCI meets every provision of the standard which addresses Screening for Risk of Sexual Victimization and Abusiveness. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021
- FDC, Procedure 601.209, Reception Process – Initial Classification, effective September 17, 2020
- FDC, Procedure 403.012, Identification and Management of Inmates Diagnosed with Gender Dysphoria, effective November 13, 2019
- Inmate Records

Interview with the following:

- Staff Responsible for Risk Screening
- Institutional PREA Compliance Manager (IPCM)
- Agency PREA Coordinator (PC)
- Random Inmates

Provision (a)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, pp. 6, 7, numbers 6 and 10 respectively, indicate the agency shall use information from the risk screening required by §115.41 to inform housing, bed, work, education and program assignments with the goal of keeping separate those inmates at high risk of being sexual victimized from those at high risk of being sexual abusive.

The IPCM indicated every assessment completed by staff is factored into the placement and programming of each inmate. He further stated the inmate's risk levels, housing and program assignments are guided with the use of these various assessments ensuring that every inmate, especially those at high risk of being sexually victimized, are separated from those at high risk of being sexually abusive.

Following a review of one hundred inmate records, the Auditor was able to verify that the information from these assessments was being utilized in the various classification decisions made by staff.

Provision (b)

FDC, Procedure 601.209, Reception Process – Initial Classification, effective September 17, 2020, p. 9, c, as well as FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 7, item 10, indicate the information obtained during the screening process and PREA Mental Health Assessment is used to make individualize and safety based determinations and assist in the initial classification and institutional assignment of the inmate, as well as determine work, education and program assignments.

During interviews with staff who are responsible for risk screening, the Auditor was informed that because of the assessment procedures being utilized, each inmate is individually evaluated. Staff not only use the assessment procedures which are in place, additional consideration is given to the discussions with each individual inmate when making classification and housing decisions.

Provision (c)

FDC, Procedure 403.012, Identification and Management of Inmates Diagnosed with Gender Dysphoria, effective November 13, 2019, p. 7, requires that when deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, and in making other housing and programming assignments, the institution shall consider on a case-by-case basis whether the placement would ensure the inmate's health and safety, and whether the placement would present management or security concerns.

During interviews with intake staff that are responsible for risk screening, they indicated the transgender or intersex inmates view of their own safety is taken into serious consideration when determining housing placements and programming assignments. In addition, the staff who are responsible for risk screening indicated because of the assessments that are

utilized, each inmate is evaluated individually.

The interview notes of the PC, indicated according to FDC policy, the gender identification of each inmate is initially determined by their sex assignment at birth; however, from that point forward every inmate is individually assessed and classified in order to ensure the safety of each inmate, as well as the safety of the inmate population.

During interviews with transgender inmates, all reported feeling the HCI staff had taken their health and safety into consideration when making their housing and programming assignments.

Provision (d)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 6, item 8, states that placement and programming assignments for each transgender or intersex inmate shall be assessed biannually by classification. An interview will be conducted as well as a review of their housing, program, and work assignments to determine if there are any necessary changes or threats to the inmate's safety.

During interviews with the PC, IPCM and intake staff responsible for screening, all specified the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. They further confirmed that regular classification reassessments are conducted a minimum of every six months, or if the inmate is involved in an incident of a sexual nature.

During interviews with transgender inmates, the Auditor learned none had been in the facility longer than three months. Therefore, none had been re-assessed every six months. They did report the staff check on them informally and frequently.

Provision (e)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 6, Section 2, as well as FDC, Procedure 403.012, Identification and Management of Inmates Diagnosed with Gender Dysphoria, effective November 13, 2019, p. 7, d, show that a transgender or intersex inmate's own views with respect to his or her own safety shall be given serious consideration.

During interviews with the PC, IPCM and intake staff responsible for screening, all specified the transgender or intersex inmate's views of their own safety is given great weight when making decisions regarding housing placement or programming assignments. These inmates are interviewed further to determine enemies and potential or perceived threats. Housing placement and programming assignments are based on this information.

During interviews with transgender inmates, reported they felt the HCI staff seriously consider their feelings and perceptions when making feeling decisions regarding their cases, programming, housing, etc.

Provision (f)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 6, item 9, reveals transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.

According to the PC, IPCM and the staff responsible for risk screening, each indicated the transgender or intersex inmate's views of their own safety is given serious consideration when providing showering options. In addition, they clarified, transgender or intersex inmates would be able to shower separately from other inmates by utilizing alternate shower times.

As previously identified, each of the housing units have bathrooms with shower stalls that have screens for use by transgender inmates for additional privacy, if desired. The random staff who were interviewed also indicated that if a transgender or intersex inmate asked to shower separately, they would arrange a separate shower time from the other inmates.

During interviews with transgender inmates, they reported being satisfied with the alternate shower options provided by the HCI staff. They further stated the additional privacy screens provided specifically for transgender inmates provided sufficient privacy.

Provision (g)

The interview with the PC and the IPCM, both indicated that neither the FDC or HCI are under any consent decree, legal settlement, or legal judgment requiring the establishment of a dedicated facility, unit or wing for lesbian, gay, bisexual, transgender or intersex (LGBTI) inmates. Both indicated that all LGBTI inmates are housed within the general population unless specific issues are present and only then the appropriate staff will meet with the inmate and address the concerns.

During interviews with LGBTI inmates, all reported they were housed in general population and were not currently, nor had they ever been, housed in a unit designed for only LGBTI inmates. The Auditor reviewed an inmate roster and confirmed that all LGBTI inmates were housed in general population.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the HCI meets every provision of the standard requiring the use of screening information. No recommendation or corrective action is required.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, effective date September 7, 2021
- Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 1, (a) (b), 2 (a), 3, (a-f), 8, (c)

Interviews with the following:

- Institutional PREA Compliance Manager (IPCM)

Provision (a):

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 1, (a) defines administrative confinement as the temporary removal of an inmate from the general population in order to provide for security and safety until such time as a more permanent management process can be conclude.

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 1, (b), states when a decision is made to place an inmate in administrative confinement, the reason for such placement shall be explained to the inmate and the inmate shall be given an opportunity to present verbal comments on the matter. The inmate shall also be allowed to submit a written statement.

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 3, specifies once the investigation is complete the Institutional Classification Team (ICT) shall interview the inmate to determine whether the inmate has a legitimate, verifiable need for protection. The ICT shall review all documentation available concerning the need for protection to include any written statements submitted by the inmate. The inmate's written request for release and the DC6-203 will also be reviewed. The following elements shall be considered in determining whether protective management is necessary:

- (a) A record of having been assaulted
- (b) Not applicable to this standard
- (c) Not applicable to this standard
- (d) No't applicable to this standard
- (e) Not applicable to this standard
- (f) Reliable confirmed evidence of sexual harassment
- (g) Other factors such as physical size, build, age producing a risk from the general inmate population

Florida Department of Corrections (FDC), Procedure 602.053, effective date September 7, 2021. p. 10, Section 4, (a), 2, (a), states inmate victims of sexual abuse and/or sexual harassment will not be involuntarily segregated unless an assessment of all other available alternatives has been made and a determination has been made that there is not available alternative means of separation from likely abusers. If the inmate indicates s/he would like to be housed in administrative confinement, the inmate is no longer involuntarily segregated and this may be placed in administrative confinement pursuant to the provisions of "administrative Confinement," Rule 33-302.220, FAC.

The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the IPCM specific to this issue and he confirmed there have not been any inmates placed in protective custody in the past twelve months.

Provision (b)

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 2, (a) indicates administrative confinement is a temporary confinement status that may limit conditions and privileges as provided in subsection (5) as a means of promoting the security, order and effective management of the institution. Otherwise the treatment of inmates in administrative confinement shall be as neat to that of the general population as assignment to administrative confinement shall permit. Any deviations shall be fully documented as set forth in the provisions of this rule.

Administrative confinement shall only be until an alternative means of separation from the likely accuser can be arranged, a time period not to ordinarily exceed thirty days. In these cases, the facility shall clearly document the basis for the facility's concerns for the inmate's safety and the reason why no alternative means of separation can be arranged.

The PAQ reflects during the past twelve months there have been zero inmates placed into involuntary administrative or punitive segregation in accordance with this standard. The Auditor interviewed the IPCM specific to this issue and he confirmed there have not been any inmates placed in protective custody in the past twelve months. Consequently, no inmates could be interviewed relative to this provision.

Provision (c)

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 5 states the State Classification Office (SCO) shall determine within five working days whether protection is necessary based upon the investigation and any follow-up they deem appropriate. The SCO shall approve or disapprove placement of the inmate in protective management. The SCO's decision shall be documented in the electronic classification contact log in OBIS. If the SCO determines that a need for protection exists, they shall direct that the inmate shall be placed in a protective management unit or transferred to resolve the inmate's need for protection. If a decision is made to transfer the inmate for housing in a protective management unit or to resolve the inmate's need for protection at the inmate's current location, the inmate shall be kept in administrative confinement until the transfer is completed. Transfers for protection needs shall be affected within five working days. SCO members are authorized to approve transfers.

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 6 states the facility shall assign such inmates to administrative confinement only until an alternative means of separation from likely abusers can be arranged, and such an assignment shall not ordinarily exceed a period of 30-days.

The PAQ reflects during the past twelve months there have been no inmates placed into involuntary administrative or punitive segregation in accordance with this standard, specific to a period longer than 30-days, while awaiting alternative placement. The Auditor interviewed the IPCM specific to this issue and he confirmed there have not been any inmates placed in protective custody in the past twelve months.

Provision (d)

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 6, (e), 4 states an inmate can be placed in administrative confinement:

1. Pending an evaluation for placement in close management.
2. Special review against other inmates, disciplinary, program change or management transfer. Transfers for this reason shall be given priority.
3. Pending an investigation into allegations that the inmate is in fear of a staff member. The protection process outlined in paragraph (d) above shall be utilized for this purpose. Paragraph (c) above shall not apply.
4. Any other reason when the facts indicate that the inmate must be removed from the general inmate population for the safety of any inmate or group of inmates or for the security of the institution.

As previously stated there have not been any inmates placed in protective custody in the past twelve months.

Provision (e)

Florida Administrative Code (FAC), Chapter 33-602.220, Administrative Confinement, 8, c, indicates if an inmate is confined for more than 30 days, the ICT shall interview the inmate and shall prepare a formal assessment and evaluation report after each 30-day period in administrative confinement. Such reports may be in a brief paragraph form detailing the basis for confinement, what has transpired since the last report, the decision concerning continued confinement and the basis for that decision.

As stated previously, during the past twelve months there have been no inmates placed into protective custody in accordance with this standard. This was confirmed via the IPCM interview.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the HCI meets every provision of the standard relative to protective custody. No recommendation or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Bureau of Professional Development and Training, ETRAIN Course Code PREA-001, Revised June 2019
- FDC Employee Handbook, dated July 2020
- Florida Department of Corrections (FDC) Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- FDC, Form DC6-210, Incident Report
- FDC, Form DC1-303, Third Party Grievance
- FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18
- FDC, Sexual Abuse Awareness Brochure, revised September 10, 2021
- Florida Administrative Code (FAC), Chapter 33-103.006 Formal Grievance – Institution or Facility Level
- Agreement #A3816 between FDC and Dawn Center of Hernando County, dated January 20, 2022
- PREA Poster in English and Spanish

Observations during on-site review

Interview with the following:

- Institutional PREA Compliance Manager (IPCM)
- Random Staff
- Random Inmates

Provision (a):

FDC, Procedure 602.053, effective date September 7, 2021, pp. 9-10, (3), (a), 1-9 specifies that the FDC shall provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment, retaliation by other inmates or staff for reporting sexual abuse or sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents.

(a) The following methods are available for inmates and offenders to report incidents of sexual abuse, sexual battery, staff sexual misconduct and sexual harassment:

1. A verbal report to any staff member, volunteer, or contractor
2. Calling the TIPS line (866-246-4412 or *8477 for inmates)
3. Calling an outside entity (Dawn Center) and report (352-686-8430) or *8466 for inmates)
4. Filing an Inmate Request, DC6-236
5. Filing an informal and/or formal grievance
6. Having a family member, friend, or other member of the public fill out the online Citizen's Complaint Form
7. Having a family member, friend or other member of the public submit a third-party grievance
8. Write or email the Office of Inspector General
9. Write or email the PREA Coordinator

Of the staff interviewed, all indicated they would accept a report or allegation from the inmate and provide it to their supervisor for further direction. They each also reported inmates can report several different ways which includes telling a staff member, calling the PREA hotline posted throughout the facility, or telling a family member. Staff interviewed stated inmates can privately report sexual abuse or sexual harassment as well, through the hotline number.

Of the inmates interviewed regarding this provision all reported they were aware of multiple ways to report incidents of sexual abuse or sexual harassment. These included using the hotline number, contacting the IPCM, have family member contact the institution, contacting a staff member, and "writing to the address on the poster". Most indicated they would tell a staff member first.

During the on-site portion of the audit, the Auditor observed numerous different PREA posters in both English and Spanish throughout the facility. These posters were observed in each housing unit, common areas, main hallways, intake holding area, dining room, etc. The Auditor checked numerous inmate telephones throughout the facility, and all were in working order and readily available in each housing unit.

Provision (b)

FDC, Procedure 602.053, effective date September 7, 2021, p. 10, (a), 3, states an inmate or offender may report incidents of sexual abuse, sexual battery, staff sexual misconduct and sexual harassment by calling an outside entity (Dawn Center) and report (850-832-3905 or *8466 for inmates).

FDC, Procedure 602.053, effective date September 7, 2021, p. 10, (a), 8, states an inmate or offender may report incidents of sexual abuse, sexual battery, staff sexual misconduct and sexual harassment by writing the Office of Inspector General (using legal mail procedures).

The IPCM was interviewed regarding the FDC's process for providing one way for the inmate population to report abuse or harassment to a public or private entity. He indicated HCI has a contractual relationship with Dawn Center, which serves as an outside agency that provides an avenue for the inmate population to contact them and leave an anonymous message. He further stated that these messages are provided directly to the agency level PREA Coordinator for appropriate follow-up and resolution. The Auditor was able to view spreadsheets, which identify the facility and the issue; however, there is no indication of who the reporting party is, therefore, maintaining anonymity.

Of the inmates interviewed regarding this provision, all were familiar with the outside agency. Further they were knowledgeable of the services they offered and the confidentiality of their services. All were familiar with telephone number and address posted throughout the facility. All inmates reported they were aware they could make a report via the telephone without providing their name or ID number.

During the on-site tour, each phone that was tested was in working order and could call out to the local PREA Hotline by dialing 352-686-8430 or *8466. Sufficient time was provided to leave a detailed message to follow-up and never required personal identifying information.

Provision (c)

FDC, Procedure 602.053, effective date September 7, 2021, p. 9, (3) states all incidents or allegations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment will be reported.

FDC, Procedure 602.053, effective date September 7, 2021, p. 10, (a), states any employee, volunteer or contractor who observes, has knowledge of, or received information, written or verbal (either first hand or a third party), regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the office of Inspector General, who will then take immediate steps to evaluate the inmate's concern/allegations.

FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18, p. 19, indicates if an inmates feels they have been a victim of sexual assault/battery or sexual harassment they are to immediately notify a staff member so appropriate action can be taken. When sexual assault/battery or sexual harassment are verbally reported to a staff member, the staff member completes FDC, Form DC6-210, Incident Report.

Of the inmates interviewed regarding this provision, 100% indicated they were aware of the ability to make reports of sexual abuse or sexual harassment in person and in writing.

Provision (d)

Florida Department of Corrections (FDC), Bureau of Professional Development and Training, ETRAIN Course Code PREA-001, Revised June 2020, states the agency shall provide a method for staff to privately report sexual abuse and sexual harassment of inmates. These reporting methods include but are not limited to writing or calling the Office of Inspector General; writing or calling the FDC PREA Compliance Coordinator; writing or speaking with institution executive staff such as the Warden or the PREA compliance Manager.

Through interviews with staff, several methods for staff to privately report sexual abuse of inmates were identified. All staff indicated they may choose to make a private report to their supervisor, another supervisor, the FDC PREA Coordinator, OIG, or the IPCM.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined HCI meets every provision of the standard relative to inmate reporting. No recommendation or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 108.015, effective date February 22, 2018, pp. 2, 4, 7
- FDC, Procedure 602.053, effective date September 7, 2021, p. 10, 15, 16 Florida Administrative Code (FAC), 33-103.005, Informal Grievance
- FAC, 33-103.005, Informal Grievance
- FAC, 33-103.006, Formal Grievance – Institution or Facility Level
- FAC 33-103.017, Inmate Grievance – Reprisal
- FAC, 33-103.011, Time Frames for Inmate Grievances
- FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18 – English and Spanish

Observations during on-site review

Interviews with the following:

- Random and Specialized Staff
- Random and Targeted Inmates

Provision (a):

In the PAQ the facility reported the agency has an administrative procedure for dealing with inmate grievances regarding sexual abuse and sexual harassment. The PAQ also reflects, HCI had zero grievances in the past twelve months.

Florida Administrative Code (FAC), 33-103.005, Informal Grievance, (1), states Inmates shall utilize the informal grievance process prior to initiating the formal grievance process. Inmates may skip this step and initiate the process at the formal institutional level for grievances regarding allegations of sexual abuse.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (2), (j), states if the inmate or third party is filing a grievance involving sexual abuse, it shall be clearly stated in the first line of the grievance that it is a grievance related to sexual abuse. Also, on Form DC1-202 the third-party filer shall check the box next to Third Party Grievance Alleging Sexual Abuse. If this statement is not included in the grievance and if the third part box is not checked, the grievance shall be responded to. This will not be a reason to return the grievance without action to the filer.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (4) (j), (1), If an inmate believes he or she is a victim of sexual abuse they should immediately report it. There are several ways that allegations of sexual abuse may be reported, filing grievances is one of those ways. If an inmate decides to use the grievance proves to report sexual abuse, they must complete form DC1-202, Request for Administrative Remedy or Appeal and file within the requirements and guidelines listed below. This rule is established to meet the requirements of the Prison Rape Elimination Act (PREA0 of 2003. 28 CFR Part 115.

a. The grievance should begin at the formal level at the institution unless filing pursuant to paragraph 33-103.007 (6)(a), F.A.C., or subparagraph 33-103.007 (6)(b)5., F.A.C. There is no time limit on when an inmate or third party may initiate a grievance regarding allegations of sexual abuse. However, normal time limits as described in rule 33-103.011, F.A.C., will apply when the inmate receives the response to the formal grievance and elects to proceed to the next level of review. Staff shall comply with response time requirements outlined in rule 33- 103.011, F.A.C.

The Auditor reviewed FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18. The handbook informs offenders how to report allegations of sexual abuse. The procedures listed in the Inmate Orientation Handbook include the process for submitting both formal and informal grievances. Each offender receives a handbook at the time of admission.

The Auditor conducted formal and informal interviews inmates. Each inmate reported they could file a grievance to report an allegation of sexual abuse. The Auditor asked each inmate if he could file a grievance alleging an imminent risk of sexual abuse. The inmates were aware of the grievance process and no offender interviewed had done so. Most inmates stated they would immediately notify a staff member as that is the quickest way to report. Some inmates stated they might use the hotline number. Each inmate was asked if he was required to give his name when alleging sexual abuse. All inmates were aware they could submit an allegation anonymously.

Provision (b)

Florida Administrative Code, 33-103.005, Informal Grievance, (1), states Inmates shall utilize the informal grievance process prior to initiating the formal grievance process. Inmates may skip this step and initiate the process at the formal institutional level for grievances regarding allegations of sexual abuse.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (4) (j), (1), (a), states there is no time limit on when an inmate or third party may initiate a grievance regarding allegations of sexual abuse. However, normal time limits as described in rule 33-103.011, F.A.C., will apply when the inmate receives the response to the formal grievance and elects to proceed to the next level of review. Staff shall comply with response time requirements outlined in rule 33- 103.011, F.A.C.

FDC, Procedure 602.053, effective date September 7, 2021, p. 10, (3), (d), states no initial time limit shall be imposed for sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment grievances.

Provision (c)

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (4), 1, (b), states inmates filing grievances alleging sexual abuse shall not be instructed to file the grievance to the individual(s) who are the subject(s) of the complaint. Additionally, grievances of this nature shall not be referred to the subject(s) of the complaint.

Provision (d)

FDC, Procedure 602.053, effective date September 7, 2021, p. 15, (10), (a), states when an allegation is returned to the management (RM) from the Office of the Inspector General, the institution will be responsible for conducting a PREA administrative security investigation utilizing a “PREA Investigative Report,” DC6-2079. Upon completion of this investigation, the facility will also be responsible for notifying the inmate(s) regarding the outcome of the investigation via an “Inmate Notification Administration Investigation Outcome,” DC6-2080. Once completed, the DC6-2079 will be forwarded to the PREA Coordinator.

FDC, Procedure 602.053, effective date September 7, 2021, p. 16, (10), (b), indicates unless the allegation is unfounded, following an inmate’s allegation that a staff member has committed sexual abuse against her/him, the Warden or her/his designee shall inform the inmate via an “Inmate Notification PREA Staff Allegation,” DC6-2081, whenever the staff member is no longer:

- assigned to the facility; or
- employed with the Department.

FAC, 33-103.011, Time Frames for Inmate Grievances, (2), (b), indicates formal Grievances – The reviewing authority as defined in paragraph 33-103.002(15)(b), F.A.C., shall have up to 20 calendar days from the date of receipt of the grievance to act and respond. See rule 33-103.006, F.A.C.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (3) (g), indicates the Department shall claim an extension of time to respond, of up to 70 days, if the normal time period for response is insufficient to make an appropriate decision due to the need for additional investigation. The inmate shall be notified in writing of the extension and date by which a decision will be made.

There were zero PREA grievances filed in the past twelve months; therefore, there were not any documents to review.

Provision (e)

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (3) (f), if the inmate agrees to let the grievance filed by a third party proceed, staff shall log the third-party grievance alleging sexual abuse and provide a receipt to the inmate. The response will be provided to the inmate. If the inmate is unsatisfied with the response to the formal grievance, they may file an appeal on Form DC1-303. The third part who initiated the formal grievance cannot appeal the decision when it is rendered. Staff shall notify the third-party filer of the disposition render on the grievance. In accordance with the Health Insurance Portability and Accountability Act, specifics of the case shall not be divulged to the third party.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (3), (j), (c), states third parties, including fellow inmates, staff members , family members, attorneys and outside advocates shall be permitted to assist inmates in filing grievances alleging sexual abuse. Third parties are also permitted to file such grievances on behalf of inmates.

Provision (f)

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (3), (h) states an inmate may file an emergency grievance if they believe they are subject to a substantial risk of imminent sexual abuse.

FAC, 33-103.006, Formal Grievance – Institution or Facility Level, (3), (i) states When receiving an emergency grievance from an inmate expressing belief, they are subject to a substantial risk of imminent sexual abuse the institution must take

immediate corrective action. Staff handling this grievance shall provide an immediate response within 48 hours and shall issue a final decision within 5 calendar days from the receipt of the grievance. The final decision will document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Through the interview process with staff, the Auditor confirmed staff were aware that inmates could submit grievances alleging a risk of imminent sexual abuse or to report an allegation of sexual abuse. Facility staff understood the procedures for submitting these emergency grievances alleging a risk of imminent sexual abuse. Supervisors were aware of the time limits in response to an emergency grievance alleging an imminent risk of sexual abuse.

FAC, 33-103.011, Time Frames for Inmate Grievances, (3), (e), states emergency Grievances Alleging Substantial Risk of Imminent Sexual Abuse – corrective action shall be conducted within 48 hours and a response must be provided within 5 calendar days.

Provision (g)

FAC, 33-103.017, Inmate Grievance – Reprisal, (2) states an inmate shall be subject to disciplinary action if the inmate knowingly includes false, threatening, obscene, or profane statements in the grievance or any of its attachments. In this instance the inmate shall be subject to administrative action in accordance with the provisions of Rules 33-601.301-.314, FAC., or criminal prosecution. Notwithstanding administrative or criminal proceedings, the grievance shall be responded to on its merits.

Conclusions:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding exhaustion of administrative remedies. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022
- Dawn Center Brochure, Sexual Battery, Your Rights and Services, dated June 2018
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- PREA Posters – English and Spanish
- FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18 – English and Spanish

Observations during on-site review

Interviews with the following:

- Random and Targeted Inmates

Provision (a)

On the PAQ the facility reported it provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

1. Giving inmates mailing addresses and telephone numbers (including toll-free numbers) for local, state, or national victim advocate or rape crisis organizations
2. Giving inmates mailing addresses and telephone numbers (including toll free numbers) for immigrant service agencies for persons detained solely for civil immigration purposes
3. Enable reasonable communication between inmates and these organizations in a confidential a manner as possible.

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 5, (25), defines a victim advocate as a qualified individual trained in rape crisis counseling.

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 11, (5), states any inmate who alleges sexual abuse or sexual battery shall be given a copy of the NII-120 and advised of her/his right to access crisis intervention services, to have a forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interview if s/he chooses. The provision of the NII-120 and the advisement of rights shall be documented on a DC6-210.

Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022, establishes collaboration between HCI and Dawn Center to provide confidential support services related to sexual abuse to individuals at HCI.

The Auditor spoke with a representative from Dawn Center and was informed a victim advocate is made available to be present with the victim before, during and following the examination.

Of the inmates interviewed, all had reported they had no knowledge of GCCAC. However, when specifically asked about the posters above the telephone on the housing units, each readily admitted there was a tollfree number and address available to them to contact someone in the event of sexual abuse or sexual harassment.

Each inmate who stated they were familiar with Dawn Center, reported the call was free and confidential. Each responded they knew about an outside agency because of the PREA training and the posters around the facility. Each responded they knew some of the information they provided might be given to the facility staff.

During the tour of the facility, the Auditor observed posters throughout the facility. The posters stated, "You have a right to be free from sexual assault" or "zero tolerance for sexual abuse or assault". The posters had a victim support telephone number to call. The Auditor utilized the telephone number provided and was able to confirm it was functioning for the identified services. Lastly, postings around the facility as well as the FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18 let inmates know they have the ability to notify the IPCM, or other staff member, of any incident of sexual abuse or sexual harassment.

Provision (b)

On the PAQ the facility reported it tells inmates the extent to which communications will be monitored and the limits of confidentiality due to mandatory reporting laws,

During the tour of the facility, the Auditor tested several pay phones to ensure they worked. Each time the telephones functioned appropriately. The phones are checked once on each shift by an intermediate or higher-level staff member to make sure they are in working order to reach the outside support agency without difficulty.

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 14, (7), (c), specifies, alleged inmate victims of sexual abuse, sexual battery, or staff sexual misconduct shall receive timely, unimpeded access to emergency treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health practitioners according to their professional judgment.

All of the inmates interviewed, had knowledge of the Dawn Center. When specifically asked about the posters above the telephone on the housing units, each readily admitted there was a tollfree number and address available to them to contact someone in the event of sexual abuse or sexual harassment. Each inmate who reported knowledge of the community agency stated they understood there were limits to confidentiality and some information might be reported back to facility staff.

The Auditor spoke with a representative from Dawn Center and was instructed a victim advocate is made available to be present with the victim before, during and following the examination. The representative reported Dawn Center staff have a responsibility to inform any victim that some information the victim shares with them may need to be provided to facility staff. This information may be medical and/or non-medical, for purposes such as institutional security, PREA investigation, and further medical and mental health services.

Provision (c)

On the PAQ the facility reported it has a contract with a community service provider and maintains copies of that contract.

Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022, establishes collaboration between HCI and Dawn Center to provide confidential support services related to sexual abuse to individuals at HCI. The facility maintains a copy of this contract. A copy of the contract was provided to the Auditor.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding inmate access to outside confidential support services. No recommendations or corrective action.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Material Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • Florida Department of Corrections (FDC), FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021 • FDC webpage link - http://www.dc.state.fl.us/PREA <p>Provision (a)</p> <p>On the PAQ, the facility reported there is access to third-party reporting through their agency website.</p> <p>Florida Department of Corrections (FDC), FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 10, (7) states a method for reporting sexual abuse or sexual harassment is to have a family member, friend, or other member of the public submit a third-party grievance.</p> <p>The FDC has provided access to a third-party reporting process through their agency website. On the agency website, the individual wishing to report a PREA related incident can access this through the following link: - http://www.dc.state.fl.us/PREA - Under resources on this page, there is a link for a Third-Party Grievance Form.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding third party reporting. No recommendations or corrective action is required.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021

Interviews with the following:

- Random Staff
- Facility Head or designee - Warden
- PREA Coordinator (PC)
- Institutional PREA Compliance Manager (IPCM)

Provision (a)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 10, (a) states any employee, volunteer, or contractor who observes, has knowledge of, or receives information, written or verbal (either first hand or from a third party), regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the Office of the Inspector General, who will then take immediate steps to evaluate the inmate's concern/allegation. The authority notified will ensure proper medical treatment (if applicable) and mental health treatment are obtained. An investigation will be initiated in accordance with "Investigative Process," Procedure 108.003 and "Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations," Procedure 108.015.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 8, (c), (4), indicates the general PREA training shall include, among other things, the rights of both staff and inmates to be free from retaliation for reporting sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 9, (f), (4-5), specifies all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but is not limited to:

- taking all appropriate measures to ensure the safety of an inmate who may have been sexually abused or battered or of an inmate who may have reported the sexual abuse or sexual battery of another
- promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment

During interviews with staff, 100% were aware of this requirement and were able to explain how they would immediately report an allegation of sexual abuse in a manner compliant with policy. Moreover, each verbalized information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e. their supervisor, medical staff, etc. All staff indicated PREA related allegations and reports go to the IPCM, who then notifies the investigative staff.

Provision (b)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 16, (12) specifies no employee, volunteer, or contractor may knowingly disclose any information pursuant a sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to any person other except as permitted by law. The release of any information identifying any PREA or other sexual battery or sexual abuse victims in the custody of the Department shall not be printed published, or broadcasted unless a court determines that such information is no longer confidential and exempt pursuant to section 92.56, F.S., or other applicable law.

During interviews with staff, 100% were aware of this requirement and were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each articulated information received from a victim should remain confidential, with them only notifying staff that needed to know, i.e. their supervisor, medical staff, etc.

Provision (c)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 9, (3), indicates all incidents or allegations of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment will be

reported in accordance with: "Incident Reports - Institutions," Procedure 602.008; or "Incident Reports - Community Corrections," Procedure 302.045, as appropriate; and "Reporting Incidents to the Inspector General and Management Information Notification System," Procedure 108.007; and "Emergency Action Center," Procedure 602.012.

During interviews with medical and mental health staff, 100% were aware of this requirement and were able to verbalize how they would immediately report an allegation of sexual abuse. Further, each verbalized their understanding of the policy as well as their rights and responsibilities. They all articulated they were obligated to advise the victim (inmate) of the limitations of confidentiality, due to the mandatory reporting law, prior to the initiation of services.

Provision (d)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 14, (b), indicates if during a screening or services, medical and mental health practitioners gain knowledge of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment that did not occur in an institutional setting they shall obtain informed consent from the inmate before reporting the information, unless the inmate is under the age of 18. This informed consent shall be documented as received on a DC6-210.

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

Interviews with the Warden and the PC, revealed they were aware of this requirements and would report any abuse allegations to the appropriate agency, as required by law, as well as the IPCM and agency investigators.

Provision (e)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 10, (4), specifies any employee, volunteer, or contractor who observes, has knowledge of, or receives information, written or verbal (either first hand or from a third party), regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the Office of the Inspector General, who will then take immediate steps to evaluate the inmate's concern/allegation. The authority notified will ensure proper medical treatment (if applicable) and mental health treatment are obtained. An investigation will be initiated in accordance with "Investigative Process," Procedure 108.003 and "Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations," Procedure 108.015.

In interviews with the PC and IPCM, each confirmed allegations of sexual abuse and sexual harassment are reported to the IPCM and Office of Inspector General investigators.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding staff and agency reporting duties. No recommendations or corrective action.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>115.62</p> <p>Materials Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Agency Head (AH) • Facility Head or designee - Warden • Random Staff <p>Provision (a)</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection and Response, effective September 7, 2021, p. 10, states when the Department learns that an inmate is subject to a substantial risk of imminent sexual abuse, it shall take immediately action to protect the inmate.</p> <p>Interview notes reflect the AH indicated if he received such information, he would contact the facility where the inmate was housed and if necessary, the inmate could be temporarily transferred while the investigation was completed. If the perpetrator were identified, the perpetrator would be placed in disciplinary segregation pending completion of the investigation.</p> <p>The Auditor interviewed the Warden, who stated she would take immediate action to protect the victim (inmate). The victim might be moved to another area of the facility or to another facility all together, depending on what was needed to protect the victim. She stated the perpetrator, if known, would be placed in segregated housing.</p> <p>During staff interviews, all staff reported if they received an allegation from an inmate, they would immediately separate the victim and the perpetrator, safeguard the victim, contact their supervisor, and preserve evidence.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding agency protection duties. No recommendations or corrective action is required.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 12
- Warden to Warden Notification

Interviews with the following:

- Agency Head or designee (AH)
- Facility Head or designee – Warden
- PREA Coordinator (PC)
- Institutional PREA Compliance Manager (IPCM)

Provision (a)

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp. 12, (8), indicates if staff at a receiving institution receives information that sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment occurred at another institution, the receiving institutions Warden shall notify the sending institutions Warden within 72 hours of receiving the allegation. The notification shall be documented on a DC6-210.

Provision (b)

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp. 12, (8), states indicates if staff at a receiving institution receives information that sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment occurred at another institution, the receiving institutions Warden shall notify the sending institutions Warden within seventy-two hours of receiving the allegation. The notification shall be documented on a DC6-210.

Provision (c)

As stated in provisions (a) and (b) the notification shall be documented on a DC6-210.

The Auditor reviewed emails that were sent from facility to facility regarding sexual abuse allegations. Each email included the PREA Case Number. A PREA case number is assigned once the allegation is reported to the Emergency Action Center (EAC) and entered in the Management Information Notification System (MINS). The Auditor compared the notification with the investigative tracking sheet and was able to determine each facility followed the agency's reporting requirements as each was assigned a PREA number. A review of the notifications confirmed all notifications were made within twenty-four hours.

Provision (d)

FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 12, (9) states the receiving institution, where the allegation is reported, will be responsible for contacting EAC, completing a DC6-210, and entering the appropriate information into MINS for appropriate handling.

A review of interview notes reveal that the AH, PC and the IPCM all confirmed any notification received regarding a PREA incident, whether it be sexual abuse or sexual harassment or staff sexual misconduct that occurred within any FDC facility will be investigated in accordance with the guidelines of FDC Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021.

The AH, PC and IPCM all indicated once an allegation of sexual abuse or sexual harassment is received from another agency, it is immediately assigned to an Office of Inspector General investigator to conduct the investigation.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding reporting to other confinement agencies. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- FDC, Officer-in-Charge (OIC) PREA Checklist
- FDC, Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations effective date February 22, 2018

Interviews with the following:

- Facility head or designee – Warden
- Custody Staff - First Responders
- Non-Custody - First Responders

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 11, (4), (a – e), states that upon learning of an inmate sexual abuse or sexual battery allegation or incident, the first security staff member to respond to the report shall be required to:

1. separate the alleged victim and abuser.
2. preserve and protect any potential crime scene until appropriate steps can be taken to collect any evidence.
3. if the alleged abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating;
4. if the alleged 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 but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating; and
5. if the first responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff.

Florida Department of Corrections (FDC), Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations effective date February 22, 2018, p. 5, (7), (b) states correctional personnel shall separate the alleged victim and suspect.

Florida Department of Corrections (FDC), Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations effective date February 22, 2018, p. 6, (e), (g), (h), (i), state:

1. The Officer in Charge (OIC) shall ensure that the crime scene is secure and remains undisturbed until released to a responding Inspector or other law enforcement authority. The OIC shall ensure that the victim inmate is instructed not to wash, bathe, eat, drink, smoke, brush her/his teeth, use the toilet, or change clothes until authorized by an Inspector or other law enforcement authority.
2. No inmate who is suspected of having been involved in a sexual battery or sexual misconduct shall be permitted or assisted to clean blood, saliva, or other evidence from her/his person, except as may be necessary for medical purposes. The suspect inmate(s) shall not be permitted to wash, bathe, eat, drink, smoke, brush her/his teeth, use the toilet, or change clothes until authorized by an Inspector or other law enforcement authority.
3. No crime scene in which evidence exists shall be cleaned, disturbed, transited, or manipulated in any manner until released by a responding Inspector or other law enforcement authority.

On the PAQ, HCI indicated they had zero grievances for alleged sexual abuse and sexual harassment in the past twelve-months.

The Warden indicated First Responder staff have been trained in the PREA process, and frequent training is conducted to ensure competency and compliance.

During staff interviews, all staff, were able to articulate to the Auditor, step-by-step how to respond to a PREA incident. All

staff were aware of the mandate to separate the perpetrator from the victim, preserve physical evidence, as well as the area the incident occurred, seek medical aid, as needed, and report the incident.

During interviews with First Responders, all stated they were trained in the PREA process through annual in-service training, on the job training, and staff meetings. Each verbalized the IPCM is constantly reminding them of PREA policies and speaking with them regarding the importance of PREA and sexual safety.

Non-custody staff who were interviewed, all stated they would notify custody staff, separate the victim and the perpetrator, direct the victim and the perpetrator not to do anything to destroy evidence and keep the scene secure until custody staff arrived. They all verbalized the importance of, as well as their understanding of the need for confidentiality in all cases.

The agency has an OIC PREA Checklist for supervisors to follow after an alleged incident of sexual abuse. The checklist includes, but is not limited, to the following:

- Separation of abuser and victim
- First responder duties
- Securing the crime scene
- Housing of victim
- Contacting EAC
- Evaluation by medical
- Complete MINS.

The OIC PREA Checklist requires the staff member completing the form to check a box next to each action included on the form and acts as a guide to ensure proper protocol is followed.

The Auditor reviewed nine investigative records. Each investigative record included a completed OIC PREA Checklist. The checklists were completed following each incident.

The documentation review also included the original complaint, the referral for investigation, referrals for mental health, and all subsequent available paperwork, including administrative remedy forms and responses where applicable. Where applicable, the inmates were given proper notice of the findings and the cases have been closed.

Provision (b)

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 11, (4), (b-c), state upon learning of an inmate sexual abuse or sexual battery allegation or incident, the first security staff member to respond to the report shall be required to preserve and protect any potential crime scene until appropriate steps can be taken to collect any evidence.

If the alleged abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking or eating;

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 11, (4), (d) states if the alleged 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 but not limited to, washing, bathing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating.

The Auditor's review of the PREA training curriculum that all staff, volunteers, and contractors participate in, identifies whoever received the information first, as a First Responder. As a First Responder these individuals are trained to take steps to isolate and contain the situation, secure the scene, separate the alleged victim from the alleged perpetrator, remove all uninvolved parties, relay any observations to the OIC, Shift Supervisor, OIG investigator, or IPCM.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding staff first responder duties. No recommendations or corrective action.

115.65	<p>Coordinated response</p> <p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • FDC, Officer-in-Charge (OIC) PREA Checklist WCI, Coordinated Response, dated July 6, 2020 • HCI PREA Coordinated Response, dated June 17, 2022 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Facility Head or designee – Warden <p>Provision (a)</p> <p>HCI has a detailed, written Coordinated Response Plan. The plan includes response actions for staff first responders, supervisors, medical and mental health practitioners, investigators and facility leadership. The Auditor reviewed nine OIC PREA Checklists. Each allegation was reported within the previous 12 months. A review of records show staff followed the actions outlined in the coordinated response plan.</p> <p>During interviews with specialized staff members the Auditor asked first responders, medical and mental health practitioners, investigators, and command staff questions regarding their duties in response to an alleged sexual abuse incident. Each first responder and specialized staff interviewed by the Auditor was able to articulate their required response actions following an alleged sexual abuse incident. Specialized staff interviewed by the Auditor understand and make appropriate response efforts to an alleged sexual abuse incident and staff has been appropriately trained to respond to such incidents.</p> <p>The Warden confirmed, during her interview with the Auditor, that the coordinated response plan has been identified in the policies listed above. She indicated each item breaks down what the various responsibilities are for the respective staff members and positions. Training is provided routinely through annual in-service training, monthly staff meetings and on the job training.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding coordinated response. No recommendations or corrective action.</p>
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115.66	Preservation of ability to protect inmates from contact with abusers
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Reviewed Materials</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • State of Florida Agreement with the Florida Police Benevolent Association, Article 7, Discipline and Discharge, effective September 30, 2021 to June 30, 2023 • 2015-16 Legislative Impasse Resolution to Articles 3, 5, 6, 7, 8, 9, 10, 13, 18, 25 and 26, effective July 1, 2015 <p>Interviews with the following:</p> <ul style="list-style-type: none"> • Human Resources (HR) • Random Staff <p>Provision (a)</p> <p>2015-16 Legislative Impasse Resolution states An employee who has attained permanent status in his current position may be disciplined only for cause as provided in section 110.227 Florida Statutes. Reductions in base pay, demotions, involuntary transfers of more than 50 miles by highway, suspensions, and dismissals may be affected by the state at any time against any employee. Demotion will not be used as a form of disciplinary action for employees in the classes of Correctional Officer, Correctional Probation Officer, Correctional Probation Officer-Institution, or Institution Security Specialist I.</p> <p>The Auditor reviewed the State of Florida Agreement with the Florida Police Benevolent Association, Article 7, Discipline and Discharge, effective September 30, 2021 to June 30, 2023. Article 7 of this agreement, Discipline and Discharge, does not limit the FDC's ability to remove alleged staff sexual abusers from contact with offenders pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted.</p> <p>Interviews with random staff reveal participation with the Florida Police Benevolent Association is optional. According to human resources personnel, management does have the right to separate the inmate from a staff member who is the subject of an investigation. This separation can either be temporarily reassigning the employee or redirecting the employee.</p> <p>Provision (b)</p> <p>Auditor is not required to audit this provision</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding preservation of ability to protect inmates from contact with abusers. No recommendations or corrective action.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021

Interviews with the following:

- Facility Head or designee – Warden
- Staff in Charge of Monitoring Retaliation

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 8, (c), (4), states both staff and inmates have the right to be free from retaliation for reporting sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.

According to the PAQ, a PREA Auxiliary Officer has been identified as the individual who is primarily responsible for monitoring possible retaliation.

Provision (b)

In the interview with the Warden, the Auditor was informed there are multiple measures used to protect inmates and staff from retaliation. These measures include considering and monitoring if the inmate is being given changes in housing assignments, work assignments or an increase in disciplinary reports. The monitoring of staff includes watching for negative performance reviews or work reassignments.

Provision (c)

According to the PAQ, HCI generally monitors for retaliation for a period of 90-days, unless further monitoring is needed. The PAQ also indicated, HCI did not have any instances of retaliation in the past twelve months.

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp. 11-12 (7), (a-c), states inmates and/or staff who report sexual abuse will be monitored for retaliation for at least 90 days, with at least three contact status checks to occur within the 90-day monitoring period at the 30-, 60-, and 90-day marks from the date of the allegation.

1. Conduct, including a review of disciplinary reports, treatment by other staff and inmates, and changes in housing, program assignments, work assignments, and demeanor will be reviewed along with the periodic status checks. For auditing purposes, it is the responsibility of the originating facility.
2. If an inmate is transferred during the 90-day monitoring period, it is the receiving institutions' procedural responsibility to continue monitoring the inmate for the remainder of the 90-day period.
3. Although monitoring shall continue for at least 90 days, if during this period, the investigation has determined the allegation to be unfounded, monitoring may cease.

In the interview with the Warden, the Auditor was told that retaliation is absolutely not tolerated at HCI. The Warden emphasizes to staff and inmates that they are to speak about PREA issues freely without fear of retaliation. She stressed that if retaliation does occur, there would be prompt action taken against those responsible for the retaliation. They would be investigated and disciplined. These sentiments were echoed by the Staff in Charge of Monitoring Retaliation.

Provision (d)

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, pp. 11, (7), states inmates and/or staff who report sexual abuse will be monitored for retaliation for at least 90 days, with at least three contact status checks to occur within the 90-day monitoring period at the 30-, 60-, and 90-day marks from the date of the allegation

Provision (e)

According to the PAQ, because an allegation of retaliation indicates an allegation that there was a deviation from policy, an incident report is submitted and a Management Information Notification System (MINS) is completed to ensure the allegation is referred to the Office of the Inspector General. Any other remedy that is deemed necessary would also be enacted.

Provision (f)

Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding agency protection against retaliation. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- Florida Administrative Code (FAC), 33-602.220, Administrative Confinement

Interviews with the following:

- Facility Head or Designee - Warden

Provision (a)

The PAQ indicates HCI has not used segregated housing in the past twelve-months for PREA related allegations.

FAC, 33-602.220, Administrative Confinement, (2), (a-b), explains:

1. Administrative confinement is a temporary confinement status that may limit conditions and privileges as provided in subsection (5) as a means of promoting the security, order, and effective management of the institution. Otherwise the treatment of inmates in administrative confinement shall be as near to that of the general population as assignment to administrative confinement shall permit. Any deviations shall be fully documented as set forth in the provisions of this rule.
2. When a decision is made to place an inmate in administrative confinement, the reason for such placement shall be explained to the inmate and the inmate shall be given an opportunity to present verbal comments on the matter. The inmate shall also be allowed to submit a written statement.

FAC, 33-602.220, Administrative Confinement, (3), (c), states inmates shall be placed in administrative confinement pending review of the inmate's request for protection from other inmates, (Rule 33-602.221, F.A.C.). The inmate shall be placed in administrative confinement by a senior correctional officer when the inmate presents a signed written statement alleging that the inmate fears for his safety from other inmates, and that the inmate feels there is no other reasonable alternative open to him. A senior correctional officer shall place an inmate in administrative confinement, pending review for protective management, based on evidence that such a review is necessary, and the senior correctional officer determines that no other reasonable alternative is available. The inmate shall be encouraged to provide information and otherwise cooperate with the investigation of the matter. The protective management process, including the ICT's action, shall be completed within 15 working days from the initial confinement of the inmate.

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 10-11, (2), (a, b), state inmate victims of sexual abuse and/or sexual harassment will not be involuntarily segregated unless an assessment of all other available alternatives has been made and a determination has been made that there is no available alternative means of separation from likely abusers.

1. Upon notification of a PREA incident the inmate victim will be immediately afforded the opportunity to indicate his/her housing preference on the "PREA Victim Housing Preference," DC6-2084. If the inmate indicates that s/he would like to be housed in Administrative Confinement, the inmate is no longer involuntarily segregated and thus may be placed in administrative confinement pursuant to the provisions of "Administrative Confinement", Rule 33-302.220, FAC.
2. If the inmate victim indicates s/he wants to remain in general population and it has been determined that there are no available alternative means of separation from likely abusers the inmate may be placed in administrative confinement pursuant to the provision of "Administrative Confinement," Rule 33.302.220, FAC. The Institutional Classification Team (ICT) will then conduct a 72-hour review of the named PREA victim. The ICT will further review the inmate and the allegation, verify the inmate's housing preference, and reassess the availability of any alternative housing. If the inmate victim remains involuntarily segregated ICT will ensure proper documentation is placed in OBIS related to the basis of the facilities concern for the inmate's safety and why no alternative means of separation can be arranged.

HCI staff reported there are multiple housing options available and therefore a sexual abuse victim is not automatically placed in segregation for his protection. Other alternatives are always explored, and segregation is utilized as a last resort. The Auditor was informed there are numerous areas in the facility to place sexual abuse victims to ensure they are protected from abusers without having to place the victim in segregation housing.

The Warden stated she can transfer the abuser or victim to another FDC facility if need be.

The Warden confirmed inmates are allowed to participate in programs, education, and work while being housed in segregation for protection as a sexual abuse victim, consistent with safety and security needs

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding post allegation protective custody. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021
- FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018
- Florida Statute Title XLVII, Criminal Procedure and Corrections, Chapter 944, State Correctional System

Interviews with the following:

- Inmate who reported sexual abuse
- Investigative Staff
- Facility Head or designee – Warden
- PREA Coordinator (PC)
- Institution PREA Compliance Manager (IPCM)

Provision (a)

The PAQ reflects the FDC has a policy related to criminal and administrative investigations.

Florida Statute Title XLVII, Criminal Procedure and Corrections, Chapter 944, State Correctional System, 944.31 states the inspector general and inspectors shall be responsible for criminal and administrative investigation of matters relating to the Department of Corrections.

During the interview with the investigator, he indicated investigations begin immediately following notification of the incident. He reported the same protocols are used regardless of how the incident is reported, whether it is in person, telephonically, third party, by mail or anonymously.

Provision (b)

As stated in provision (a), the FDC's OIG Inspectors conduct administrative and criminal investigations. The FDC requires OIG Inspectors receive special training to conduct sexual abuse investigations in confinement settings. This required specialized training include:

- Techniques for interviewing sexual abuse victims.
- Appropriate application of Miranda and Garrity warnings.
- Substance abuse evidence collection in confinement settings; and The criteria and evidence required to substantiate a case for prosecution referral.

Investigative staff confirmed he had attended these training sessions. The Auditor reviewed the investigators training records and verified his attendance and participation in all mandated training.

Provision (c)

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 8, (9), (b), states an Inspector investigating a sexual battery or sexual misconduct where physical evidence may be present shall:

1. respond to the scene and immediately contact the OIC.
2. coordinate crime scene access and control with the OIC.
3. if a forensic evidence technician is unavailable, assume responsibility for the proper collection, retention, and maintenance of physical evidence and all accompanying chains of custody.
4. conduct any necessary preliminary interviews of the victim, if applicable, and witnesses, as appropriate (a preliminary interview may be a verbal interview or a written statement) with appropriate follow-up interviews as outlined in OIG Procedures or Directives.
5. in the case of sexual battery, in accordance with Florida law (section 794.052, F.S.), verify the victim obtains medical treatment, if medical treatment is necessary as a result of the alleged incident, a forensic examination, and advocacy

- and crisis intervention services;
6. ensure the incarcerated victim has received the brochure "Sexual Abuse Awareness," Nil- 120, and was advised of her/his right to access crisis intervention services, to have a forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interview if s/he chooses to. If the inmate has not received notification and the brochure, prior to any exam or interview, the Inspector will give the inmate one, advise them appropriately, and document such in the interview.
 7. ensure any staff or non-incarcerated victim is provided the "Sexual Battery" brochure of the legal rights and remedies available to a victim on the standard form developed and distributed by the Florida Council Against Sexual Violence in conjunction with the Department of Law Enforcement and advise that s/he may contact a certified rape crisis center from which the victim may receive services;
 8. during the victim review of the final Investigative Report process ensure the victim, as applicable, is provided with the appropriate "Notice to Incarcerated Victims," DCI-832, (to inmate victim) or the "Victims' Rights Brochure," NII-039 (to non-inmates);
 9. if as a result of the interview with the victim, physical evidence of alleged battery or misconduct may exist on the victim, request a sexual assault examination, and evidence kit be conducted by a SANE or SART. The victim or, if applicable, the person representing the victim, must be informed of the purpose of submitting evidence for testing and the right to request testing in accordance with "Evidence, Property, and Contraband Collection, Preservation, and Disposition," Procedure 108.017;
 10. ensure photos are taken of any physical injuries of the victim (e.g., bruises or cuts).
 11. identify and locate all witnesses to the crime and obtain all necessary biographical and contact information; and
 12. present any affidavit and accompanying warrant through the OIG chain of command prior to the presentation to a Judge, unless exigent circumstances exist which require the immediate processing and execution in order to obtain or preserve critical evidence.

Investigative staff indicated all of his investigations follow practically the same investigative format. Generally speaking, he stated he interviews the victim first, then any witnesses, leaving the perpetrator for last. He stated it varies slightly if it is an alleged Sexual Harassment rather than an alleged Sexual Assault or Sexual Abuse. If it is an alleged Sexual Assault or Sexual Abuse incident, he will go to the rape crisis center or the dedicated SAFE/SANE location at the local hospital where the victim is being seen. Except in the cases where the SAFE/SANE team collects the evidence, the investigator indicated he collects and secures all evidence. He was trained in evidence collection. The Auditor reviewed training records, which confirmed this training.

Provision (d)

During the interview process, the investigator reported when the quality of evidence appears to support a criminal prosecution, the agency shall conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution. The Office of Inspector General confirmed if the case appears to be criminal Miranda warnings are given to the person(s) interviewed. The auditor reviewed nine investigations validating the review process.

Provision (e)

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 12, (15) clarifies that in all instances of investigating sexual battery, sexual misconduct, sexual abuse or sexual harassment, the case Inspector shall not make a request of the victim to submit to a voice stress analysis or polygraph examination.

The investigative staff reported credibility of anyone involved in the investigation is determined through the investigative process. He stated everyone is treated as credible and truthful unless the investigation proves otherwise. He confirmed a polygraph is not used in the investigative process of PREA cases.

Provision (f)

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 12, (12), (a), states during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.

During the interview, the investigative staff reported in administrative investigations he follows the evidence as the investigation unfolds. In following the evidence, he attempts to determine if staff actions or failure to act contributed to the allegation. He summarizes all findings in his report.

Provision (g)

When asked about handling criminal investigation, the investigative staff reported he thoroughly documented all steps of the process, including investigative steps, interviews, facts, and findings, up until the point he determines it is criminal in nature.

When he determines that the incident rises to the level of criminal prosecution, he will provide an affidavit to the Prosecutor who will determine if charges will be filed

According to the PAQ, in the past twelve months there have been zero substantiated allegations of conduct that appear to be criminal that were referred for prosecution.

Provision (h)

Per the PAQ, in the past twelve months there have not been any criminal cases referred for prosecution.

During the interview, the investigator said if the investigation uncovers evidence that a crime has been committed, he will provide an affidavit to the Prosecutor who will determine if charges will be filed. The full documentation of investigation by the OIG is kept within their office. The institution keeps a file with documentation that corresponds with actions within the facility, i.e.: Responder Check-off (Supervisory, Medical, Mental Health), 30-day reviews, sign-off form for offenders housing choice, etc.

Provision (i)

Florida Department of Corrections (FDC), Procedure 602.053 Prison Rape: Prevention, Detection, and Response effective date September 7, 2021, p. 16, (11) states case or investigation records, including but not limited to, any criminal investigation, administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years after the date of the initial collection or for the incarceration period of the victim or employment of the suspect or subject, plus five years, whichever is longer.

Compliance Managers are responsible for uploading all related documents to the facility's electronic retention file once a PREA case is completed.

Provision (j)

During the interview, the investigator confirmed that if a principle (victim or abuser) is released or terminated from the agency, it in no way alters the investigation. The investigation continues to its natural end regardless of the employment or residence of the individuals involved.

Provision (k)

Auditor is not required to audit this provision.

Provision (l)

During the interview, the investigator confirmed in the facilities cooperate with the Office of Inspector General (OIG) and the OIG endeavors to keep the facility informed of the progress of the investigation.

Conclusions:

Based upon the review and analysis of all available evidence, the Auditor has determined the HCI meets every provision of the standard regarding criminal and administrative agency investigations. No recommendation or corrective action.

115.72	Evidentiary standard for administrative investigations
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Materials Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided. • FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018 • FDC, Office of Inspector General, Directive Number 2.005, Investigations – Other, Effective date March 11, 2020 <p>Interview with the following:</p> <ul style="list-style-type: none"> • Investigative Staff <p>Provision (a)</p> <p>FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 12, (12), (a-c) states:</p> <ol style="list-style-type: none"> 1. during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures. 2. Any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a parallel administrative investigation. 3. Any parallel administrative investigation shall be tolled during the criminal investigation. <p>FDC, Office of Inspector General, Directive Number 2.005, Investigations – Other. Effective date March 11, 2020, p. 18, (3) and (7), reflect that:</p> <ol style="list-style-type: none"> 1. Referring a PREA allegation to management (RM) should be the exception to the rule. If a PREA event is to be referred to management (RM), the Inspector Supervisor shall include sufficient detail, in the body of the MINS, to explain to management or any future reader of the MINS as to why this event is not going to be investigated by the OIG. 2. A complaint review report shall only be used when the PREA event is determined to be unfounded or not sustained or to be investigated by another law enforcement agency or in another OIG case. The other case number should be included in report. <p>FDC, Office of Inspector General, Directive Number 2.005, Investigations – Other. Effective date March 11, 2020, p. 19, (9) states that for each PREA investigation that is placed in an "suspended" disposition status, the Inspector Supervisor shall submit to the warden a memo advising that investigative efforts have yielded insufficient evidence to clear the case and the case remains unsolved and has been placed in an open inactive status. The last paragraph of the Investigative Activity Report relating to the PREA investigation shall summarize the facts supporting the open-inactive closure.</p> <p>The Auditor interviewed investigative staff who relayed that during an investigation, all available evidence is collected (from the victim, from the perpetrator, from the scene; interviews; etc.). Further the FDC imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Conclusion:</p> <p>Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding evidentiary standard for administrative investigations. No recommendations or corrective action.</p>

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018
- FDC, Prison Rape Elimination Act Guide, Revised October 2019

Interview with the following:

- Facility Head or designee - Warden
- Investigative Staff

Provision (a)

According to the PAQ, HCI had nine criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past twelve months. The nine cases involved six inmate victims, as some inmates made more than one allegation.

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 10, (i), states at the conclusion of any sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism investigation, the Inspector shall make appropriate notifications and follow-up notifications in accordance with section (11) of this procedure.

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 11, (11), (a) states victims of any sexual battery shall be permitted to review the final report and provide a statement as to the accuracy prior to it being finalized pursuant to section 794.052, F.S.

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 11, (11), (c), states the case Inspector shall notice any PREA victim inmate if an allegation against a staff member for sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism (administrative or criminal) is exonerated, sustained, partially sustained, not sustained, unfounded, closed by arrest, exceptionally cleared, or placed in open-inactive status.

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 12, (d), (1,2), the case Inspector, Inspector Supervisor or designee shall notice any victim inmate the following pertaining to any PREA allegation:

1. when the Department learns the alleged abuser has been indicted on a charge related to sexual abuse; or
2. when the Department learns that the alleged abuser was convicted on a charge related to sexual abuse.

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 15, (10), (a), states when an allegation is returned to management (RM) from the Office of the Inspector General, the institution will be responsible for conducting a PREA administrative security investigation utilizing a "PREA Investigative Report," DC6-2079. Upon completion of this investigation, the facility will also be responsible for notifying the inmate(s) regarding the outcome of the investigation via an "Inmate Notification Administration Investigation Outcome," DC6-2080. Once completed, the DC6-2079 will be forwarded to the PREA Coordinator.

FDC, Prison Rape Elimination Act Guide, Revised October 2019, p. 26, states following an investigation an inmate will be informed of the outcome of the investigation. Allegations that are returned to management, to include OIG-RM, the facility will be responsible for notifying the inmate of the outcome of the administrative investigation. This will be done via DC6-2080.

FDC, Prison Rape Elimination Act Guide, Revised October 2019, p. 26, goes on to say facility administration is responsible for notifying the inmate whether a staff member is no longer posted in the inmate's unit or whether the staff member is no longer employed at the facility via DC6-208 I. These notifications are only made if the staff member is not in the unit or no longer employed due to the PREA allegation and if the allegation was sustained or not sustained/unsubstantiated.

Finally, FDC, Prison Rape Elimination Act Guide, Revised October 2019, p. 26, mandates the inmate will also be notified in writing when the facility becomes aware that the inmate's alleged abuser (Staff or Inmate) has been indicted on charges of

sexual abuse stemming from the PREA allegation and when the staff member is convicted on the charges related to the PREA allegation.

In interviewing the investigative staff, the Auditor was instructed the final step of the investigation process, takes place after all findings have been determined. At the conclusion of any PREA investigation the OIG investigator, to the Warden's office, a close out memorandum of the investigation and details of how the decision was made regarding the outcome. The facility is then responsible for notifying the inmate of the outcome of the administrative investigation

Provision (b)

According to the PAQ, HCI does not utilize outside entities to conduct investigations, making this provision not applicable.

Provision (c)

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 16, (b), states unless the allegation is unfounded, following an inmate's allegation that a staff member has committed sexual abuse against her/him, the Warden or her/his designee shall inform the inmate via an "Inmate Notification PREA Staff Allegation," DC6-2081, whenever the staff member is no longer:

1. assigned to the facility; or
2. employed with the Department.

As previously stated in provision (a), upon completion of this investigation, the facility will also be responsible for notifying the inmate(s) regarding the outcome of the investigation via DC6- 2080.

There were seven staff-on-inmate allegations and two inmate-on-inmate allegations. Of the staff-on-inmate allegations, six were open and ongoing and one was closed and unsubstantiated. Of the inmate-on-inmate allegations, both were closed and deemed unsubstantiated after investigation. On all closed investigation, the inmate as notified of the finding as required by the standard.

Provision (d)

FDC, Procedure 108.015, Sexual Battery, Sexual Harassment and Sexual Misconduct Investigations, effective February 22, 2018, p. 12, (d), (1,2), the case Inspector, Inspector Supervisor or designee shall notify any victim inmate the following pertaining to any PREA allegation:

1. when the Department learns the alleged abuser has been indicted on a charge related to sexual abuse; or
2. when the Department learns that the alleged abuser was convicted on a charge related to sexual abuse.

As previously stated in provision (a), upon completion of this investigation, the facility will also be responsible for notifying the inmate(s) regarding the outcome of the investigation via DC6- 2080.

Provision (e)

As previously stated in provision (a), upon completion of this investigation, the facility will be responsible for notifying the inmate(s) regarding the outcome of the investigation via DC6- 2080. Additionally, as reflected in provision (a) HCI had nine criminal and/or administrative investigations of alleged inmate sexual abuse during the previous twelve months. There were seven staff-on-inmate allegations and two inmate-on-inmate allegations. Of the staff-on-inmate allegations, six were open and ongoing and one was closed and unsubstantiated. Of the inmate-on-inmate allegations, both were closed and deemed unsubstantiated after investigation. On all closed investigation, the inmate was notified of the finding as required by the standard.

Provision (f)

The Auditor is not required to audit this provision.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding reporting to inmates. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- FDC, Procedure 208.039 Employee Counseling and Discipline effective date September 12, 2019
- Florida Statute, Title XLVII Criminal Procedures and Corrections, Chapter 944, 944.35 Florida Administrative Code (FAC), 33-208.003, Range of Disciplinary Actions

Interviews with the following

- Facility Head or designee - Warden
- Institution PREA Compliance Manager (IPCM)

Provision (a)

FDC Procedure 208.039 specifically lists the following:

1. Employee discipline standards.
2. Roles and responsibilities.
3. Employee counseling.
4. Types of disciplinary action.
5. Procedures for issuing discipline to permanent status career service employees.
6. Procedures for issuing disciplinary action to SES or promotion probationary status.
7. Procedures for suspension or dismissal of an OPS, or probationary status employee. This Procedure supplements the above Florida Statutes, Florida Administrative Code, and the State Personnel Rules.

Provision (b)

FDC, Procedure 208.039 Employee Counseling and Discipline effective date September 12, 2019, p. 5, (6), (a, b) states malicious Use of Profane or Abusive Language Toward Inmates, Visitors, or Persons Under Supervision: The use of language that is threatening or abusive, whether directed towards a supervisor, another employee, an inmate or offender, or any other person. Includes any offensive language whether or not directed toward anyone in particular, regardless of intent.

1. First occurrence: written reprimand, suspension, demotion, or dismissal.
2. Second occurrence: dismissal

During the interview with the Warden, she confirmed in the previous twelve months there had not been any terminations, resignations, or other sanctions against staff for violation of the agency's sexual abuse or sexual harassment or sexual misconduct policies.

Provision (c)

Florida Administrative Code (FAC), 33-208.003, Range of Disciplinary Actions, states violations of the foregoing Rules of Conduct as well as other departmental and institutional policies will result in disciplinary actions, which may be by written reprimand, suspension, demotion, or dismissal.

Florida Administrative Code (FAC), 33-208.003, Range of Disciplinary Actions, further states any employee who feels that unjust disciplinary action has been given has the right to submit a grievance as established by the grievance procedures of the Department of Corrections. For disciplinary actions involving, suspension, demotion, or dismissal, permanent Career Service employees have the right to appeal to the Public Employees Relations Commission. Violation of more than one rule shall be considered in the application of discipline and may result in greater discipline than specified for one offense alone. Any questions regarding these rules and personnel procedures should be referred to the employee's circuit administrator, warden, or personnel officer.

Florida Administrative Code (FAC), 33-208.003, Range of Disciplinary Actions, states the preceding section titled Rules of Conduct and the following list of offenses and work deficiencies with their ranges of disciplinary actions will be used by this Department in administering an effective disciplinary program.

According to Florida Administrative Code (FAC), 33-208.003, Range of Disciplinary Actions, the severity of penalties may

vary depending upon the frequency and nature of a particular offense and the circumstances surrounding each case. While the following guidelines are not a substitute for impartial supervision and effective management, and do not set absolute minimum and maximum penalties, it is expected that all Disciplinary Authorities will consider them, the seriousness of the offense, and an employee's entire work history in reaching disciplinary decisions.

Suspensions shall not exceed eighty work hours.

During an interview with the PCM she confirmed during the previous twelve (12) months there had not been any terminations, resignations, or other sanctions against staff for violation of the agency's sexual abuse or sexual harassment or sexual misconduct policies.

Provision (d)

Florida Statute, Title XLVII Criminal Procedures and Corrections, Chapter 944, 944.35, states 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, shall be reported to law enforcement agencies unless the activity was not criminal, and to any relevant licensing bodies.

During an interview with the Warden she confirmed during the previous twelve months there had not been any terminations, resignations, or other sanctions against staff for violation of the agency's sexual abuse or sexual harassment or sexual misconduct policies.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined HCI meets every provision of the standard regarding disciplinary sanctions for staff. No recommendations or corrective action.

115.77	Corrective action for contractors and volunteers
	<p data-bbox="242 145 742 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 443 300">Materials Reviewed</p> <ul data-bbox="284 349 1444 448" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Florida Department of Corrections (FDC), Procedure 205.002, Contract Management, effective February 18, 2020 • FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021 <p data-bbox="242 472 513 501">Interview with the following</p> <ul data-bbox="284 551 667 580" style="list-style-type: none"> • Facility head or designee – Warden <p data-bbox="242 607 371 636">Provision (a)</p> <p data-bbox="242 663 1460 725">The PAQ indicates there have been no reports of sexual abuse by contractors or volunteers at HCI, during the past twelve months.</p> <p data-bbox="242 752 1492 918">FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 15, (9), (e), states contractors or volunteers who engage in sexual abuse, sexual battery, or sexual harassment and have been found guilty will be disciplined up to and including termination of contract and/or prohibition from working or volunteering for the Department. Additionally, any contractor or volunteer who engages in sexual abuse and sexual battery will be reported to law enforcement, unless it was clearly not criminal, and to any relevant licensing bodies.</p> <p data-bbox="242 945 371 974">Provision (b)</p> <p data-bbox="242 1001 1481 1167">Florida Department of Corrections (FDC), Procedure 205.002, Contract Management, effective February 18, 2020, states all new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include the following language to ensure compliance with 28 C.F.R. Part 115, "The contractor/vendor(s) will comply with the national standards to prevent, detect, and respond to prison rape under the Prison Rape Elimination Act (PREA), Federal Rule 28 C.F.R. Part 115. The contractor/vendor(s) will also comply with all Department policies and procedures that relate to PREA."</p> <p data-bbox="242 1193 1460 1256">FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 4, (4), (b) explains that staff, contractors, and volunteers are held to the same behavioral standard with regard to PREA.</p> <p data-bbox="242 1283 1497 1449">The facility takes appropriate remedial measures and considers whether to prohibit further contact with inmates in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. There have been no cases of violations involving the agency's sexual abuse or sexual harassment policies by a contractor or volunteer. During the past 12 months there have been no reports of sexual abuse by contractors or volunteers at HCI, and thus no instances of requiring remedial measures.</p> <p data-bbox="242 1476 1492 1574">During an interview with the Warden, she disclosed that when an issue is brought to her attention, she immediately refers the matter to the OIG for their follow-up. During this time, the contractor or volunteer are not allowed access to the facility pending investigation and review of the matter.</p> <p data-bbox="242 1601 363 1630">Conclusion:</p> <p data-bbox="242 1657 1481 1720">Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding corrective action for contractors and volunteers. No recommendations or corrective action.</p>

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Materials Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021 • Florida Administrative Code (FAC), 33-601.800, Close Management • FAC, 33-601.314, Rules of Prohibited Conduct and Penalties for Infractions FAC, 33-601.301, Inmate Discipline – General Policy • FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18 <p>Interview with the following</p> <ul style="list-style-type: none"> • Facility Head or designee – Warden • Medical Staff <p>Provision (a)</p> <p>The PAQ reflects in the past twelve months there has been zero administrative finding of inmate-on-inmate sexual abuse at the facility. The PAQ also reflects in the past twelve months there has been zero criminal finding of inmate-on-inmate sexual abuse at the facility</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 15, (9), (a, b, c) states:</p> <ol style="list-style-type: none"> 1. Inmate(s) who have been found guilty of sexual abuse, sexual battery, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with “Disciplinary Confinement,” Rule 33--602.222, F.A.C., unless otherwise ordered through judicial or administrative process. 2. All inmates who have been found guilty (with a finding of sustained, exceptionally cleared, or closed by arrest) of sexual abuse or sexual battery will be referred for Close Management (CM) review, in accordance with “Close Management,” 33-601.800, F.A.C. and/or issued a Disciplinary Report (DR), in accordance with applicable inmate disciplinary rules 33-601.301, F.A.C, through 33-601.314, F.A.C. All CM and DR reviews will take into consideration whether the mental disabilities or mental illness contributed to the abuser or perpetrator’s behavior. 3. When it is determined that an inmate has filed a PREA report in bad faith, i.e., knowingly filed a false report, that inmate shall be subject to discipline. <p>Provision (b)</p> <p>FAC, 33-601.314, Rules of Prohibited Conduct and Penalties for Infractions, states the following are established maximum penalties for the indicated offense. DC means maximum number of days of disciplinary confinement that may be imposed, and GT means the maximum number of days of gain time that may be taken. Any portion of either penalty, up to the maximum, may be applied.</p> <ul style="list-style-type: none"> • 1-5 Sexual battery or attempted sexual battery 60 DC + All GT • 1-6 Lewd or lascivious exhibition by intentionally masturbating, intentionally exposing genitals in a lewd or lascivious manner, or intentionally committing any other sexual act in the presence of a staff member, contracted staff member or visitor. 60 DC + 90 GT • 9-1 Obscene or profane act, gesture, or statement - oral, written, or signified 30 DC + 90 GT • 9-7 Sex acts or unauthorized physical contact involving inmates 30 EDC + 90 GT • 9-35 Establishing or attempts to establish a personal or business relationship with any staff or volunteer 60 DC + 180 GT <p>During the interview with the Warden disciplinary sanctions were discussed. The Warden indicated that the inmate discipline is based on level of the violation and penalties are imposed comparable to other inmate’s penalties. Penalties might include change of housing assignment, loss of good time credit, and possible prosecution, when appropriate.</p> <p>Provision (c)</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 15, (9), (b), states all close management (CM) and Disciplinary Report (DR) reviews will take into consideration whether the mental</p>

disabilities or mental illness contributed to the abuser or perpetrator's behavior.

During the interview with the Warden disciplinary sanctions were discussed. The Warden indicated if the inmate has a mental history, mental health staff will be involved to assist in determining appropriate sanctions.

Provision (d)

The PAQ indicates HCI does offer therapeutic services and interventions to inmates.

Florida Administrative Code (FAC), 33-601.800, Close Management, 1, (d) defines close management as the confinement of an inmate apart from the general population, for reasons of security or the order and effective management of the institution, where the inmate, through his or her behavior, has demonstrated an inability to live in the general population without abusing the rights and privileges of others.

Florida Administrative Code (FAC), 33-601.800, Close Management, 1, (e) establishes there are 3 levels of close management. The three individual levels (CMI, CMII, and CMIII) associated with close management, with CMI being the most restrictive single cell housing level and CMIII being the least restrictive housing of the three CM levels. Close Management I is the most restrictive single cell housing level of all the close management status designations. An inmate assigned to CMI will be ineligible for a work assignment. An inmate may be placed in CMI without having previously been in CMII or III. An inmate could be placed in CMI for an incident that causes a death or participation in a sexual assault or battery among other things.

During interviews with medical staff, the Auditor was informed that medical staff can make recommendations for referrals for inmates for therapy, counseling, or other interventions to address underlying issues related to abuse. The inmate's issues would be addressed during regular counseling sessions or group counseling sessions. Participation in interventions is not a condition for access to other programming or benefits.

Provision (e)

The PAQ reflects HCI only disciplines inmates for sexual contact with staff when it is determined the staff member did not consent.

FAC, 33-601.301, Inmate Discipline – General Policy, (1) states inmate behavior that is not in compliance with the department shall be corrected through the disciplinary process, which includes informal disciplinary interventions.

Provision (f)

The PAQ reflects HCI prohibits disciplinary action for a report of sexual abuse made in good faith.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 15, (9), (c), distinguishes that when it is determined that an inmate has filed a PREA report in bad faith, i.e., knowingly filed a false report, that inmate shall be subject to discipline. Inmates who make a report in good faith will not be disciplined regardless of the outcome of the investigation.

During an interview with Warden, the Auditor was informed in the past twelve months there had not been any disciplinary action taken against any inmate(s) for a report of sexual abuse made in good faith.

Provision (g)

The PAQ indicates HCI prohibits all sexual activity between inmates. Further, it states HCI only considers sexual activity between inmates to be sexual abuse if it is coerced.

FDC, NI1-091, Inmate Orientation Handbook, Revised 11/9/18, p. 19 states there is no such thing as legal consensual sex in prison. FDC policy and law prohibit sexual behavior between inmates.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding disciplinary sanctions for inmates. No recommendations or corrective action.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Materials Reviewed</p> <ul style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021 <p>Interview with the following</p> <ul style="list-style-type: none"> • Medical Staff <p>Provision (a)</p> <p>The PAQ reflects in the past twelve months, 100% of inmates who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health professional.</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 7, (10), states classification will screen all inmates within 72 hours of intake. Characteristics such as the inmate's age, criminal record, and prior identified history of sexual victimization or predation will be utilized to help determine if s/he is at risk of future victimization of sexual abuse, sexual battery, or is at risk of committing sexual abuse or sexual battery. If s/he is identified as a potential victim or abuser (perpetrator); housing, bed, and work assignments will be appropriately assigned based on known information and established protocol.</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 13, (6) states if results of an SRI assessment or medical assessment indicate that an inmate has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate shall be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p>The Auditor interviewed staff who conduct the intake screenings. These staff confirmed inmates are offered a follow-up meeting with a mental health professional, within 14-days of intake, if the intake screening indicates the inmate is at high risk for possible victimization, aggressiveness or has a past history of victimization.</p> <p>During the documentation review, the Auditor discovered all mental health referrals, as a result of disclosure during intake, were timely made. All referrals were evaluated within the appropriate time frame.</p> <p>Provision (b)</p> <p>The PAQ reflects in the past 12 months, HCI did not have any reports of previous perpetrator behavior during this audit period.</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 7, (10), states classification will screen all inmates within 72 hours of intake. Characteristics such as the inmate's age, criminal record, and prior identified history of sexual victimization or predation will be utilized to help determine if s/he is at risk of future victimization of sexual abuse, sexual battery, or is at risk of committing sexual abuse or sexual battery. If s/he is identified as a potential victim or abuser (perpetrator); housing, bed, and work assignments will be appropriately assigned based on known information and established protocol.</p> <p>FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 13, (6) states if results of an SRI assessment or medical assessment indicate that an inmate has experienced prior sexual victimization or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate shall be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.</p> <p>Provision (c)</p> <p>HCI is not a jail.</p> <p>Provision (d)</p> <p>The PAQ indicates HCI strictly limits information obtained in intake screening relating to sexual abuse to those who need to make management, security, or treatment plan decisions.</p>

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 13, (6), (a), states the provision of any information relating to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, state, or local law.

The Auditor interviewed staff who conduct intake screenings and was informed that all medical and mental health records are contained in a separate and secure database. This database is accessed only through medical or mental health staff, and information is only provided to classification and high-level staff on a need-to-know basis.

Provision (e)

The PAQ indicates HCI medical and mental health professionals obtain informed consent prior to reporting information about prior sexual victimization that did not occur in an institutional setting unless the inmate is under the age of 18.

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (b), states if during a screening or services, medical and mental health practitioners gain knowledge of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment that did not occur in an institutional setting they shall obtain informed consent from the inmate before reporting the information, unless the inmate is under the age of 18. This informed consent shall be documented as received on a DC6-210.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding medical and mental health screenings, history of sexual abuse. No recommendations or corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021
- FDC, Procedure 401.010, Co-Payment Requirements for Inmate Medical Encounter, effective October 5, 2020
- FDC, DC4-701C, Emergency Room Records, effective 12/12
- FDC, DC4-683M, Office of Health Services, Alleged Sexual Battery Protocol, revised 3/7/17
- Contract #A3816 between FDC and Dawn Center, dated January 20, 2022

Interview with the following

- Medical Staff
- SART Staff

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (c), alleged inmate victims of sexual abuse, sexual battery, or staff sexual misconduct shall receive timely, unimpeded access to emergency treatment and crisis intervention services, the nature and scope of which will be determined by medical and mental health practitioners according to their professional judgment.

Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022, for the purpose of facilitating services related to implementation of the Prison Rape Elimination Act (PREA). Dawn Center is a community service provider who is being contracted to provide confidential emotional support services related to sexual abuse to inmates in HCI.

FDC, DC4-701C, Emergency Room Records, effective 12/12 and FDC, DC4-683M, Office of Health Services, Alleged Sexual Battery Protocol, Revised 3/7/17 are two secondary materials documenting the timeliness of emergency medical treatment and crisis intervention services that were provided.

Medical and mental health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

The Auditor review records of inmates who alleged sexual abuse and in each case the inmate was referred to medical and mental health well within the appropriate time frame.

Provision (b)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (d), specifies if no qualified medical or mental health practitioners are on duty at the time a recent abuse allegation is made, security staff first responders shall take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners.

Through the interview process, medical staff reported that upon arriving at medical after a report of sexual assault, an inmate will get a cursory examination by the physician to provide feedback for use of SART or if the inmate should be immediately transported to a hospital due to the nature of his injuries. If the SART is utilized, before leaving the facility, the nurse will provide 'recommendations' for treatment and care. The facility physician will complete the orders. As part of the process, the inmate receives information about sexually transmitted infection prophylaxis and other necessary care information.

Provision (c)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (e), states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate. Additionally, the victim will be offered support services by means of a mailing address and/or telephone numbers to local community support group organizations, where available.

As previously cited in Provision (b) medical and mental health staff interviewed by the Auditor, reported treatment is provided immediately and is based on their professional judgment.

Medical and mental health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Provision (d)

FDC, Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (f), states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

FDC, Procedure 401.010, Co-Payment Requirements for Inmate Medical Encounter, effective October 5, 2020, p. 3, (d), (10) states a waiver of co-payment may be granted if the health care visit is a Prison Rape Elimination Act (PREA) incident involving sexual abuse or sexual battery.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding access to emergency medical and mental health services. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided.
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021
- Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022

Interview with the following

- Medical and Mental Health Staff
- Institution PREA Compliance Manager (IPCM)

Provision (a)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (f), (1) proclaims as appropriate, medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and, when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.

The Auditor reviewed a copy of Agreement #A3816 between FDC and Dawn Center, dated January 20, 2022. This agreement is for the purpose of facilitating services related to implementation of Prison Rape Elimination Act (PREA). Dawn Center is a community service provider who is being contracted to provide confidential emotional support services related to sexual abuse to inmates within the HCI facility.

The Auditor reviewed records produced by the facility documenting the community standard of care, the evidence of Sexually Transmitted Infection testing, prophylaxis treatment, psychiatry and psychology services, crisis intervention. These services are free of charge to inmates regardless of whether the abuser is named or whether the inmate cooperates with an investigation.

Medical and mental health staff interviewed by the Auditor reported treatment is provided immediately and is based on their professional judgment. Medical and Mental Health staff work together to ensure the inmate received the appropriate treatment. Information about and access to emergency contraception and sexually transmitted diseases prophylaxis, is offered in accordance with professionally accepted standards of care and where medically appropriate.

Provision (b)

As stated in provision (a) the evaluation and treatment of such victims shall include as appropriate, follow-up services, and, when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody

Documentation and records review supported attentiveness to follow-up services and treatment plans. The files demonstrated detailed and professional notes on the evaluations conducted by medical and mental health staff and their follow up appointments with inmates. Follow-up consisted of routine inmate visits with medical and mental health staff.

Provision (c)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (f), (1) proclaims as appropriate, medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care.

Interviews with medical and mental health staff support compliance in the area of evaluation, follow-up, treatment plans and referral services. The statement of medical and mental health staff reflects an active understanding of the importance of appropriate evaluation, follow up, treatment planning and service referral.

Provision (d)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective

date September 7, 2021, p 14, (f), (2) states inmate victims of vaginal penetration during the inmate's incarceration shall be offered pregnancy tests and, if pregnancy results, such victim will receive timely and comprehensive information about, and timely access to, all pregnancy-related medical services.

HCI is an all-male facility.

Suncoast is an all-female facility. Suncoast staff confirmed the items listed in Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p 14, (f), (2), are readily available to the population of Suncoast.

Provision (e)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p 14, (f), (2) states inmate victims of vaginal penetration during the inmate's incarceration shall be offered pregnancy tests and, if pregnancy results, such victim will receive timely and comprehensive information about, and timely access to, all pregnancy-related medical services.

HCI is an all-male facility.

Suncoast is an all-female facility. Suncoast staff confirmed the items listed in Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p 14, (f), (2), are readily available to the population of Suncoast.

Provision (f)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (e), states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate.

Provision (g)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (f), states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

During the interview process, the IPCM confirmed all treatment services are provided to alleged victims without financial cost, regardless of whether the victim names the abuser or cooperated with any investigation arising out of the incident.

Provision (h)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (f), (3), states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding ongoing medical and mental health care for sexual abuse victims. No recommendations or corrective action

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021,
- FDC, Prison Rape Elimination Act Guide, revised October 2019

Interviews with the following

- Facility Head or designee - Warden
- Institutional PREA Compliance Manager (IPCM)
- Incident Review Team (IRT)

Provision (a)

The PAQ reflects in the past 12-months there have been six criminal and/or administrative investigations of alleged sexual abuse completed at the facility.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 16, (13), (a- e), states the institution shall conduct a sexual abuse incident review within 30 days of the conclusion of the investigation by completing the "Sexual Abuse Incident Review/Facility Investigation Summary," DC6-2076.

Provision (b)

The PAQ reflects in the past 12-months there have been zero criminal and/or administrative abuse incident reviews completed at the facility.

FDC, Prison Rape Elimination Act Guide, revised October 2019, p. 28, states after every sexual abuse investigation, except those that are determined to be UNFOUNDED, a review team consisting of upper-level management (with input from line supervisors, investigators, and medical and mental health care staff) shall conduct a sexual abuse incident review (SA1R) via DC6-2076. The review should take place within 30 days of the conclusion of the investigation.

Provision (c)

FDC, Prison Rape Elimination Act Guide, revised October 2019, p. 28, states after every sexual abuse investigation, except those that are determined to be UNFOUNDED, a review team consisting of upper-level management (with input from line supervisors, investigators, and medical and mental health care staff) shall conduct a sexual abuse incident review (SA1R) via DC6-2076

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p16, (13) states the review team consists of the Warden or Assistant Warden, Chief of Security, and Classification Supervisor. The team will also obtain input via reports from line supervisors, investigators, and medical or mental

In the interview with the Warden, she confirmed her understanding of the composition of the review team and her willingness to consider and incorporated recommendations from team members.

Provision (d)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 16, (13) states the Sexual abuse incident review team shall meet to, at a minimum:

- (a) assess the adequacy of staffing levels in the area where the incident happened.
- (b) consider whether the incident/allegation was motivated by race, ethnicity, LGBTI identification, gang affiliation, or other group dynamics at the institution.
- (c) examine the area that the incident allegedly occurred to assess whether physical barriers or obstructions in the area may have enabled abuse.

- (d) assess whether monitoring technology should be deployed or augmented to supplement supervision by staff; and
- (e) monthly, prepare a report with recommendations for improvements, and submit to the PREA Coordinator.

Members of the Sexual Abuse Incident Review Team were interviewed. Each team member reported the team considers all criteria listed above, as required by PREA policy.

The report from the Sexual Abuse Incident Review team is submitted to the Warden and the PCM.

Provision (e)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 16, (e), states monthly, the Sexual Abuse Incident Review Team is to prepare a report with recommendations for improvements and submit to the PREA Coordinator.

Approval for any improvements must receive approval from the FDC.

Conclusion

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding sexual abuse incident reviews. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021
- Annual PREA Report

Interview with the following

- PREA Coordinator (PC)

Provision (a)

According to the PAQ, the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2. The data will also be utilized to Procedure 602.053 15 improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution.

A review of an annual PREA reports, confirms this provision has been met.

Provision (b)

According to the PAQ the agency aggregates the incident-based sexual abuse data at least annually.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2. The data will also be utilized to Procedure 602.053 15 improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution

The FDC aggregates all its data submitting all required items according to the US Department of Justice. A review of annual PREA reports, confirms this provision has been met.

Provision (c)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2. The data will also be utilized to Procedure 602.053 15 improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution

PREA policy dictates 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. A review of annual PREA reports, confirms this provision has been met.

Provision (d)

According to the PAQ, the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states 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.

Provision (e)

According to the PAQ, the agency obtains incident-based and aggregate data from every private facility with which it contracts for the confinement of its inmates. The data from private facilities complies with the SSV reporting requirement.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states the agency also shall obtain incident- based and aggregated data from every private facility with which it contracts. for the confinement of inmates.

A review of an annual PREA report, confirms this provision has been met.

Provision (f)

According to the PAQ, upon request the agency shall provide all such data from the previous calendar year to the Department of Justice no later than June 30, from the previous calendar year.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective date September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2. The data will also be utilized to Procedure 602.053 15 improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution

The FDC aggregates all its data submitting all required items according to the US Department of Justice SSV-02 (Survey of Sexual Victimization) and submits all information on June 30 from the previous calendar year to the US Department of Justice.

A review of an annual PREA report, confirms this provision has been met.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding data collection. No recommendations or corrective action.

Auditor Overall Determination: Meets Standard

Auditor Discussion

Materials Reviewed

- Pre-Audit Questionnaire (PAQ) and supporting documentation provided
- Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021
- Annual PREA Reports
- 2021 Finalized Corrective Action Plan

Interview with the following

- Agency Head or Designee – (AH)
- PREA Coordinator (PC)
- Institutional PREA Compliance Manager (IPCM)

Provision (a)

According to the PAQ, the agency reviews 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.

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a “Survey of Sexual Victimization-Incident Form,” SSV-IA and “Survey of Sexual Victimization-State Prison Systems Summary Form,” SSV-2.

The data will also be utilized to improve the effectiveness of the Department’s efforts toward sexual abuse prevention, detection, and response policies, practices and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year’s data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution.

As part of the interview with the PC, the Auditor learned the agency reviews data collected pursuant to §115.87 and assesses the effectiveness of the sexual abuse prevention, detection and response policies, practices, and training. The agency prepares an annual report and posts the information on the website. The Auditor also learned the annual report is written in a way that it is unnecessary to redact information. However, the agency does have the ability to make such changes.

The AH asserts if the incident-based sexual abuse data shows patterns, such as LGBTI inmates are being targeted or a significant number of assaults occurring in a particular area of an institution, then policies, procedures or training may be modified.

Provision (b)

Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 14, (7), states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a “Survey of Sexual Victimization-Incident Form,” SSV-IA and “Survey of Sexual Victimization-State Prison Systems Summary Form,” SSV-2.

The data will also be utilized to improve the effectiveness of the Department’s efforts toward sexual abuse prevention, detection, and response policies, practices and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year’s data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution.

The Auditor reviewed the most recent annual report and corrective action plan and found them to follow the PREA standards, including a comparison to the findings in previous reports to assess progress in addressing sexual abuse.

Provision (c)

This provision is addressed in provision (a) and (b).

According to the interview notes from the AH, he reviews all PREA Annual Reports. He reviews the annual report for the prior calendar year before placement on the agency website.

As required by standard, the FDC places all annual reports on its website, accessible for public view.

<http://www.dc.state.fl.us/PREA> allows access to the FDC PREA webpage, which contains the most recent annual report.

Provision (d)

According to the PAQ, the annual report is written in a way that it is unnecessary to redact information. However, the agency does have the ability to make such changes.

The PC indicated the agency reviews data collected pursuant to §115.87. The annual report is written in a way that it is unnecessary to redact information. However, the agency does have the ability to make such changes.

The PC indicated she is responsible for ensuring the information is provided for purposes of agency reporting.

During an interview with the IPCM, he indicated he ensures the data collected on sexual abuse for inmate-on-inmate cases is forwarded to her PREA Coordinator annually.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding data review for corrective action. No recommendations or corrective action

115.89	Data storage, publication, and destruction
	<p data-bbox="240 145 740 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="240 208 451 237">Auditor Discussion</p> <p data-bbox="240 271 443 300">Materials Reviewed</p> <ul data-bbox="284 349 1449 510" style="list-style-type: none"> • Pre-Audit Questionnaire (PAQ) and supporting documentation provided • Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021 • Annual PREA Reports for previous years • FDC publicly accessible website http://www.dc.state.fl.us/PREA <p data-bbox="240 539 520 568">Interview with the following:</p> <ul data-bbox="284 618 496 647" style="list-style-type: none"> • PREA Coordinator <p data-bbox="240 676 371 705">Provision (a)</p> <p data-bbox="240 734 1477 927">Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 16, (11), states case or investigation records, including but not limited to, any criminal investigation, administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years after the date of the initial collection or for the incarceration period of the victim or employment of the suspect or subject, plus five years, whichever is longer.</p> <p data-bbox="240 956 1442 1016">Compliance Managers are responsible for uploading all related documents to the facility's electronic retention file once a PREA case is completed.</p> <p data-bbox="240 1046 1485 1173">Through the interview process with the PC, the Auditor learned there are several locations where the FDC retains data. At the local level, data is retained within a secure system and access to the system is limited to those staff with a need to know. Additional data is retained at the Department level as required for completion of the SSV-2, and also within the FDC website for public access.</p> <p data-bbox="240 1202 371 1232">Provision (b)</p> <p data-bbox="240 1261 1485 1420">Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 14, (7) states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents as defined herein, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics using a "Survey of Sexual Victimization-Incident Form," SSV-IA and "Survey of Sexual Victimization-State Prison Systems Summary Form," SSV-2.</p> <p data-bbox="240 1449 1485 1615">The data will also be utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices and training, including identifying problem areas, taking corrective action, and the preparation of an annual report that includes a comparison of the current year's data and corrective actions with those from prior year. Each Compliance Manager will be responsible for compiling institution specific PREA data and preparing an annual corrective action plan for her/his institution.</p> <p data-bbox="240 1644 1449 1704">The FDC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: http://www.dc.state.fl.us/PREA</p> <p data-bbox="240 1733 371 1762">Provision (c)</p> <p data-bbox="240 1792 1458 1883">During an interview with the PC, the Auditor was made aware the department reviews data collected pursuant to §115.87, and that reports are written in such a way that no information has to be redacted. The department report reviewed by the Auditor met PREA compliance standards.</p> <p data-bbox="240 1912 371 1942">Provision (d)</p> <p data-bbox="240 1971 1477 2136">Florida Department of Corrections (FDC), Procedure 602.053, Prison Rape: Prevention, Detection, and Response, effective September 7, 2021, p. 16, (11), states case or investigation records, including but not limited to, any criminal investigation, administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years after the date of the initial collection or for the incarceration period of the victim or employment of the suspect or subject, plus five</p>

years, whichever is longer.

Compliance Managers are responsible for uploading all related documents to the facility's electronic retention file once a PREA case is completed.

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding data storage, publication, and destruction. No recommendations or corrective action.

115.401	Frequency and scope of audits
	<p data-bbox="242 145 742 174">Auditor Overall Determination: Meets Standard</p> <p data-bbox="242 208 454 237">Auditor Discussion</p> <p data-bbox="242 271 443 300">Materials Reviewed</p> <ul data-bbox="284 347 944 376" style="list-style-type: none"> • FDC publicly accessible website http://www.dc.state.fl.us/PREA <p data-bbox="242 405 513 434">Interview with the following</p> <ul data-bbox="284 486 790 546" style="list-style-type: none"> • Agency Head or designee (AH) • Institutional PREA Compliance Manager (IPCM) <p data-bbox="242 575 370 604">Provision (a)</p> <p data-bbox="242 633 1471 759">The AH reported each facility within the FDC had been audited within the previous three (3) year audit cycle (2019 – 2022) The current audit cycle is 2022 - 2025. Copies of all audit reports are on the FDC website for public information and review. FDC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: http://www.dc.state.fl.us/PREA</p> <p data-bbox="242 788 370 817">Provision (b)</p> <p data-bbox="242 846 1471 940">During an interview with the IPCM, the Auditor learned the audit for HCI was in the first year of the new three (3) year audit cycle (2022 – 2025). FDC webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards.</p> <p data-bbox="242 969 370 999">Provision (c)</p> <p data-bbox="242 1028 284 1057">N/A</p> <p data-bbox="242 1086 370 1115">Provision (d)</p> <p data-bbox="242 1144 284 1173">N/A</p> <p data-bbox="242 1202 370 1232">Provision (e)</p> <p data-bbox="242 1261 284 1290">N/A</p> <p data-bbox="242 1319 370 1348">Provision (f)</p> <p data-bbox="242 1377 284 1406">N/A</p> <p data-bbox="242 1435 370 1464">Provision (g)</p> <p data-bbox="242 1494 284 1523">N/A</p> <p data-bbox="242 1552 370 1581">Provision (h)</p> <p data-bbox="242 1610 1487 1704">During the on-site portion of the audit, the Auditor had complete, unimpeded access to every area of the facility. Throughout the on-site portion of the audit the IPCM, PREA Auxiliary Staff and PREA Correctional Services Consultant were available to accompany the auditor and give her complete access to any part of the facility she requested to see.</p> <p data-bbox="242 1733 370 1762">Provision (i)</p> <p data-bbox="242 1792 1455 1850">At all times throughout the audit process, FDC and HCI provided the Auditor with all requested information in a timely and complete manner.</p> <p data-bbox="242 1879 370 1908">Provision (j)</p> <p data-bbox="242 1937 284 1966">N/A</p> <p data-bbox="242 1995 370 2024">Provision (k)</p> <p data-bbox="242 2054 284 2083">N/A</p> <p data-bbox="242 2112 370 2141">Provision (l)</p>

N/A

Provision (m)

The Auditor was provided a secure, private space to conduct all interviews during the on-site portion of the audit.

Provision (n)

During inmate interviews, all inmates reported they were provided the opportunity to send out confidential mail or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.

Provision (o)

N/A

Conclusion:

Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision of the standard regarding frequency and scope of audits. No recommendations or corrective action.

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	<p data-bbox="244 210 453 237">Auditor Discussion</p> <p data-bbox="244 271 368 297">Provision (f)</p> <p data-bbox="244 331 1449 389">The FDC PREA webpage provides multiple reports relative to sexual abuse data from the various facilities in accordance with PREA standards. Data can be accessed at: http://www.dc.state.fl.us/PREA</p> <p data-bbox="244 423 363 450">Conclusion:</p> <p data-bbox="244 483 1481 542">Based upon the review and analysis of all the available evidence, the Auditor has determined the HCI meets every provision in the standard regarding audit contents and findings. No recommendations or corrective action</p>

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

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

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

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

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

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

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

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes
115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	yes
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.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes?	yes
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?	yes

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

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

115.51 (b)	Inmate reporting	
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	na
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	no
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

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

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes
115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes

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

115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	na
	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).)	na

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).)	yes

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.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

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

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

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.)	yes