

PREA Facility Audit Report: Final

Name of Facility: Palm Beach County Main Detention Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 12/05/2025

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input 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 type="checkbox"/>
Auditor Full Name as Signed: James Kenney	Date of Signature: 12/05/2025

AUDITOR INFORMATION	
Auditor name:	Kenney, James
Email:	kenney.consult@gmail.com
Start Date of On-Site Audit:	11/04/2025
End Date of On-Site Audit:	11/06/2025

FACILITY INFORMATION	
Facility name:	Palm Beach County Main Detention Center
Facility physical address:	3228 Gun Club Road, West Palm Beach, Florida - 33406
Facility mailing address:	

Primary Contact

Name:	Captain Meredith Scott
Email Address:	ScottM@pbso.org
Telephone Number:	561-688-4388

Warden/Jail Administrator/Sheriff/Director	
Name:	Colonel Alfonso Starling
Email Address:	StarlingA@pbso.org
Telephone Number:	5616884417

Facility PREA Compliance Manager	
Name:	Charlene Forde
Email Address:	fordec@pbso.org
Telephone Number:	(561) 688-4411
Name:	Mary Wright
Email Address:	wrightme@pbso.org
Telephone Number:	(561) 688-4433
Name:	LaToya Munden
Email Address:	mundenl@pbso.org
Telephone Number:	561) 688-4424
Name:	Willie Morris
Email Address:	morrisw@pbso.org
Telephone Number:	(561) 688-4396
Name:	Joy Ozelie
Email Address:	ozeliej@pbso.org
Telephone Number:	5616884402

Facility Health Service Administrator On-site	
Name:	Nicholas Fricke
Email Address:	NFricke@wellpath.us
Telephone Number:	561-688-4669

Facility Characteristics	
Designed facility capacity:	3154
Current population of facility:	2498
Average daily population for the past 12 months:	2215
Has the facility been over capacity at any point in the past 12 months?	No
What is the facility's population designation?	Both women/girls and men/boys
Age range of population:	15-90
Facility security levels/inmate custody levels:	Maximum, medium and minimum
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	952
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	330
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	39

AGENCY INFORMATION	
Name of agency:	Palm Beach County Sheriff's Office
Governing authority	

or parent agency (if applicable):	
Physical Address:	3228 Gun Club Road, West Palm Beach, Florida - 33406
Mailing Address:	
Telephone number:	

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

Agency-Wide PREA Coordinator Information			
Name:	Meredith Scott	Email Address:	scottm@pbso.org

Facility AUDIT FINDINGS	
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:	
3	<ul style="list-style-type: none"> • 115.35 - Specialized training: Medical and mental health care • 115.65 - Coordinated response • 115.71 - Criminal and administrative agency investigations

Number of standards met:	
42	
Number of standards not met:	
0	

POST-AUDIT REPORTING INFORMATION

Please note: Question numbers may not appear sequentially as some questions are omitted from the report and used solely for internal reporting purposes.

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2025-11-04
2. End date of the onsite portion of the audit:	2025-11-06

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:	Palm Beach County Victim Services, Just Detention International.

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	3164
15. Average daily population for the past 12 months:	2215
16. Number of inmate/resident/detainee housing units:	62
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="radio"/> Yes <input 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

23. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	1593
24. Enter the total number of youthful inmates or youthful/juvenile detainees in the facility as of the first day of the onsite portion of the audit:	17
25. 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:	51
26. 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:	49
27. 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:	1
28. 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:	1
29. 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:	259

<p>30. 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:</p>	<p>55</p>
<p>31. 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:</p>	<p>5</p>
<p>32. 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:</p>	<p>3</p>
<p>33. 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:</p>	<p>5</p>
<p>34. 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:</p>	<p>0</p>
<p>35. 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>	<p>No text provided.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>36. 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:</p>	<p>952</p>

37. 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:	39
38. 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:	330
39. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit:	No text provided.

INTERVIEWS

Inmate/Resident/Detainee Interviews

Random Inmate/Resident/Detainee Interviews

40. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:	22
41. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input 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

<p>42. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The auditor randomly selected at least one (1) individual from each housing unit, ensuring to select individuals at different age groups, from different races, and with different length of stays in the facility. This provides the auditor the best opportunity to obtain an unbiased and clear description of the institution's daily living, educational, and programming opportunities.</p>
<p>43. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>44. 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>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>45. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>23</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>46. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>3</p>

<p>47. 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>
<p>48. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>49. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>50. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>1</p>
<p>51. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>2</p>
<p>52. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>

<p>53. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>
<p>54. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the "Inmates who Reported a Sexual Abuse" protocol:</p>	<p>4</p>
<p>55. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the "Inmates who Disclosed Sexual Victimization during Risk Screening" protocol:</p>	<p>3</p>
<p>56. 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>The auditor verified with classification and the segregation housing roster that there were no individuals held in segregated housing for the high risk for victimization.</p>

57. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):	No text provided.
Staff, Volunteer, and Contractor Interviews	
Random Staff Interviews	
58. Enter the total number of RANDOM STAFF who were interviewed:	18
59. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken) <input type="checkbox"/> None
60. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="radio"/> Yes <input type="radio"/> No
61. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):	No text provided.
Specialized Staff, Volunteers, and Contractor Interviews	
Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.	
62. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	26

63. Were you able to interview the Agency Head?	<input checked="" type="radio"/> Yes <input type="radio"/> No
64. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="radio"/> Yes <input type="radio"/> No
65. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
66. 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)

67. Select which SPECIALIZED STAFF roles were interviewed as part of this audit from the list below: (select all that apply)

- Agency contract administrator
- Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment
- Line staff who supervise youthful inmates (if applicable)
- Education and program staff who work with youthful inmates (if applicable)
- Medical staff
- Mental health staff
- Non-medical staff involved in cross-gender strip or visual searches
- Administrative (human resources) staff
- Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff
- Investigative staff responsible for conducting administrative investigations
- Investigative staff responsible for conducting criminal investigations
- Staff who perform screening for risk of victimization and abusiveness
- Staff who supervise inmates in segregated housing/residents in isolation
- Staff on the sexual abuse incident review team
- Designated staff member charged with monitoring retaliation
- First responders, both security and non-security staff
- Intake staff

	<input checked="" type="checkbox"/> Other
If "Other," provide additional specialized staff roles interviewed:	Mail room, Grievance coordinator, Maintenance staff, Food service.
68. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input type="radio"/> Yes <input checked="" type="radio"/> No
69. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	4
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input checked="" type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input type="checkbox"/> Other
70. Provide any additional comments regarding selecting or interviewing specialized staff.	No text provided.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

71. Did you have access to all areas of the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
Was the site review an active, inquiring process that included the following:	
72. Observations of all facility practices in accordance with the site review component of the audit instrument (e.g., signage, supervision practices, cross-gender viewing and searches)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
73. Tests of all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., risk screening process, access to outside emotional support services, interpretation services)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
74. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No
75. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="radio"/> Yes <input type="radio"/> No

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

Following an initial briefing and welcome with facility leadership, the auditor began the site review of the Main Detention Center on the first day of the onsite audit, November 4, 2025. The auditor visited all areas of the facility and paid special attention to those areas where incarcerated individuals would be present, including intake and booking, all housing units, laundry, food service, health services, the warehouse, education and program areas, and administration. The auditor paid close attention to special areas, including segregated housing and housing for youthful incarcerated individuals. During the site review the auditor made note of staffing levels, video monitoring placement, potential blind spots, posted PREA information, privacy for the incarcerated individuals in the housing units, and the posted audit notice.

The auditor observed PREA information posted throughout the facility. Posted PREA information was noted either high on the wall or on the front of the officer's station in each housing unit. Posters were observed in English, Spanish, and Creole and contained larger font on at least eleven by seven size paper. The posters included information on the zero-tolerance policy and reporting mechanisms, which included directly to staff members, through the rape crisis center via the 7777 number, through the Watch Commander and through a third party.

Informal conversations with staff and incarcerated individuals confirmed that the PREA posters have been posted for an extended time period.

During the site review, the auditor verified supervisory rounds and tested the telephones to verify the phones connected properly with the hotline number. The auditor verified that staff properly made cross-gender announcements when it was necessary.

The auditor observed critical functions, such as the intake risk screening for the risk of victimization, PREA education for the

incarcerated individuals, visual body searches, and the grievance process. Overall, the auditor was provided with full access to the entire facility and was provided an opportunity to observe all documentation that was requested in order to verify compliance with the PREA Standards.

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.

77. 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

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

During the onsite phase of the audit, the auditor was provided access to personnel and training files for staff, incarcerated individual educational records, risk screening records, grievances, incident reports, and investigation files.

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.

79. 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	17	0	0	17
Staff-on-inmate sexual abuse	8	0	0	8
Total	25	0	0	25

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

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

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	15	1	1
Staff-on-inmate sexual abuse	0	8	0	0
Total	0	23	1	1

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.

83. 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

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

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

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

25

<p>86. 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>87. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>17</p>
<p>88. 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>89. 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>90. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>8</p>
<p>91. 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>92. Did your sample of STAFF-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 staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>93. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>5</p>
<p>94. 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>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>95. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>4</p>
<p>96. 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>
<p>97. 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>

Staff-on-inmate sexual harassment investigation files	
98. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	1
99. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
100. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
101. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
102. 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.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

108. Who paid you to conduct this audit?

The audited facility or its parent agency

My state/territory or county government employer (if you audit as part of a consortium or circular auditing arrangement, select this option)

A third-party auditing entity (e.g., accreditation body, consulting firm)

Other

Standards
Auditor Overall Determination Definitions
<ul style="list-style-type: none"> • 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
<p>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.</p>

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>Palm Beach County Sheriff’s Office Corrections Operating Procedure (PBSO COP) 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO Department of Corrections Standards and Staff Development Organizational Chart</i> 2. Interviews: <ol style="list-style-type: none"> 1. PREA Coordinator 2. PREA Compliance Manager <p>Findings (by provision):</p> <p>115.11(a). The Palm Beach County Sheriff’s Office Department of Corrections has adopted a comprehensive written policy that mandates zero-tolerance toward all</p>

types of sexual abuse and sexual harassment. The agency provided the auditor with the *Palm Beach County Sheriff's Office Corrections Operating Procedure (PBSO COP) 934.00 Sexual Offenders and Victims*, which outlines their zero-tolerance sexual abuse policy. The procedure outlines their commitment to the zero-tolerance policy and goes on to properly define sexual abuse and sexual harassment and provide guidance for the PBSO staff to comply with the Prison Rape Elimination Act Standards. The procedure states, "Palm Beach County Sheriff's Office Department of Corrections is committed to emphasizing zero tolerance of the sexual abuse / assault / harassment of inmates, and sexual acts involving inmates regardless of consensual status either by staff or by other prisoners. All reports of sexual abuse are reported immediately and investigated thoroughly. When crimes are committed within correctional facilities, the perpetrator and victim of, and witnesses to these crimes must be identified, and evidence of these crimes collected and preserved. To ensure successful prosecution of the perpetrator, proper investigation procedures must be followed, which includes a complete report of the incident." The procedure covers the full extent of the agency's work to properly identify potential victims of sexual abuse, provide reporting avenues, first response to allegations, thorough investigations of allegations, proper medical and mental health care, discipline for offenders, prevention, training, and annual reporting. The procedure includes the proper definitions of sexual abuse, sexual harassment, and voyeurism, which are consistent with the prohibited behaviors in the PREA Standards. Based upon this analysis, the auditor finds the facility in compliance with this provision.

115.11(b). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure defines the term PREA Coordinator as, "The designated "point person" responsible for the coordination of all PREA compliance efforts. The PBSO Corrections PREA coordinator is the captain of Standards and Staff Development or their designee." The current PREA Coordinator for the agency is Captain Meredith Scott, who reports to the Major of the Standards and Staff Development Division, only one (1) step from the Department of Corrections agency head, Colonel Alfonso Starling. The auditor was provided a copy of the agency's *Organizational Chart for the Standards and Staff Development Division*, showing the Captain's authoritative position.

During the onsite phase of the audit, the auditor met with the PREA Coordinator to discuss her job position and her role as the coordinator. The Captain was clear that her position provides her ample time to perform her duties as it relates to coordinating the efforts under PREA that lead to prevention, detection, and proper response to reports and allegations. She reports to the Major and has direct contact with the agency head, the Colonel. She told the auditor the agency has assigned one (1) of the accreditation team members to serve as PREA Compliance Manager for the agency. She told the auditor she has daily contact with the compliance manager.

She stated that if she identifies an issue complying with a PREA Standard, she will speak to the Majors and come up with a plan for corrective action. The auditor worked directly with the PREA Coordinator for this audit and was able to assess her knowledge and authority level. Based on this interview, the organizational chart, and my contact with the PREA Coordinator, the auditor believes she has both the time and

	<p>authority necessary. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.11(c). The agency has designated one (1) of the accreditation team members as the PREA Compliance Manager, Joy Ozelie. As the PCM, she is tasked to handle the responsibilities to assist with the development and implementation and to oversee the efforts of the agency’s zero tolerance policy. Her role includes assisting with the monitoring of vulnerable incarcerated individuals and reviewing incident reports and allegations of sexual abuse and sexual harassment. Through an interview with the PCM, the auditor was able to determine the PCM clearly understands her role and was well educated on the PREA standards. The PCM indicated that there was sufficient time to complete duties as the PCM, as it was a required part of her responsibilities. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. None 2. Interviews: <ol style="list-style-type: none"> 1. Agency Contract Administrator <p>Findings (by provision):</p> <p>115.12(a). The agency provided no documentation related to this provision. In the PAQ, the agency stated there were no contracts currently in place for the housing of the PBSO incarcerated individuals.</p> <p>Through an interview with the agency contract administrator, the auditor was able to confirm that the agency currently has no contracts for any other agency to house incarcerated individuals for the Palm Beach County Department of Corrections.</p> <p>Because there are no current contracts, the auditor was not able verify language in any executed contract. The contract administrator, however, confirmed that in any circumstance that would precipitate the contracted housing of their incarcerated individuals with another corrections agency, the contract would include a requirement that the agency be PREA compliant. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.12(b). The agency provided no documentation related to this provision. In the PAQ, the agency stated there were no contracts currently in place for the housing of</p>

the PBSO incarcerated individuals.

Through an interview with the agency contract administrator, the auditor was able to confirm that the agency currently has no contracts for any other agency to house incarcerated individuals for the Palm Beach County Department of Corrections.

Because there are no current contracts, the auditor was not able verify language in any executed contract. The contract administrator, however, confirmed that in any circumstance that would precipitate the contracted housing of their incarcerated individuals with another corrections agency, the contract would include a requirement that the agency be PREA compliant and provisions for ongoing compliance monitoring to ensure such compliance. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13 Supervision and monitoring

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 906.08 Facility Reports*
 2. *PBSO COP 917.17 Division Security Inspection*
 3. *PBSO Department of Corrections Staffing Analysis Annual Update*
 4. *Chronological of Events logs*
2. Interviews:
 1. PREA Coordinator
 2. Agency Head
 3. Random incarcerated individuals
 4. Random staff
 5. Specialized staff
3. Site Review Observations:
 1. Control rooms (electronic monitoring)
 2. Program areas
 3. Housing units
 4. Kitchen
 5. Health services

Findings (by provision):

115.13(a). In the PAQ, the agency provided *PBSO COP 906.08 Facility Reports*. The procedure states, "The facility administrator or designee inspects and reviews operations and programs at least annually to evaluate compliance with policy and procedures. A report describing findings and a corrective action plan is submitted to

the appropriate division commander. A comprehensive staffing analysis is conducted annually. The staffing analysis is used to determine staffing needs and plans. Relief factors are calculated for each classification of staff assigned to relieve posts or positions. Essential posts and positions, as determined in the staff plan, are consistently filled with qualified personnel.” The agency also provided the auditor a copy of the *PBSO Department of Corrections Staffing Analysis Annual Update*. The document includes Staff Coverage Plan for the Department of Corrections’ Main Detention Center, West Detention Center and all administrative and security divisions, as well as the breakdown of video monitoring technology for the agency. The plan includes a review of the supervision of the institution.

The staffing plan mandated in this provision must take into account 11 considerations:

1. Provision 115.13(a)(1) - Generally accepted detention and correctional practices - PBSO is a fully accredited agency with the American Correctional Association (Reaccredited October 2023), National Commission on Correctional Health Care (Conducted September 2025), and Florida Corrections Accreditation Commission (Reaccredited October 2024). Audits of our two facilities are conducted every three years for compliance. PBSO complies with the Florida Model Jail Standards (Conducted June 2025).
2. Provision 115.13(a)(2) - Any judicial findings of inadequacy - PBSO has no judicial findings of inadequacy. There are no current lawsuits or settlement agreements.
3. Provision 115.13(a)(3) - Any findings of inadequacy from Federal investigative agencies - PBSO has no findings of inadequacy from any Federal investigative agencies.
4. Provision 115.13(a)(4) - Any findings of inadequacy from internal or external oversight bodies - PBSO has no findings of inadequacy from any internal or external oversight bodies.
5. Provision 115.13(a)(5) - All components of the facility’s physical plant (including “blind-spots” or areas where staff or incarcerated individuals may be isolated) - The PBSO facilities are routinely assessed for potential blind spots and areas where staff or inmates may be isolated. As part of the ongoing renovation project, additional cameras are being installed to enhance visibility and reduce security risks. The physical plant is also reviewed during the “PREA: After Incident Reviews” to identify any vulnerabilities to ensure the facility maintains a safe and secure environment in compliance with PREA standards.
6. Provision 115.13(a)(6) - The composition of the inmate population - PBSO houses males, females, and youthful individuals. Please see the data below for the audit cycle 9/1/24- 8/31/25.

· The number of inmates admitted during past 12 months - MDC: 20,829

- The number of inmates admitted during the past 12 months whose length of stay in the facility was 30 days or more - MDC: 3,093
- The number of inmates admitted during the past 12 months whose length of stay in the facility was 72 hours or more - MDC: 8,109
- Current population of facility - MDC: 1,707
- Average daily population for the past 12 months - MDC: 1,502
- Age range of population - MDC: 14-90
- Average length of stay - MDC: 16
- Number of youthful inmates held in the facility during the past 12 months - MDC: 53

7. Provision 115.13(a)(7) - The number and placement of supervisory staff - The Staffing Plan outlines the allocation of supervisory personnel throughout the facilities and provides any recommendations for additional supervisory staff as necessary to maintain safety, security, and effective oversight. This includes ensuring adequate coverage for all posts, high-risk areas, and program activities. The plan takes into account staff experience, training, and qualifications, as well as facility layout, population trends, and operational needs. Staffing determinations are made in alignment with PREA Standard 115.13 to prevent instances of sexual abuse and harassment, meanwhile promoting accountability, and support of a safe environment for both inmates and staff.

8. Provision 115.13(a)(8) - Institution programs occurring on a particular shift - Programs are usually conducted during daytime operational hours and are facilitated by trained volunteers who have undergone the facility's screening and training requirements. Deputies monitor all program activities to ensure the safety of both participants and staff. Staff maintain security and uphold compliance with applicable policies and standards.

9. Provision 115.13(a)(9) - Any applicable State or local laws, regulations, or standards - There are no state laws or regulations related to the staffing plan. PBSO complies with the American Correction Association's standards 5-ALDF-2A-13 and 5-ALDF 2A-14. These standards require an annual comprehensive staffing analysis.

10. Provision 115.13(a)(10) - The prevalence of substantiated and unsubstantiated incidents of sexual abuse - The staffing and physical plant of the facilities are routinely evaluated during the "PREA: After Incident Reviews" to assess adequacy in preventing sexual abuse and harassment. These evaluations consider post coverage, supervisory oversight, staff-to-inmate ratios, facility layout, and other operational factors that may impact safety. Based on the most recent reviews, no changes or modifications to the current staffing plan have been recommended.

11. Provision 115.13(a)(11) - Any other relevant factors - There have been no recommendation for changes or modifications to the staffing plan due to other

factors. The facilities continue to monitor staffing levels, training, and physical security measures to ensure ongoing compliance with PREA standards.

The overall staffing of the facility is consistent with accepted practices and standards, and the auditor saw nothing in the plan or in the facility that would be inconsistent with that finding.

During the site review, the auditor found no areas of concern or blind spots in the facility. The auditor also noted adequate staffing throughout the compound, as well as supervisory staff. The auditor reviewed all areas, including the kitchen, laundry, program areas, health services, and all housing units. There are clearly visible cameras throughout the facility, and the auditor could see where the facility had identified potential areas of concern, as some mirrors had been installed. This would support the assertion in the staffing plan that the facility has done an extensive review. The auditor visited the control rooms where staff actively monitor video within the facility. There appeared to be adequate coverage in most areas, as the electronic monitoring system is intended to support the staff members' physical monitoring of activity.

The auditor talked with several supervisors throughout the facility and witnessed their interactions with staff. It was apparent that there is ample supervisory coverage to ensure staff and inmate safety.

The auditor visited the education and programs areas. Incarcerated individuals were able to easily attend programs without taking away security and safety from the rest of the facility.

The auditor interviewed the Colonel, the agency head, during the onsite phase of the audit. The Colonel talked about the staffing plan and indicated the staffing plan is reviewed annually and updated based on a broad review with a team that includes the PREA coordinator. The Colonel explained the plan is based on several factors and nationally accepted guidelines for staffing coverage. Each of the three (3) shifts has adequate staff to provide a safe environment leading to the prevention, detection, and reduction of sexual abuse of the inmate population. The video monitoring system is evaluated at least once per year to determine if the agency should adjust it to better identify safety concerns. In fact, the agency is still in the middle of a physical plant upgrade that will allow for the installation of an entirely new monitoring system. The Colonel confirmed the plan covers each of the 11 points required under this standard. To confirm compliance, the shift commanders review daily and weekly staffing reports and address any concerns immediately and forward those reports to the Colonel's office for additional review and approval. The auditor also interviewed the PREA Coordinator, who confirmed the staffing plan considers each of the required points listed in this standard. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(b). The agency reported in the PAQ that deviations from the staffing plan are non-existent, because they routinely utilize mandated and voluntary overtime to cover mandatory positions, when deemed necessary. The auditor interviewed the Colonel during the onsite phase of the audit, who confirmed no documented

deviations to the staffing plan over the last 12 months. The agency avoids these deviations through the utilization of overtime. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(c). In the PAQ, the agency provided *PBSO COP 906.08 Facility Reports*. The procedure states, “The facility administrator or designee inspects and reviews operations and programs at least annually to evaluate compliance with policy and procedures. A report describing findings and a corrective action plan is submitted to the appropriate division commander. A comprehensive staffing analysis is conducted annually. The staffing analysis is used to determine staffing needs and plans. Relief factors are calculated for each classification of staff assigned to relieve posts or positions. Essential posts and positions, as determined in the staff plan, are consistently filled with qualified personnel.” The agency also provided the auditor a copy of the *PBSO Department of Corrections Staffing Analysis Annual Update*. The annual update report was completed in May 2025. The update includes this conclusory statement, “The proposed increase in staffing levels is based on factual data, not opinions, or conjecture on what positions should exist. This analysis addresses needs based on current posts and approved allocations. When calculating leave hour averages in determining relief factors, analysis does not take into account vacancies and unallocated, albeit necessary, (ghost) posts. Even without these posts or staff being used in calculating relief factors, as noted above, this analysis recommends an increase as follows: Sworn staff +26, non-sworn + 42, for a total addition of 68 staff. The annual review was completed by the PREA coordinator and a team of administrative staff and signed by the PREA coordinator.

The auditor interviewed the PREA Coordinator, who confirmed the staffing plan is reviewed at a minimum of once per year. The annual review is completed by the PREA Coordinator and a team of administrative staff. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.13(d). The auditor was provided *PBSO COP 917.17 Division Security Inspection* in the PAQ. The procedure states, “Intermediate-level or higher-level supervisors on all shifts will conduct unannounced rounds to identify and deter staff sexual abuse/ harassment. These rounds will be documented on the chronological. Staff is prohibited from alerting other staff of such rounds being conducted.”

During interviews with 22 random incarcerated individuals, each individual stated that supervisors enter the housing units several times a day. When asked, incarcerated individuals told the auditor that supervisors come in the units many times throughout the day and night. During interviews with 18 random staff members, staff stated that supervisors perform rounds daily and at different times. The auditor also interviewed three (3) upper-level supervisors during the onsite audit and confirmed that they are expected to enter each housing unit at least once per day to make rounds. Those rounds are required to be documented in the chronological log and are to be performed at random times so as not to be predictable. The auditor was told they enter the units at different times of the day and enter from different doors to avoid the expectations of the deputies regarding their impending visit. Also, during the site review, the auditor met supervisors in the

	<p>housing units while they were performing their unannounced rounds.</p> <p>Several copies of <i>Chronological of Events</i> logs were supplied in the PAQ, which showed various upper-level supervisors logging in PREA rounds throughout the facility. Rounds were logged in at all times of the day and night and from different days of the week. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 923.00 Juvenile Admission, Classification and Housing</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Youthful housing 2. Program areas <p>Findings (by provision):</p> <p>115.14(a). The auditor reviewed <i>PBSO COP 923.00 Juvenile Admission, Classification and Housing</i>, which was provided in the PAQ. This procedure establishes the guidelines under which juveniles (youthful incarcerated individuals) are admitted, classified, housed, and offered programs within the PBSO Department of Corrections. The procedure states, "All inmates under the age of 18, that do not meet the criteria of section V (B., 1, 2, 3, 4) shall be classified as juveniles and housed separately from adults, in a direct supervision unit. Juveniles are housed in a specialized unit for juveniles. Juveniles in the specialized unit have no more than incidental sight or sound contact with adult offenders from outside the unit in living, program, dining, or other common areas of the facility. Any other sight or sound contact is minimized, brief, and in conformance with applicable legal requirements." The Department has designated a separate housing area, on the twelfth floor of the south tower, that has been defined to house those incarcerated individuals 17 years of age and under. As outlined in the procedure, these incarcerated individuals are to be separated from anyone 18 years of age and older. Also, by Florida state law, and facility policy, staff are required to complete security rounds every 10 minutes, without exception. The procedure states, "The housing unit officer shall provide for the direct supervision of juveniles housed in the specialized unit to ensure safety and security; 10-minute</p>

checks will be maintained.”

During the site review, the auditor toured the specified youthful housing area on the twelfth floor of the south tower. The floor is accessed mainly by elevator with secondary access by stairs. The housing area holds a central control room between two (2) housing units. Both housing units are direct supervision housing units, with double-bunked wet cells. Most of the individuals are currently housed by themselves because the units have adequate space, with only 17 individuals currently in custody. The housing units have their own recreation yard and training rooms. This allows for ease in meeting the required daily recreation and state-required education. The auditor was told that adult incarcerated individuals, including workers, are not permitted to enter the housing area. Meal carts are delivered to the outside of the housing area and adults are not allowed to push them into the unit. The housing area is on the facility’s highest floor, providing the separation from all adult individuals.

During the onsite audit, the auditor interviewed three (3) randomly selected youthful incarcerated individuals. All three incarcerated individuals appeared to be well-adjusted and did not express fear for their safety in the facility. They were very respectful and answered questions freely. Each individual stated that the female staff always make a cross-gender announcement prior to entering the housing unit. All three incarcerated individuals could also explain what PREA was and how to file an allegation of sexual abuse if it was necessary. The incarcerated individuals all explained they have access to the telephone, the inmate kiosk, grievance forms, attend daily education classes, and daily exercise. The auditor asked about access to adult incarcerated individuals and was told that adult incarcerated individuals are never allowed to enter their housing area.

The auditor interviewed a deputy assigned to duties in the youthful housing area and he confirmed that adult incarcerated individuals were not allowed to enter the youthful housing areas at any time. He also confirmed separation of the youthful incarcerated individuals by sight and sound at all times except for movement through the building for transportation to court, but only under the direct supervision of a corrections officer. He told the auditor the facility does not utilize solitary confinement to achieve this separation, as the youthful incarcerated individuals are assigned to their own housing units. Youthful incarcerated individuals may be placed in confinement within the unit, but only for disciplinary reasons. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.14(b). The auditor reviewed *PBSO COP 923.00 Juvenile Admission, Classification and Housing*, which was provided in the PAQ. This procedure establishes the guidelines under which juveniles (youthful incarcerated individuals) are admitted, classified, housed, and offered programs within the PBSO Department of Corrections. The procedure states, “All inmates under the age of 18, that do not meet the criteria of section V (B., 1, 2, 3, 4) shall be classified as juveniles and housed separately from adults, in a direct supervision unit. Juveniles are housed in a specialized unit for juveniles. Juveniles in the specialized unit have no more than incidental sight or sound contact with adult offenders from outside the unit in living, program, dining, or other common areas of the facility. Any other sight or sound

contact is minimized, brief, and in conformance with applicable legal requirements.”

During the onsite audit, the auditor interviewed three (3) randomly selected youthful incarcerated individuals. All three incarcerated individuals appeared to be well-adjusted and did not express fear for their safety in the facility. They were very respectful and answered questions freely. Each individual stated that the female staff always make a cross-gender announcement prior to entering the housing unit. All three incarcerated individuals could also explain what PREA was and how to file an allegation of sexual abuse if it was necessary. The incarcerated individuals all explained they have access to the telephone, the inmate kiosk, grievance forms, attend daily education classes, and daily exercise. The auditor asked about access to adult incarcerated individuals and was told that adult incarcerated individuals are never allowed to enter their housing area.

The auditor interviewed a deputy assigned to duties in the youthful housing area and he confirmed that adult incarcerated individuals were not allowed to enter the youthful housing areas at any time. He also confirmed separation of the youthful incarcerated individuals by sight and sound at all times except for movement through the building for transportation to court, but only under the direct supervision of a deputy. He told the auditor the facility does not utilize solitary confinement to achieve this separation, as the youthful incarcerated individuals are assigned to their own housing units. Youthful incarcerated individuals may be placed in confinement within the unit, but only for disciplinary reasons.

The auditor also interviewed a classroom teacher who provides educational classes for the youthful incarcerated individuals. She is employed by the Palm Beach County School District and works to ensure that all of the youthful incarcerated individuals have access to get required school system education. The classes are held in the classrooms inside the housing units. The incarcerated individuals have the ability to enter the classroom directly from the housing unit dayroom and never leave the housing unit. Adult incarcerated individuals never enter the area. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.14(c). The auditor reviewed *PBSO COP 923.00 Juvenile Admission, Classification and Housing*, which was provided in the PAQ. This procedure establishes the guidelines under which juveniles (youthful incarcerated individuals) are admitted, classified, housed, and offered programs within the PBSO Department of Corrections. The procedure states, “All inmates under the age of 18, that do not meet the criteria of section V (B., 1, 2, 3, 4) shall be classified as juveniles and housed separately from adults, in a direct supervision unit. Juveniles are housed in a specialized unit for juveniles. Juveniles in the specialized unit have no more than incidental sight or sound contact with adult offenders from outside the unit in living, program, dining, or other common areas of the facility. Any other sight or sound contact is minimized, brief, and in conformance with applicable legal requirements.”

During the onsite audit, the auditor interviewed three (3) randomly selected youthful incarcerated individuals. All three incarcerated individuals appeared to be well-adjusted and did not express fear for their safety in the facility. They were very

	<p>respectful and answered questions freely. Each individual stated that the female staff always make a cross-gender announcement prior to entering the housing unit. All three incarcerated individuals could also explain what PREA was and how to file an allegation of sexual abuse if it was necessary. The incarcerated individuals all explained they have access to the telephone, the inmate kiosk, grievance forms, attend daily education classes, and daily exercise. The auditor asked about access to adult incarcerated individuals and was told that adult incarcerated individuals are never allowed to enter their housing area.</p> <p>The auditor interviewed a deputy assigned to duties in the youthful housing area and he confirmed that adult incarcerated individuals were not allowed to enter the youthful housing areas at any time. He also confirmed separation of the youthful incarcerated individuals by sight and sound at all times except for movement through the building for transportation to court, but only under the direct supervision of a deputy. He told the auditor the incarcerated youthful individuals may exit to the recreation yard throughout the day. The only limitations for daily recreation is based on weather conditions.</p> <p>The auditor also interviewed a classroom teacher who provides educational classes for the youthful incarcerated individuals. She is employed by the Palm Beach County School District and works to ensure that all of the youthful incarcerated individuals have access to get required school system education. The classes are held in the classrooms inside the housing units. The incarcerated individuals have the ability to enter the classroom directly from the housing unit dayroom and never leave the housing unit. Adult incarcerated individuals never enter the area. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 917.11 Searches and Contraband Control</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals 3. Random incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Control rooms (electronic monitoring)

2. Strip search room
3. Bathrooms and shower areas
4. Housing units
5. Medical services

Findings (by provision):

115.15(a). In the PAQ, the facility provided *PBSO COP 917.11 Searches and Contraband Control*. The procedure states, "Corrections deputies shall not conduct cross-gender strip searches or cross gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. In that event, the circumstances will be documented." The agency indicated in the PAQ there were no cross-gender strip searches or body cavity searches performed in the previous 12 months.

During the onsite phase of the audit, the auditor toured the facility's intake area and viewed the strip search area in the sally port vestibule. The room is separated from viewing from other incarcerated individuals and staff members and there are no cameras in the area that could view an individual in a state of undress during the search. The room is utilized for unclothed searches of incarcerated individuals upon transfer into or out of the institution. The auditor interviewed three (3) corrections deputies that were responsible for performing strip searches. All three confirmed that body cavity searches must be first approved by administration and then only performed by medical staff at the hospital. They also stated clearly that policy forbids them from performing a strip search on an individual of the opposite gender. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(b). In the PAQ, the facility provided *PBSO COP 917.11 Searches and Contraband Control*. The procedure states, "Correctional deputies may conduct pat-down searches. Male or female officers may conduct a pat search of a male inmate, except that a female officer may not search the groin area. A female officer will search a female inmate." In the PAQ, the agency stated there were no pat down searches of female incarcerated individuals performed by male deputies in the previous 12 months. Also in the PAQ, the facility stated there were no incarcerated individuals who had out of cell opportunities restricted in order to comply with this provision.

During the onsite phase of the audit, the auditor had informal discussions with incarcerated individuals during the site review and was told that pat searches of female incarcerated individuals are always performed by female deputies. The auditor interviewed 18 random staff members during the onsite phase of the audit, and all 18 deputies and supervisors stated that pat down searches of female incarcerated individuals are always performed by female deputies. The auditor was told that male officers can search female incarcerated individuals in exigent circumstances, but no one could recall an instance when that was necessary. The auditor interviewed 22 random incarcerated individuals during the onsite audit, nine (9) of which were female incarcerated individuals. Each individual confirmed that pat

searches were always performed by female deputies. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(c). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Corrections deputies shall not conduct cross-gender strip searches or cross gender visual body cavity searches except in exigent circumstances or when performed by medical practitioners. In that event, the circumstances will be documented." Based on this analysis, the auditor finds the facility in compliance with this provision.

115.15(d). The agency provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Inmates shall be allowed to shower, perform bodily functions, and change clothing without "non-medical" staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances, or when such viewing is incidental to routine cell checks, etc." The procedure goes on to state, "All staff of the opposite gender of the housing units will announce their presence when entering the unit ("knock and announce")."

During the site review, the auditor visited all housing units and evaluated the units for cross-gender viewing, blind spots, and posted zero-tolerance signage. In all areas, the auditor could see the specific actions taken to provide privacy and modesty for the incarcerated individuals and to prevent cross-gender viewing of incarcerated individuals' breasts, genitalia, and buttocks. In the east tower, the facility holds 12 housing units, all with the same layout. The units hold multiple cells with closed-door double-bunked wet cells. In the south tower, the facility holds ten (10) housing units with the same layout and eight (8) dormitory units with the same layout. Ten of the units hold multiple cells with closed-door double-bunked wet cells. The 8 dormitory units each hold five (5) pods of open dormitory style housing on two levels. These units have open restrooms and showers on both levels of the unit. The showers in all housing units have individual shower curtains, are placed behind a wall, or have a swinging door that provides privacy and modesty. Some of the showers are behind a secure door and have a cover on the door that protects staff from seeing breasts and genitalia. Overall, the auditor found no toilets, restrooms, or showers where the incarcerated individuals would be at risk of cross-gender viewing. The auditor also noted no areas of concern for blind spots based on the shape of the units and the available viewing of the unit from an officer's station or a control room. The auditor also noted adequate zero-tolerance signage, in three (3) languages clearly posted on the front of the officer's station or on the wall in the dayroom. The auditor also noted the required audit notice throughout the institution. The auditor entered several control rooms to view the video monitors and determined there were no restrooms or showers that could be viewed on the monitors. The auditor noted an electronic box placed on the video playback where there may be an opportunity for staff to see an individual on the toilet.

Also, during the site review, the auditor routinely witnessed cross-gender announcements during entry into every housing unit. Each time we attempted to enter a dormitory, a corrections deputy or supervisor clearly made a loud announcement of "female on the floor" or "male on the floor". We were then asked

	<p>to wait a moment before we entered, allowing incarcerated individuals the opportunity to cover up if it was necessary.</p> <p>During interviews with 22 random incarcerated individuals, they all stated that deputies routinely make an announcement before entering the unit. All 22 of the incarcerated individuals interviewed confirmed they felt comfortable showering and using the restroom without staff members of the opposite gender viewing them.</p> <p>During interviews with 18 random staff members, they confirmed that cross-gender announcements are made every time an officer of the opposite gender enters a housing unit. Deputies stated clearly that they cannot see incarcerated individuals in the showers and restrooms and will only see incarcerated individuals naked during routine cell checks and security rounds. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.15(e). This provision is not applicable.</p> <p>115.15(f). This provision is not applicable.</p>
--	--

115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 932.05 Interpreters and Related Services</i> 3. <i>PBSO Department of Corrections Inmate Handbook</i> 4. <i>PBSO Department of Corrections Inmate Handbook Spanish</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head 2. Targeted incarcerated individuals 3. Random incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Postings in housing units 2. Medical housing 3. Inmate educational materials <p>Findings (by provision):</p> <p>115.16(a). In the PAQ, the auditor was provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, "Written information is provided to every inmate</p>

in the Inmate Handbook on sexual abuse/assault/harassment to include: a. Prevention, self-protection, and intervention of potential sexual abuse/ assault/ harassment. b. Reporting methods in the event of sexual abuse/assault/harassment: It is the responsibility of the individual to report any sexual abuse/assault/ harassment, potential vulnerabilities, or tendencies of acting out with sexually aggressive behavior to any staff member. c. Treatment and counseling. Visually impaired or illiterate inmates will receive information verbally, in a language they understand.” The auditor was also provided a copy of *PBSO COP 932.05 Interpreters and Related Services* in the PAQ. The procedure states, “Video Remote Interpretation (VRI): In the event that one of our facilities is in need of an interpreter qualified in American Sign Language (ASL) the Department of Corrections has contracted VRI services.”

During the onsite phase of the audit, the auditor interviewed one (1) incarcerated individual with a physical disability, one incarcerated individual who is partially blind, one incarcerated individual who is partially deaf, and two (2) incarcerated individuals with a cognitive disability. Each of the five (5) incarcerated individuals were able to explain the zero-tolerance information and how to file an allegation of sexual abuse or sexual harassment. All the incarcerated individuals stated they had no problems understanding or receiving the PREA education they had received. The partially blind and partially deaf individuals spoke about staff assisting them to ensure they were able to understand the education received. The auditor confirmed in an interview with the Colonel that the PBSO Department of Corrections has various accommodations available to provide PREA education for all incarcerated individuals, regardless of the disability or language spoken. During the site review, the auditor viewed the PREA signage, and it appeared to be posted at a level that was easily viewed by all incarcerated individuals, even those that were wheelchair-bound. Grievances are available to all incarcerated individuals, and the agency procedures require accommodation for those that need assistance to file a grievance. The telephones are also in a place easily accessible for all incarcerated individuals, so all incarcerated individuals would be able to call the PREA hotline. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.16(b). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “Written information is provided to every inmate in the Inmate Handbook on sexual abuse/assault/harassment to include: a. Prevention, self-protection, and intervention of potential sexual abuse/ assault/ harassment. b. Reporting methods in the event of sexual abuse/assault/harassment: It is the responsibility of the individual to report any sexual abuse/assault/ harassment, potential vulnerabilities, or tendencies of acting out with sexually aggressive behavior to any staff member. c. Treatment and counseling. Video and written information is available in three languages, as well as translation provided by translation services.” The auditor was also provided a copy of *PBSO COP 932.05 Interpreters and Related Services* in the PAQ. The procedure states, “Inmates who are LEP will receive notification of applicable rules, regulations, and procedures in their primary language. Intake staff will utilize appropriate language services to obtain information from, and provide information to, LEP inmates. Using signage and/

or oral language services, LEP inmates will be provided information about oral and written language assistance services that will be available to them at no charge for the duration of their incarceration or supervision.”

During the onsite phase of the audit, the auditor interviewed two (2) incarcerated individuals who spoke Spanish during the random interviews. Both incarcerated individuals were able to speak enough English to speak with the auditor without the assistance of a staff member for translation. Both incarcerated individuals confirmed receiving the PREA education by watching the PREA video in Spanish and receiving a *PBSO Department of Corrections Inmate Handbook* in Spanish. They explained to the auditor how to file an allegation of sexual abuse if it were necessary. They also understood behavior that was improper. The auditor viewed PREA signage in the housing units during the site review and all signs were available in three (3) languages, English, Spanish, and Creole. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.16(c). In the PAQ, the auditor was provided *PBSO COP 932.05 Interpreters and Related Services* in the PAQ. The procedure states, “Fellow inmates are not considered approved language service providers and will not be relied upon to provide language services where potential conflicts may arise, where important services or information is being communicated, in any of the situations specifically noted above (1-8), or where accuracy is important. Bilingual Staff: Bilingual staff shall be assessed to confirm fluency. If the staff member satisfies the requirements of fluency for a particular language, he/she may speak directly with LEP persons in that language. However, he/she cannot act as an interpreter unless the requirements of paragraph 3 below are also satisfied.”

During the onsite phase of the audit, the auditor spoke with 18 random staff members and 22 random incarcerated individuals. All staff and incarcerated individuals stated that the facility does not utilize incarcerated individuals to interpret for other incarcerated individuals. Staff members stated clearly that using an inmate to interpret could be dangerous, as there is no way to ensure that the translation from their language to English is accurate. Staff stated that there are many staff members available who could translate, or they could utilize the language line if it was needed. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17	Hiring and promotion decisions
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:
	1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>)

1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. *PBSO General Order 304.02 Application, Screening and Selection Process*
 3. *PBSO COP 908.02 Consultants, Volunteers and Contract Personnel*
 4. *PBSO Rule & Regulation IX Improper Conduct Offenses*
 5. Employment records
2. Interviews:
 1. Specialized staff

Findings (by provision):

115.17(a). In the PAQ, the auditor was provided *PBSO General Order 304.02 Application, Screening and Selection Process*. The order “establishes procedures for the application, screening and selection process. This process is vitally important to any organization desiring to attract and employ qualified personnel. In order for the hiring process to meet desired goals, it should be job-related, non-discriminatory, measurable, with minimal adverse impact, standards uniformly applied and provide equal opportunity for all to compete.” The order states, “The agency will not hire, promote or enlist the services of anyone or contractor, who has been found to have engaged in sexual abuse, been convicted of engaging or civilly or administratively adjudicated to have engaged in or attempting to engage in sexual activity by force, overt or implied threats of force, coercion or if the victim did not consent or was unable to consent or refused such activity.”

The auditor reviewed the records of ten (10) randomly selected staff members, where the agency provided documents for each staff member showing the negative response to pre-employment questions related to this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(b). In the PAQ, the auditor was provided *PBSO General Order 304.02 Application, Screening and Selection Process*. The order states, “The agency will consider any incidents of sexual harassment and sexual assaults in determining whether to hire or promote anyone or to enlist the services of any contractor, who may have inmate contact.”

During the onsite phase of the audit, the auditor interviewed the human resources director. The auditor was told that all applicants are asked specific questions about sexual harassment during the pre-employment process. Applicants are asked to provide information regarding past employment. The applicants are expected to provide factual information, and this expectation is included in the agency application, where applicants are notified that false information may lead to termination of employment. The information received is confirmed through the background check of prior employers and by way of the pre-employment polygraph examination. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(c). In the PAQ, the auditor was provided *PBSO General Order 304.02 Application, Screening and Selection Process*. The order states, “Pre-background

records checks may include, but not be limited to: a. Florida Department of Law Enforcement (FDLE) b. Florida/National Crime Information Center (FCIC/NCIC) c. Department of Highway Safety and Motor Vehicles (HSMV) d. Credit History Check e. Palm Beach County Criminal Records System (PALMS) f. Automated Training Management System (ATMS) g. Narcotics/Strategic Intelligence Section (OCB/SIS). A background investigation conducted by IA, including but not limited to the following areas: a. Verification of qualifying credentials b. Criminal records check c. Verification of at least three personal references d. Neighborhood checks (sworn only) e. Verification of prior employment.” In the PAQ, the agency indicated there were 130 staff members hired over the 12 months prior to the audit, where the required background checks had been appropriately completed.

The auditor reviewed the records of ten (10) randomly selected staff members, where the agency provided documents for each staff member showing the appropriate background checks performed with no indication of prior sexual offenses listed for each of the ten records reviewed.

During the onsite phase of the audit, the auditor interviewed the human resources director. The auditor was told that all applicants must pass the full criminal history review and background check before being considered for employment. Also, a full check of prior employers is completed for everyone before the applicant’s file can receive final approval. These same reviews are completed for contractors before they are authorized to be approved to perform duties inside the secure perimeter of the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(d). In the PAQ, the auditor was provided *PBSO COP 908.02 Consultants, Volunteers and Contract Personnel*. The procedure states, “The security clearance sergeant will conduct a criminal history check on each applicant based on Florida Department of Law Enforcement (FDLE) mandates, which include National Crime Information Center (NCIC), Florida Crime Information Center (FCIC), and Palm Beach County Automated LE Management System (PALMS).”

During the onsite phase of the audit, the auditor interviewed the human resources director. The auditor was told that all individuals, including contractors, must pass the full criminal history review before being approved for entrance to the facility. The reviews are completed for contractors before they are authorized to be approved to perform duties inside the secure perimeter of the facility compound. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(e). In the PAQ, the auditor was provided *PBSO COP 908.02 Consultants, Volunteers and Contract Personnel*. The procedure states, “All applicants must renew their security clearance annually unless otherwise noted. Failure to renew annually will result in security clearance termination.”

During the onsite phase of the audit, the auditor interviewed the human resources director. The director explained that in addition to the requirements for contractors and volunteers, the agency’s policy to fingerprint all civilian and security staff in the state’s livescan FALCON system. FALCON is an integrated state-of-the-art system for

identifying criminals and reporting data. For law enforcement agencies and correctional agencies, it is utilized through a livescan program, where employee fingerprints are scanned into the FALCON system. The fingerprints will be collected under the agency's unique nine-character ORI number and retained in the FALCON system. Once entered in the enrolled agency file, the FDLE will automatically identify and alert at any time if that individual's fingerprints are received through a new arrest anywhere in the United States. The alert is sent from the FDLE to the agency's contact, thus providing an automatic system to capture employee arrests. The use of this FALCON system satisfies the requirement for the five-year background check.

The agency's policy of fingerprinting all staff members, volunteers, and contractors satisfies the standards requirements for the five-year background checks. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(f). In the PAQ, the auditor was provided *PBSO General Order 304.02 Application, Screening and Selection Process*. The order requires that staff have a continuing affirmative duty to disclose any misconduct regarding sexual abuse in a correctional facility, or any criminal conviction for sexual activity in the community. In addition, the order requires that all staff attest annually during annual evaluations that they have not been the perpetrator of such activity. This attestation is also included in all promotional materials for the agency.

During the onsite phase of the audit, the auditor interviewed the human resources director. The director confirmed the agency follows this policy. She explained that questions regarding an individual's prior employment, sexual abuse and sexual harassment allegations, and prior criminal offenses are asked during the oral interview process for promotions. She also confirmed that all employees are required to report any arrests or allegations of sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(g). In the PAQ, the auditor was provided a copy of the *PBSO Rule & Regulation IX Improper Conduct Offenses*. The order includes offenses that would violate the agency's rules for improper conduct. The order includes item number 57, Misrepresenting or misleading information, which is defined as, "Intentionally giving false or misleading statements, or intentionally misrepresenting or omitting material information to a supervisor or other person in a position of authority in connection with any investigation or in the reporting of any department-related business, which occurred on or off-duty, shall not be tolerated."

During the onsite phase of the audit, the auditor interviewed the human resources director. The director confirmed that the agency may terminate any employee for false information provided during the application process or omissions of fact of any information, including sexual abuse and sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.17(h). During the onsite phase of the audit, the auditor interviewed the human resources director. The director confirmed that the agency would report substantiated allegations of sexual abuse or sexual harassment directly to the Florida Department of Law Enforcement (FDLE) as required. This would then become available to potential new employers during their pre-employment review process.

	<p>The PBSO would also provide this information to those potential employers during the review. She told the auditor there was no Florida state law that prevented the sharing of such information. The director stated that they would not want an individual who had already participated in such activities to have access to incarcerated individuals in another facility. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>The following evidence was analyzed in making the compliance determination:</p> <ul style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ul style="list-style-type: none"> 1. None 2. Interviews: <ul style="list-style-type: none"> 1. Agency head <p>Findings (by provision):</p> <p>115.18(a). In the PAQ, the agency stated there have been several modifications at the Main Detention Center. These modifications include additional camera monitoring in the administrative building, wiring for camera monitoring throughout the facility, and the addition of new control panels throughout the facility.</p> <p>During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel stated that the PBSO and the County continually review potential changes that may be needed for the Main Detention Center. All changes, modifications, and upgrades to the institution are based on the expected need and the available funding. All modifications must take into account proper line of sight, ensuring that new construction does not create blind spots, and ensuring new construction will not inhibit an inmate’s ability to benefit from all aspects of PREA. The current upgrades are leading toward a new electronic monitoring system. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.18(b). In the PAQ, the agency stated there have been several modifications at the Main Detention Center. These modifications include additional camera monitoring in the administrative building, wiring for camera monitoring throughout the facility, and the addition of new control panels throughout the facility.</p> <p>During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel confirmed the addition of new cameras in the administrative building and that current construction and modifications are leading toward a full upgrade of the agency’s video monitoring system. This system will provide an</p>

	<p>enhancement to the agency’s ability to monitor the safety of staff and incarcerated individuals and to increase the agency’s ability to respond promptly to situations such as assaults or sexual victimization. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Amended Partnership Agreement - Palm Beach County Sheriff’s Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services</i> 3. <i>PREA Victim Advocacy Brochure</i> 4. <i>Sexual Abuse Investigation Files</i> 2. Interviews: <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. Specialized staff 3. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Health services <p>Findings (by provision):</p> <p>115.21(a). In the PAQ, the agency stated that all investigations within the Main Detention Center are conducted by the PBSO Violent Crimes Division. Three (3) detectives from the Violent Crimes Division (VCD) are assigned to work within the Main Detention Center. They investigate all events inside the facility that may involve the violation of state law and potential criminal offenses. The PBSO Internal Affairs Division investigates allegations of potential staff misconduct. The agency indicated in the PAQ that all investigations are conducted utilizing the agency’s evidence protocol for the protection of and collection of all noticeable evidence.</p> <p>During the onsite phase of the audit, the auditor completed random staff interviews with 18 deputies and supervisors. All 18 staff members interviewed knew that the criminal and administrative investigations were conducted by the Violent Crimes Division. All 18 staff members also knew that evidence was collected by these investigative bodies under a standard protocol, and deputies are responsible for protecting the crime scene to preserve the evidence until it could be collected. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.21(b). In the PAQ, the agency stated that all investigations within the Main Detention Center are conducted by the PBSO Violent Crimes Division. All sexual assault investigations that lead to the need for a forensic medical examination are conducted at a local hospital emergency room through a partnership with the Palm Beach County Victim Services. Their protocols and training of the forensic nurses are compliant with all current guidelines for evidence collection. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(c). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Any inmate reporting sexual assault/abuse during their present incarceration is provided with a medical evaluation and necessary treatment by a qualified health care professional utilizing the sexual assault (Sexual Assault Nurse Examiner-SANE/Sexual Assault Forensic Examiner-SAFE) protocol." The auditor was provided a copy of the *Amended Partnership Agreement - Palm Beach County Sheriff's Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services* in the PAQ. The agreement includes a provision to provide services for victims of sexual abuse at the Main Detention Center at no cost. The agreement states that Victim Services agrees to, "Provide advocacy services to inmates detained at the PBSO Corrections facilities at no cost to the victim or PBSO." The agreement also provides for examination services as such, "Examinations shall be performed by Forensic Nurses when possible. If Forensic Nurses cannot be made available, the examination can be performed by other qualified medical practitioner." In the PAQ, the agency stated there was one (1) forensic examination performed for an incarcerated victim during the 12 months prior to the audit.

During the onsite phase of the audit, the auditor conducted a telephone interview with the program manager at the Palm Beach Victim Services. The program manager confirmed the status of the agreement with the PBSO. She stated that Victim Services provides victim advocates to answer the 24-hour response hotline at their agency. They also provide advocates to attend during the forensic examination at the local hospital emergency room. When asked, the program manager stated that there would never be a time that an advocate would not be available. The program manager also confirmed that all services would be provided to the incarcerated victim at no cost. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(d). The auditor was provided a copy of the *Amended Partnership Agreement - Palm Beach County Sheriff's Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services* in the PAQ. The agreement includes a provision to provide services for victims of sexual abuse at the Main Detention Center at no cost. The agreement states that Victim Services agrees to, "Provide advocacy services to inmates detained at the PBSO Corrections facilities at no cost to the victim or PBSO." Palm Beach Victim Services is certified with the Florida Council Against Sexual Abuse (FCASV) as a certified rape crisis center in the State of Florida.

During the onsite phase of the audit, the auditor conducted a telephone interview

with the program manager at the Palm Beach Victim Services. The program manager confirmed the status of the agreement with the PBSO. She stated that Victim Services provides victim advocates to answer the 24-hour response hotline at their agency. They also provide advocates to attend during the forensic examination at the local hospital emergency room. When asked, the program manager stated that there would never be a time that an advocate would not be available. The program manager also confirmed that all services would be provided to the incarcerated victim at no cost. The program manager also confirmed that advocates with Palm Beach Victim Services are available 24 hours a day and will always be available to provide services for incarcerated victims at the PBSO detention facilities. The auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment over the last 12 months. All four incarcerated individuals told the auditor they knew that victim advocates were available to them. They all declined to speak to an advocate. The staff at the facility told them about the advocate and the information was provided to them in the inmate handbook and in a brochure about sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(e). The auditor was provided a copy of the *Amended Partnership Agreement - Palm Beach County Sheriff's Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services* in the PAQ. The agreement includes a provision to provide services for victims of sexual abuse at the Main Detention Center at no cost. The agreement states that Victim Services agrees to, "Provide advocacy services to inmates detained at the PBSO Corrections facilities at no cost to the victim or PBSO. Provide follow up services and crisis intervention to victims of sexual abuse / assault / harassment at PBSO, as resources allow."

During the onsite phase of the audit, the auditor interviewed the PREA Compliance Manager. She stated that PBSO has access to victim advocates through Palm Beach Victim Services. Incarcerated individuals are informed of the available advocates through signage in the facility and through the inmate handbook. The auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment over the last 12 months. All four incarcerated individuals told the auditor they knew that victim advocates were available to them. They all declined to speak to an advocate. The staff at the facility told them about the advocate and the information was provided to them in the inmate handbook and in a brochure about sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.21(f). Since the criminal and administrative investigations of sexual abuse and sexual harassment for the PBSO are performed by detectives at the PBSO, the agency has actively communicated with sexual abuse investigators from their agency to confirm their understanding of the requirements of this standard. The agency has confirmed they will meet these standards and communicate with the Department of Corrections to provide adequate documentation of such.

The auditor reviewed multiple sexual abuse and sexual harassment investigative files during the onsite phase of the audit. There was one (1) investigation that required a

	<p>forensic medical examination. The auditor was able to see the proper steps taken by the investigating agency to meet the provisions of this standard, including transporting the inmate victim to the emergency room and providing a victim advocate. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.21(g). The auditor is not required to review this provision.</p> <p>115.21(h). The agency has a agreement with Palm Beach Victim Services to provide victim advocacy services for incarcerated victims at the PBSO facilities. With this agreement in place, it is not necessary to utilize staff members to provide victim advocate services. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head 2. Specialized staff <p>Findings (by provision):</p> <p>115.22(a). In the PAQ, the agency provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, "PBSO conducts its investigation into allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively for all such allegations, including third-party and anonymous reports." The auditor was also provided <i>PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility</i> in the PAQ. The procedure states, "If the incident involves allegations of sexual abuse and/or harassment, an investigation will begin under the guidelines of the Prison Rape Elimination Act (PREA)." In the PAQ, the agency stated there were a total of 30 sexual abuse and sexual harassment investigations at the Main Detention Center over the last 12 months.</p> <p>During the onsite phase of the audit, the auditor reviewed the agency's incident reports and grievances from the previous 12 months. The auditor could not find any</p>

reports or grievances related to sexual abuse or sexual harassment that were not investigated properly. The auditor also reviewed the sexual abuse and sexual harassment investigations from the previous 12 months and noted 30 allegations of sexual abuse or sexual harassment that were investigated properly. The auditor interviewed the Colonel, the Agency Head, who confirmed that all allegations of sexual abuse and sexual harassment are investigated by detectives of the PBSO Violent Crimes Division. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.22(b). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "In the event a call to Central Control is received from the Rape Crisis Hotline, a corrections supervisor will be notified and return the Rape Crisis hotline operator's call as soon as possible. A preliminary investigation will be conducted to ascertain the validity of the complaint. Appropriate steps will be taken by the supervisor to maintain the alleged caller's confidentiality. The investigating supervisor may close the case as unfounded based on their findings, or refer it to Corrections Investigations through VCD as warranted and send the alleged victim to the ER for immediate care." The auditor was also provided *PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility* in the PAQ. The procedure states, "If the incident involves allegations of sexual abuse and/or harassment, an investigation will begin under the guidelines of the Prison Rape Elimination Act (PREA)."

During the onsite phase of the audit, the auditor interviewed a detective with the PBSO Violent Crimes Division. The detective told the auditor that he is assigned to investigate allegations of potential criminal misconduct at the PBSO Department of Corrections. He confirmed that agency policy requires that all allegations of sexual abuse and sexual harassment are referred immediately to the PBSO Violent Crimes Division for investigation. The auditor reviewed the Palm Beach County Sheriff's Office Department of Corrections web page, and under the tab for Prison Rape Elimination Act, the agency lists the agency's zero-tolerance information and provides the public an opportunity to file an allegation of sexual abuse or sexual harassment directly to the PBSO or through the 24-hour rape crisis hotline. The agency's PREA policy is also posted. The information can be found here: **Prison Rape Elimination Act (PREA) - Palm Beach County Sheriff's Office**. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.22(c). All criminal investigations at the PBSO Department of Corrections are carried out by detectives from the PBSO Violent Crimes Division. No outside agency is asked to take part in that process, so there is nothing posted on the agency's website regarding use of or partnership with an outside agency. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.22(d). The auditor is not required to audit this provision.

115.22(e). The auditor is not required to audit this provision.

115.31	Employee training
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <hr/> <p data-bbox="256 344 1267 412">The following evidence was analyzed in making the compliance determination:</p> <ul style="list-style-type: none"> <li data-bbox="320 490 1214 524">1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ul style="list-style-type: none"> <li data-bbox="424 528 1171 562">1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> <li data-bbox="424 566 762 600">2. Training curriculum <li data-bbox="424 604 671 638">3. Training logs <li data-bbox="320 651 539 685">2. Interviews: <ul style="list-style-type: none"> <li data-bbox="424 689 683 723">1. Random staff <p data-bbox="256 768 639 801">Findings (by provision):</p> <p data-bbox="256 835 1474 1585">115.31(a). In the PAQ, the agency provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, "Training: All PBSO staff members, contractors, vendors, and volunteers, or any other person working in PBSO Detention Facilities shall receive orientation, annual training thereafter, and updates as they become available on the Prison Rape Elimination Act of 2003 (PREA) which includes: Information on sexual assault/abuse awareness, Harassment, Prevention, Response, Reporting procedures, Confidentiality requirements, The dynamics of sexual abuse and sexual harassment in confinement, The common reactions to sexual abuse and sexual harassment, How to detect and respond to signs of threatened and actual sexual abuse, How to avoid inappropriate relationships with inmates, How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates." The auditor was provided the Department's training curriculum in the PAQ. The auditor reviewed the curriculum and verified the appearance of the ten (10) required points of the standard. The training material is presented in a manner that all staff members can understand, and the agency utilizes a test at the end of the course to measure understanding. The education is presented both in the classroom and computer-based training.</p> <p data-bbox="256 1619 1474 2033">During the onsite phase of the audit, the auditor interviewed 18 random staff members and spoke informally with several staff members. Each person interviewed indicated that they received PREA education prior to beginning work in the secure facility or had received it when the first PREA education was provided by the agency. All deputies and supervisors interviewed verified the ten points of this standard in the agency training. The auditor was told that they get PREA training as part of their annual training. The auditor reviewed training records for ten (10) randomly selected deputies and verified attendance in the training and written proof of completion of the PREA course. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.31(b). The agency training curriculum related to PREA is consistent for all corrections staff that work in the PBSO corrections facilities. The agency provides gender specific information in the general training curriculum that informs staff members of differences in gender within the incarcerated population. The agency noted in the PAQ, “Both of our facilities house male and female incarcerated individuals and employ male and female deputies. No additional training is needed, and deputies receive PREA orientation at hire and annual training, as well as training bulletins and power point presentations throughout each year. Employee posters and brochures are available at information stations in all employee areas and entrances.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.31(c). The agency provides training annually for all staff members. The agency noted in the PAQ, “Annually, the PREA and Transgender policies are reviewed and acknowledged in Power DMS by all staff. These policies are reviewed by command staff on an annual basis for updates. In addition, nine (9) short power point presentations are provided and acknowledged by electronic signature throughout the year.” The auditor reviewed training records and determined that all current staff members have received PREA education. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.31(d). All classroom training and online classes require staff to acknowledge, in writing or electronically, they understand and will comply with the training on PREA. The PREA course includes a test to confirm the staff members’ understanding of the information provided.

The auditor reviewed random training records during the onsite phase of the audit. The records show acknowledgement of completion of the PREA training on an annual basis. Records show full completion of the training by staff. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. Training curriculum 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p>

115.32(a). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Training: All PBSO staff members, contractors, vendors, and volunteers, or any other person working in PBSO Detention Facilities shall receive orientation, annual training thereafter, and updates as they become available on the Prison Rape Elimination Act of 2003 (PREA) which includes:

Information on sexual assault/abuse awareness, Harassment, Prevention, Response, Reporting procedures, Confidentiality requirements, The dynamics of sexual abuse and sexual harassment in confinement, The common reactions to sexual abuse and sexual harassment, How to detect and respond to signs of threatened and actual sexual abuse, How to avoid inappropriate relationships with inmates, How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender-nonconforming inmates." In the PAQ, the agency indicated that 39 approved volunteers and 330 approved contractors have been educated on the PREA policies over the last 12 months.

During the onsite phase of the audit, the auditor interviewed five contractors who have inmate contact in the facility. The auditor interviewed one (1) contractor from Trinity, the food services contractor, one contractor from Keefe, the commissary contractor, and three (3) contractors from Wellpath, the health services contractor. All five confirmed completion of the required PREA education provided by the agency. This education is a requirement to work inside the corrections facility and is provided for all contractors that work within their respective departments. The agency requires annual training and is documented. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.32(b). In the PAQ, the agency provided this statement, "All contractors and volunteers receive the same PREA fundamentals and PBSO policy on sexual assault and sexual harassment. Medical and mental health contractors receive additional specialized education due to their job description." The agency provides the full training curriculum regarding the agency's zero-tolerance policy that all staff members received. The curriculum appears to be appropriate for the level of contact with incarcerated individuals.

During the onsite phase of the audit, the auditor interviewed five contractors who have inmate contact in the facility. The auditor interviewed one (1) contractor from Trinity, the food services contractor, one contractor from Keefe, the commissary contractor, and three (3) contractors from Wellpath, the health services contractor. All five confirmed completion of the required PREA education provided by the agency. This education is a requirement to work inside the corrections facility and is provided for all contractors that work within their respective departments. The agency requires annual training and is documented. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.32(c). The auditor was provided copies of training class attendance and signed acknowledgement forms. The auditor was able to confirm attendance and completion of training by all contractors and volunteers. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33**Inmate education**

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. *PBSO COP 932.05 Interpreters and Related Services*
 3. *PBSO COP 927.05 Access to Programs and Services for Assisting Inmates with Disabilities*
 4. *PBSO Inmate Handbook*
2. Interviews:
 1. Specialized staff
 2. Random staff
 3. Random incarcerated individuals
3. Site Review Observations:
 1. Housing units
 2. Intake

Findings (by provision):

115.33(a). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Written information is provided to every inmate in the Inmate Handbook on sexual abuse/assault/harassment to include: a. Prevention, self-protection, and intervention of potential sexual abuse/ assault/ harassment. b. Reporting methods in the event of sexual abuse/assault/harassment: It is the responsibility of the individual to report any sexual abuse/assault/ harassment, potential vulnerabilities, or tendencies of acting out with sexually aggressive behavior to any staff member. c. Treatment and counseling." All incarcerated individuals receive and sign for PREA training at intake. The *Inmate Orientation Video* and *National Institute of Corrections (NIC) PREA Video* are shown facility-wide daily. Additional PREA information is available on the kiosk in the housing units, in the *Inmate Handbook*, the Victim Services brochure, and on posters in every housing unit, which are posted in three languages. In the PAQ, the agency stated that of the 23,390 incarcerated individuals who were admitted to the facility during the past 12 months, all 23,390 individuals have received intake education.

During the onsite phase of the audit, the auditor toured the intake booking floor and walked through the process for the intake of a newly arrested incarcerated individual. The auditor watched the intake process for two (2) individuals and witnessed the process of visual body searches (performed by a female deputy with a female individual and a male deputy with a male individual), intake initial PREA screening, photographs and fingerprints, and initial PREA screening by classification staff. The auditor observed the PREA screening process and the delivery of the initial PREA

education for both incarcerated individuals. The individuals received a copy of the *PBSO Inmate Handbook*, and the classification officer provided an initial description of the agency's zero-tolerance policy. The individuals were provided an opportunity to sit in chairs in the intake area, where they watched the *Inmate Orientation Video* on screens available on the booking floor. The auditor interviewed 22 random incarcerated individuals during the onsite audit. They all described receiving education about PREA when they arrived at the facility. All 22 incarcerated individuals could easily describe the zero-tolerance policy, know what behavior was prohibited, and know how to report sexual abuse. The auditor interviewed two intake staff members, and they confirmed performing the initial PREA screening questions with individuals and classification providing the intake handout to all incarcerated individuals during their PREA screening. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(b). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "The Inmate Orientation video is also viewed by each inmate. These viewings are documented on the chronological." The individuals are provided an opportunity to watch the video on the booking floor in intake and on screens in the orientation housing units. The video plays daily on the screens in the housing units during the individuals' orientation. Additional PREA training is also provided to the individuals during their classification screening. The agency stated there were 4,368 incarcerated individuals admitted to the facility whose length of stay was 30 days or more who had received the comprehensive education.

During the onsite phase of the audit, the auditor interviewed two (2) intake staff members. They both confirmed written documentation and a video to provide education to the incarcerated individuals to ensure that all incarcerated individuals properly receive the PREA education. The auditor interviewed 22 random incarcerated individuals during the onsite phase of the audit. All 22 incarcerated individuals confirmed receiving the PREA education and could answer all the questions about zero tolerance and how to get assistance if it was needed. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(c). The facility provides all incarcerated individuals with education regarding PREA at intake and during orientation. The auditor interviewed intake staff during the onsite audit and walked through the intake process. The orientation process and PREA education are provided for all incarcerated individuals. All incarcerated individuals have been education routinely since 2013. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(d). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Visually impaired or illiterate inmates will receive information verbally, in a language they understand. Video and written information is available in three languages, as well as translation provided by translation services." The auditor was provided with *PBSO COP 932.05 Interpreters and Related Services*. The procedure states, "Additional languages for translation will be identified through consultation with representatives of the LEP community, organizations representing LEP inmates and detainees, and the school district. In order to ensure that all

inmates and members of the public are aware that language services are provided, the English and translated versions will be posted in appropriate areas throughout all DOC facilities and printed in materials provided to detainees during the intake process.” The auditor was also provided with *PBSO COP 927.05 Access to Programs and Services for Assisting Inmates with Disabilities*. The procedure states, “The Palm Beach County Sheriff’s Office Department of Corrections affords equal access for all inmates to facility programs and services, except when justified for the order of the facility, and the safety of the staff, inmates, and visitors. There is no discrimination on the basis of race, sex, national origin, religion, political view, or disability. PBSO Department of Corrections abides by the provisions of the Americans with Disabilities Act of 1990 (ADA). Upon admission to the facility, a classification officer conducts an interview to determine any special accommodations or needs.”

In the PAQ, the auditor was provided several documents in other languages that provide the agency’s zero-tolerance policy for those incarcerated individuals that do not speak, read, or write English or Spanish. The Department can provide education to incarcerated individuals using the Language Line services, by using an American Sign Language interpreter, or by using a staff interpreter. Staff can also read the information directly to an inmate if they are unable to read.

During the onsite phase of the audit, the auditor could see posters in each of the housing units and in several other locations that were provided in English, Spanish, and Creole. The posters inform incarcerated individuals of their right to be free from sexual abuse and sexual harassment, free from retaliation for reporting abuse and that the agency would properly respond to incidents of such abuse. Also, the *PBSO Inmate Handbook* is available to incarcerated individuals in two (2) languages. The auditor reviewed documentation under standard 115.16 to verify the various methods available to provide inmate education. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(e). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “The Inmate Orientation video is also viewed by each inmate. These viewings are documented on the chronological.” The auditor reviewed several documents and confirmed the incarcerated individuals’ receipt of the education. This information is also maintained in the corrections management system. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.33(f). During the site review, the auditor could see many forms of PREA education readily available for incarcerated individuals. In all housing units there are signs posted in English, Spanish, and Creole. These signs remind incarcerated individuals that sexual abuse is not tolerated and provide the hotline number, as well as the information for available counseling services. The incarcerated individuals are also provided with an *Inmate Handbook*, where the Department’s sexual abuse policy is documented and have full access to the kiosk in the housing units, where they easily access the education. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.34 Specialized training: Investigations

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

- 1. Documents: (*Policies, directives, forms, files, records, etc.*)
 - 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 - 2. *PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility*
 - 3. *Investigating Sexual Abuse in Confinement Settings - Florida Sheriff's Association*
 - 4. Training certificates
- 2. Interviews:
 - 1. Specialized staff

Findings (by provision):

115.34(a). In the PAQ, the facility provided *PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility*. The procedure states, "Investigators used in an alleged sexual abuse investigation have received specialized training in sexual abuse in compliance with PREA standards." The facility also provided training curriculum entitled, *Investigating Sexual Abuse in Confinement Settings* in the PAQ. The training curriculum is provided by the Florida Sheriff's Association (FSA) and is well known to the auditor. The curriculum is based on information readily available through the National PREA Resource Center and includes information vetted through The Moss Group. The curriculum includes the information required in this provision of the Standard.

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO Violent Crimes Division, who is assigned to perform investigations inside the PBSO corrections facilities. The detective confirmed attending the investigations specialized class provided through the FSA and had successfully received his certificate. The detective was able to recite the four (4) points from this provision and told the auditor it was included in the training. The auditor reviewed provided training certificates for the three (3) detectives from the VCD that are assigned to work at the Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.34(b). The facility provided training curriculum entitled, *Investigating Sexual Abuse in Confinement Settings* in the PAQ. The training curriculum is provided by the Florida Sheriff's Association (FSA) and is well known to the auditor. The curriculum is based on information readily available through the National PREA Resource Center and includes information vetted through The Moss Group. The curriculum includes the information required in this provision of the Standard.

	<p>During the onsite phase of the audit, the auditor interviewed a detective from the PBSO Violent Crimes Division, who is assigned to perform investigations inside the PBSO corrections facilities. The detective confirmed attending the investigations specialized class provided through the FSA and had successfully received his certificate. The detective was able to recite the four (4) points from this provision and told the auditor it was included in the training. The auditor reviewed provided training certificates for the three (3) detectives from the VCD that are assigned to work at the Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.34(c). The agency maintains documentation showing completion of the investigations course for the three (3) detectives from the VCD that are assigned to work at the Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.34(d). The auditor is not required to audit this provision.</p>
--	---

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Training Curriculum - PREA Training for Contractors, Volunteers, Medical and Mental Health Practitioners</i> 3. <i>PREA Compliance Acknowledgement forms</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff <p>Findings (by provision):</p> <p>115.35(a). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, "All PBSO staff members, contractors, vendors, and volunteers, or any other person working in PBSO Detention Facilities shall receive orientation, annual training thereafter, and updates as they become available on the Prison Rape Elimination Act of 2003 (PREA) which includes...". The procedure goes on to list the required points in the training curriculum. The agency indicated in the PAQ that 197 medical and mental health staff members are approved for work at the facility, and they all have completed the PREA education.</p> <p>During the onsite phase of the audit, the auditor interviewed three (3) staff members</p>

from Wellpath, the contracted medical and mental health provider for PBSO. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed having taken the online specialized medical course as well as the required basic PREA education. They acknowledged understanding the four (4) points of the standard that were included in the training. During these interviews, the auditor learned that Wellpath requires their staff to complete annual PREA education in addition to any training and education available through the PBSO. This education includes how to avoid misconduct with incarcerated individuals, observations of potential sexual abuse, and how to respond to allegations of sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(b). Medical staff at the Main Detention Center do not perform forensic examinations. All forensic medical examinations would be performed by certified staff at a local emergency room. Therefore, the facility medical staff do not receive training related to these exams. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(c). The Department maintains written documentation of each staff member's completion of the specialized medical course and provided proof to the auditor for review. The auditor reviewed several signed PREA Compliance Acknowledgement forms and determined proper course completion for members of the contracted medical and mental health provider. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.35(d). The medical and mental health care staff for the PBSO Department of Corrections are employed through the contracted healthcare provider, Wellpath. All staff are required to complete the basic orientation and annual education, just like all other staff members as noted in the main PREA policy. Based on this analysis, the auditor finds the facility in compliance with this provision.

The auditor held interviews with several members of the Wellpath team during the onsite phase of the audit. The auditor was impressed with the level of knowledge regarding PREA by all contracted members of the Wellpath team. They are deeply involved in the agency's sexual abuse prevention and detection techniques, including assisting with the identification of potential retaliation for victims and those involved in sexual abuse investigations. The requirement for staff members to complete PREA education through their contractor and through PBSO goes over and above the basic requirements. Therefore, the auditor considers the agency to have exceeded this Standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance

determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. *PREA Screening*
 3. *Classification Prescreening*
2. Interviews:
 1. Specialized staff
 2. Random incarcerated individuals
3. Site Review Observations:
 1. Intake/Booking
 2. Classification

Findings (by provision):

115.41(a). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Inmates are screened within 24 hours of arrival at the facility using an objective screening instrument."

During the onsite phase of the audit, the auditor interviewed the training corporal in classification who confirmed that all incarcerated individuals are screened upon admission to the Main Detention Center. The auditor was present for the intake initial screening for the risk of victimization or potential to be a predator with two (2) newly arrested individuals. Both were initially screening by the corporal in the intake sally port. This initial screening covers some of the victimization questions. The classification corporal then met with the incarcerated individuals to complete additional screening questions. The remaining screening questions are asked by a nurse at intake. The auditor was present for the screening and observed the nurse ask all the questions on the *PREA Screening* with relative ease. The nurse asked all of the questions clearly and completely. The nurse had no problem asking the private and personal questions, providing the appearance for the auditor that performing the screening and asking the questions is a normal part of the process. The auditor asked the nurse several questions to confirm that the process is routine and was satisfied based on the responses and how the screening was performed that the intake screening is a normal and routine part of the intake process for incarcerated individuals. The information from the initial screening, the classification screening, and the full medical assessment are all sent directly to classification, where the results are placed into the *Classification Prescreening*. This prescreening is then completed by classification officers. It is the agency's full screening tool for the risk of victimization or the potential to be a predator. The auditor interviewed 22 random incarcerated individuals during the onsite audit. All 22 incarcerated individuals confirmed that they had been asked the screening questions. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(b). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Inmates are screened within 24 hours of arrival at the facility using an objective screening instrument." In the PAQ, the agency stated

that 9,934 incarcerated individuals were admitted to the institution within the past 12 months whose length of stay was at least 72 hours and all 9,934 incarcerated individuals had been screened by classification and health services.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification who confirmed that all incarcerated individuals are screened upon admission to the Main Detention Center. The screening is completed while the individual is being processed at intake. All individuals have the initial screening completed on their first day, which is within the required 72 hours. The auditor was provided screening documents for ten (10) randomly selected individuals, and the auditor was able to confirm in these records that the screening for each individual was completed on their date of arrival at the Main Detention Center. The auditor also interviewed 22 random incarcerated individuals during the onsite audit. All 22 incarcerated individuals confirmed that they had been asked the screening questions at intake. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(c). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Inmates are screened within 24 hours of arrival at the facility using an objective screening instrument." The auditor was provided a copy of the *Classification Prescreening* in the PAQ. This document is a compilation of the information taken from the incarcerated individual at intake and completed by the classification officer. The document lists the required questions to accurately complete the full screening for the risk of victimization or potential to be a predator. The screening requires a simple yes or no response to each question and includes a scoring system based on the yes response to each question. The document provides the scoring system key, where the accumulated points to the yes responses attaches to an indicator for potential victim, victim, potential sexual aggressor, or sexual aggressor. The scoring system is clearly stated and consistent for all individuals, which makes the screening tool objective. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(d). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Intake screening shall consider at a minimum, criteria to assess inmates for risk of sexual victimization: a. Age and physical build of the inmate. b. Whether the inmate has a mental, physical, or developmental disability. c. Previous incarceration, criminal history, or previous convictions for sex offenses against adult or child. d. Current charges or current detention solely for civil immigration purposes. e. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming and the inmate's perception of vulnerability. f. Whether the inmate has previously experienced sexual victimization. g. Prior acts of sexual abuse, prior violent offense conviction, and history of prior institutional physical or sexual violence. h. Whether the inmate's criminal history is exclusively nonviolent." The auditor was provided a copy of the *Classification Prescreening* in the PAQ. This document is a compilation of the information taken from the incarcerated individual at intake and completed by the classification officer. The document lists the required questions to accurately complete the full screening for the risk of victimization or potential to be a predator.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. The corporal explained that the questions on the *Classification Prescreening* are in line with the requirements in the PREA Standard. Staff speak directly with the incarcerated individual to complete the screening tool and ask all the questions to obtain the best information possible. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(e). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Intake screening shall consider at a minimum, criteria to assess inmates for risk of sexual victimization: a. Age and physical build of the inmate. b. Whether the inmate has a mental, physical, or developmental disability. c. Previous incarceration, criminal history, or previous convictions for sex offenses against adult or child. d. Current charges or current detention solely for civil immigration purposes. e. Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming and the inmate's perception of vulnerability. f. Whether the inmate has previously experienced sexual victimization. g. Prior acts of sexual abuse, prior violent offense conviction, and history of prior institutional physical or sexual violence. h. Whether the inmate's criminal history is exclusively nonviolent." The auditor was provided a copy of the *Classification Prescreening* in the PAQ. This document is a compilation of the information taken from the incarcerated individual at intake and completed by the classification officer. The document lists the required questions to accurately complete the full screening for the risk of victimization or potential to be a predator.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. The corporal explained that the questions on the *Classification Prescreening* are in line with the requirements in the PREA Standard. Staff speak directly with the incarcerated individual to complete the screening tool and ask all the questions to obtain the best information possible. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(f). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Within 30 (thirty) days of an inmate's incarceration, the inmate's risk of victimization or abusiveness is reassessed by Classification based on any new relevant information received since the initial intake screening." In the PAQ, the agency stated there were 4,368 individuals received at the facility whose length of stay was 30 days or more. All 4,368 individuals were rescreening by the classification staff.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. The corporal explained that incarcerated individuals are reassessed within 30 days from the initial booking date. She stated that the reassessment is completed within 72 hours of their arrival in the facility. The incarcerated individuals receive the full reassessment by classification while they are housed in the orientation unit. Classification also conducts continuous reviews throughout their incarceration based on any new information, such as incident reports, sexual abuse allegations, and discipline reports. Weekly segregation meetings address any issues with segregated or problematic incarcerated individuals, leading to the appropriate

housing adjustments where the individual can be housed in the safest way possible. The auditor reviewed records for ten (10) incarcerated individuals and confirmed the reassessment was completed within 30 days of the individual's arrival at the facility. The auditor interviewed 22 random incarcerated individuals, and all 22 individuals confirmed meeting with classification for the rescreening. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(g). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "An inmate's risk level will be reassessed when warranted due to referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness."

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. She stated that incarcerated individuals receive the full reassessment by classification while they are housed in the orientation unit. Classification also conducts continuous reviews throughout their incarceration based on any new information, such as incident reports, sexual abuse allegations, and discipline reports. Weekly segregation meetings address any issues with segregated or problematic incarcerated individuals, leading to the appropriate housing adjustments where the individual can be housed in the safest way possible. The auditor interviewed 22 random incarcerated individuals, and all 22 individuals confirmed meeting with classification for the rescreening. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(h). The agency supplied *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Inmates will not be disciplined for refusing to answer, or not disclosing complete information asked during the initial screening."

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. She stated that incarcerated individuals will not be disciplined if they refuse to answer questions or decide not to disclose information during the risk screening. Agency policy does not allow that, and it is the individual's decision not to disclose the information. The corporal stated that some individuals may not understand why the questions are asked and they certainly may attempt to hide information based on that fact. The auditor was told that staff will attempt to encourage the individual to answer the questions by reminding the individual that the information is used to keep them safe. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.41(i). The agency has taken specific steps to safeguard the risk screening information. The information is maintained only on the computer and accessible only by classification staff after the information is submitted by intake and health services.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. She stated that only classification staff can access the risk screening information on the computer. Without a classification logon, you cannot access the information. The PREA Compliance Manager was interviewed, and she stated that screening information is accessible by classification staff only, but indicators for

	<p>victimization or predation can be viewed by all security staff members. That outcome is available, but not the private information that leads to that determination. The auditor also interviewed the PREA Coordinator, who stated that the vulnerability screening is on the computer and only accessed by classification. During the site review, the auditor asked several random deputies to access the screening, and they were unable to access it. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims Response</i> 2. <i>PBSO COP 920.00 Inmate Classification Process</i> 3. <i>PBSO COP 920.01 Transgender Housing</i> 4. <i>Classification Prescreening</i> 5. Screening examples 2. Interviews: <ol style="list-style-type: none"> 1. PREA Compliance Manager 2. Specialized staff 3. Targeted incarcerated individuals <p>Findings (by provision):</p> <p>115.42(a). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Information collected at Intake will be utilized in the decision of appropriate housing placement, taking into consideration potential vulnerabilities or sexual victimization as well as sexually aggressive or assaultive behavior.” The agency provided copies of risk screening results for several incarcerated individuals in the PAQ. The auditor was able to see the factors from the risk screening utilized to keep separate incarcerated individuals that score as vulnerable from those that score as potential abusers.</p> <p>During the onsite phase of the audit, the auditor interviewed the PREA Compliance Manager, who was asked how the agency utilizes the information from the risk screening. She stated that the scoring for risk of victimization and risk of being abusive is entered into the classification system and that provides coding for victimization or abusiveness to ensure separation when placing incarcerated individuals into housing units or work placements or programs. This ensures the required separation for safety. The auditor also interviewed the training corporal in</p>

classification. She also confirmed the use of the screening information to properly house those incarcerated individuals at risk of victimization separate from those with a potential to be abusive. These housing decisions are made on an individual basis and are based on the risk screening scoring system. This separation affects not only where the individual is housed, but also the jobs and programs that are assigned to the individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(b). In the PAQ, the facility provided *PBSO COP 920.00 Inmate Classification Process*. The procedure states, “Each facility may have a designated classification employee. The primary objective of classification is to place inmates in the type of housing that best meets their needs, and to provide reasonable protection for all inmates. Insofar as the facility permits, no inmate shall be subjected to more restrictive conditions of confinement and out-of-cell time than is justified by the inmate’s classification. Based on responses and other initial information to these questions, individualized determinations on appropriate safe housing are made. The agency provided copies of risk screening results for several incarcerated individuals in the PAQ. The auditor was able to see the factors from the risk screening utilized to keep separate incarcerated individuals that score as vulnerable from those that score as potential abusers.

During the onsite phase of the audit, the auditor interviewed the training corporal in classification. She confirmed the use of the screening information to properly house those incarcerated individuals at risk of victimization separate from those with a potential to be abusive. These housing decisions are made on an individual basis and are based on the risk screening scoring system. This separation affects not only where the individual is housed, but also the jobs and programs that are assigned to the individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.42(c). This provision is not applicable.

115.42(d). This provision is not applicable.

115.42(e). This provision is not applicable.

115.42(f). This provision is not applicable.

115.42(g). This provision is not applicable.

115.43	Protective Custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance

determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims Response*
 2. *PBSO COP 918.00 Special Management Units*
2. Interviews:
 1. Agency Head
 2. Specialized staff
 3. Targeted incarcerated individuals
3. Site Review Observations:
 1. Segregated housing units

Findings (by provision):

115.43(a). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Inmates at high risk for sexual victimization shall only be placed in segregated housing after an assessment of all available alternatives has been made, and it has been determined that there are no other alternative available means of separation from likely abusers. Inmates placed in segregated housing for this purpose shall have equal access to all programs and privileges." In the PAQ, the agency stated that there have been no individuals placed in involuntary segregation for less than 48 hours over the previous 12 months as a means to separate them from likely abusers.

During the onsite phase of the audit, the auditor reviewed screening records for several incarcerated individuals who were assessed to be at a high risk for victimization. None of the incarcerated individuals were housed in segregated housing. The auditor interviewed the Colonel, the Agency Head, during the onsite audit. The Colonel stated that involuntary segregation is only used as a means to protect those incarcerated individuals that are at risk for victimization, but only as a last resort when there is no other safe housing available. If segregation is utilized, it would be used for the least time period necessary, until an alternative housing is made available. The agency does place individuals in protective custody for their safety, but only at their request. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(b). In the PAQ, the facility provided *PBSO COP 918.00 Special Management Units*. The procedure states, "Segregation units shall provide living conditions that approximate those of the general inmate population. All exceptions are clearly documented. Inmates in administrative segregation and protective custody receive privileges comparable to those in general population. Inmates in administrative segregation and protective custody have access to programs and services. Whenever an inmate is deprived of any usually authorized item or activity, a report of the action will be made and forwarded to the division commander or designee. Exceptions to these items and activities are permitted only when found necessary by the supervisor on duty, and any exception shall be recorded in the unit logbook or chronological. A copy of the report will be retained in the inmate's classification file. A copy of the

report will also be retained in the unit as long as the restriction applies.”

During the onsite phase of the audit, the auditor walked through administrative and disciplinary segregated housing units. The auditor talked to several incarcerated individuals that were in these units and all incarcerated individuals had full access to the telephone, medical and mental health care, inmate requests, grievance forms, and programs. The only restrictions on programs and on the use of the telephone were based on violations of the agency’s disciplinary rules. The auditor confirmed this information by speaking with deputies that worked in these units. Even though incarcerated individuals were held in confinement, they still had access to the same opportunities and programming as all other incarcerated individuals, as much as possible. This confirmed that if the agency saw the need to confine an individual due to the high risk of victimization, they could still provide the individual with access to programs and privileges consistent with this provision. The auditor interviewed two (2) deputies assigned to segregated housing and they confirmed the access to programming and privileges in confinement. The auditor was unable to interview an individual who was housed in confinement due to their high risk for victimization, as there were no individuals housed in this manner during the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(c). In the PAQ, the facility provided *PBSO COP 918.00 Special Management Units*. The procedure states, “The justification for each inmate placed into segregation will be reviewed within seventy-two (72) hours. Review of the status of each inmate remaining in segregation shall take place every seven (7) days for the first two (2) months and at least every thirty (30) days thereafter. It is the responsibility of the Inmate Management division commander to designate a person or committee to undertake this review which should include an evaluation of the inmate utilizing information from the following sources: a. Medical/psychological profile or pertinent /contributing health information. b. Attitude toward staff and others. c. Ability to function in general population. d. Habitual conduct or language, which may instigate stressful or perhaps violent situations.” In the PAQ, the agency stated that there have been zero incarcerated individuals placed in involuntary segregation more than 30 days over the previous 12 months as a means to separate them from likely abusers.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head, who stated that the facility had not placed any incarcerated individuals in involuntary segregation over the last 12 months. The auditor interviewed two (2) deputies that work in confinement, and they stated that no incarcerated individuals have been housed in confinement due to high risk of victimization. The auditor was unable to interview an individual housed in confinement due to their high risk for victimization, as there were no individuals housed in confinement for that reason during the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(d). In the PAQ, the facility provided *PBSO COP 918.00 Special Management Units*. The procedure states, “Justification for the placement of an inmate into a segregation unit shall be supported by an order of segregation. The authority to

place an inmate into a segregation unit is limited to a classification officer, sergeant level or above. All supporting paperwork is to be submitted to the watch commander by the end of the shift.”

The auditor reviewed records of several incarcerated individuals that were found to be at high risk for sexual victimization. None of these incarcerated individuals was held in segregation during their confinement. Also, through the review of the facility’s sexual abuse allegations, the auditor found that none of the alleged victims were placed in involuntary segregation following the allegation and was not in segregation prior to the incident. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.43(e). In the PAQ, the facility provided *PBSO COP 918.00 Special Management Units*. The procedure states, “The justification for each inmate placed into segregation will be reviewed within seventy-two (72) hours. Review of the status of each inmate remaining in segregation shall take place every seven (7) days for the first two (2) months and at least every thirty (30) days thereafter.”

During the onsite phase of the audit, the auditor interviewed two (2) deputies that work in confinement, and they stated that no incarcerated individuals have been housed in confinement due to high risk of victimization. If there were, however, they would be reviewed every week to continue their confinement. The auditor was unable to interview an individual housed in confinement due to their high risk for victimization, as there were no individuals housed in confinement for that reason during the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 927.02 Inmate Grievance Procedures</i> 3. <i>PBSO COP 927.04 Foreign Nationals Access to Diplomatic Representatives</i> 4. <i>PBSO COP 917.20 Reports of Incidents</i> 5. <i>PBSO Inmate Handbook</i> 6. <i>Staff Brochure - A Guide for the Prevention and Reporting of Sexual Abuse of Offenders</i> 7. <i>Amended Partnership Agreement - Palm Beach County Sheriff's</i>

*Office and the Palm Beach County Board of County Commissioners,
Public Safety Department, Victim Services*

2. Interviews:
 1. PREA Compliance Manager
 2. Random staff
 3. Random incarcerated individuals
3. Site Review Observations:
 1. Housing units

Findings (by provision):

115.51(a). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "PBSO provides multiple ways for inmates to report sexual assault/abuse or harassment. Inmates may report to: 1. Any staff member 2. A clergyman 3. Their attorney or public defender 4. Any medical or mental health staff member 5. Submit a request slip, written correspondence, or grievance 6. Report via third party including fellow inmates, family members, or outside advocates. 7. Call the 24-hour Rape Crisis Hotline." The auditor was also provided a copy of *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ. The procedure states, "An inmate who alleges sexual abuse by a staff member may submit a grievance without submitting it to a staff member who is the subject of the complaint." The auditor was provided a copy of the *PBSO Inmate Handbook* in the PAQ. On pages 37 and 38 of the Handbook, incarcerated individuals are instructed to, "Get to a safe place. Immediately report the attack to any staff member." The Handbook also lists the same reporting avenues that are listed in the procedure.

During the onsite phase of the audit, the auditor completed a site review and visited all housing units. Signs informing incarcerated individuals of the multiple reporting ways were clearly posted, in three (3) languages, in each housing unit. The signs include the multiple ways to report that are listed in the sexual abuse procedure. The auditor interviewed 22 random incarcerated individuals, and all 22 incarcerated individuals could easily tell the auditor several ways that they could report abuse, harassment and concerns regarding staff neglect or lack of responsibility. All 22 incarcerated individuals mentioned the PREA hotline as their first avenue to report abuse. That option is clearly marked by telephones throughout the facility. The auditor interviewed 18 random staff members. All 18 deputies and supervisors could list at least four (4) different ways that incarcerated individuals could report abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51(b). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "PBSO provides multiple ways for inmates to report sexual assault/abuse or harassment. Inmates may report to: 7. Call the 24-hour Rape Crisis Hotline." The auditor was provided a copy of the *PBSO Inmate Handbook* in the PAQ. On page 38 of the Handbook, incarcerated individuals are instructed to, "You may also call the 24/7 Sexual Assault Violent Crime Helpline at no charge on the inmate phone system by first selecting the correct language, then pressing the 'collect' prompt and last by dialing 7777, which will directly connect to Victim

Services SART Center 4210 N. Australian Ave. West Palm Beach, FL 33407.” The information regarding the hotline is readily available to incarcerated individuals on signs posted in each of housing units and in the *Inmate Handbook*. The auditor saw the signs posted during the facility site review. The auditor was provided a copy of the *Amended Partnership Agreement - Palm Beach County Sheriff’s Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services* in the PAQ. This agreement provides for the Palm Beach Victim Services to provide helpline services for the incarcerated individuals at the PBSO Department of Corrections. The auditor was also provided a copy of *PBSO COP 927.04 Foreign Nationals Access to Diplomatic Representatives* in the PAQ. The procedure states, “Pursuant to Federal law, whenever a foreign national is detained in a sheriff’s detention center for any reason, an offer of consular assistance must be extended to each foreign national. Consular notification is only required at the option of the arrestee unless the arrestee is from one of the jurisdictions with which the United States has agreements regarding mandatory notification. When foreign nationals are arrested or detained, they must be advised of the right to have their consular officials notified. In some cases, the nearest consular officials must be notified of the arrest or detention of a foreign national, regardless of the national’s wishes.”

During the onsite phase of the audit, the auditor completed a full site review and located the posted zero-tolerance signs throughout the facility with the reporting number for the outside entity. The posted signs were written in three (3) languages. The auditor interviewed the PREA Compliance Manager and asked about the outside reporting entity. She explained that the agency provides a hotline number for use by the incarcerated individuals which is accessed by dialed a simple 7777 phone number. The information is posted on all the signs and is in the handbook provided to all incarcerated individuals at intake. The auditor interviewed 22 random incarcerated individuals and all 22 knew how to report allegations of sexual abuse through the hotline. They knew that the information was posted on the signs in the housing unit. Based on this analysis, the auditor finds the facility in compliance with this standard.

115.51(c). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “PBSO provides multiple ways for inmates to report sexual assault/abuse or harassment. Inmates may report to: 1. Any staff member 2. A clergyman 3. Their attorney or public defender 4. Any medical or mental health staff member 5. Submit a request slip, written correspondence, or grievance 6. Report via third party including fellow inmates, family members, or outside advocates. 7. Call the 24-hour Rape Crisis Hotline.” The auditor was also provided a copy of *PBSO COP 917.20 Reports of Incidents* in the PAQ. The procedure states, “Written Reports: All reports must be submitted to the watch commander by the end of the shift. 1. Each staff member shall prepare and submit a written Inmate Incident Report for those incidents involving one or more inmates whenever they: a. Witness the incident. b. Take action to correct the incident. c. Take action to prevent the incident from occurring. d. Take post-incident action when they have knowledge an incident has or may have taken place.”

During the onsite phase of the audit, the auditor interviewed 18 random staff members. All 18 deputies and supervisors interviewed were aware of their responsibility to take verbal reports of abuse and immediately contact a supervisor to file that report. The auditor spoke with two (2) deputies who had taken a verbal report of sexual abuse or harassment from an incarcerated individual. Following the verbal report, they completed an incident report as required. The auditor also interviewed 22 random incarcerated individuals. They were all aware that they could report sexual abuse directly to any staff member, call the hotline, write a grievance, or have someone else file a report for them. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.51(d). The auditor was provided a copy of the staff brochure *A Guide for the Prevention and Reporting of Sexual Abuse of Offenders* in the PAQ. In the section entitled *Duty to Report*, staff are advised, “All employees have a duty to report knowledge of any inappropriate relationship between inmates, or with staff to their immediate supervisor through their chain of command immediately!” The auditor was also advised that staff may report to any supervisor, the watch commander, a violent crimes division detective, or through the public rape crisis line. All staff members receive a copy of this staff brochure and should be aware of the information provided.

The auditor interviewed 18 random staff members during the onsite phase of the audit. All 18 deputies and supervisors interviewed explained to the auditor that they could talk to any supervisor to privately report incidents of sexual abuse and sexual harassment or contact a detective. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 927.02 Inmate Grievance Procedures</i> 2. <i>PBSO Inmate Handbook</i> 2. Interviews: <ol style="list-style-type: none"> 1. Targeted incarcerated individuals <p>Findings (by provision):</p> <p>115.52(a). The Palm Beach County Sheriff’s Office Department of Corrections is not exempt from this standard, as it does have in place an administrative grievance</p>

procedure, *PBSO COP 927.02 Inmate Grievance Procedures*, for their incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(b). The agency provided *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ for the auditor to review. This procedure states, “Prison Rape Elimination Act (PREA) Procedures (115.52): 1. There is no imposed time limit when an inmate may submit a grievance regarding an allegation of sexual abuse.” The auditor was provided with a copy of the *PBSO Inmate Handbook*. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “There is no imposed time limit when you may submit a grievance regarding an allegation of sexual abuse. You may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance is not referred to a staff member who is the subject of the complaint.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(c). The agency provided *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ for the auditor to review. This procedure states, “An inmate who alleges sexual abuse by a staff member may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance is not referred to a staff member who is the subject of the complaint.” The auditor was provided with a copy of the *PBSO Inmate Handbook*. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “You may submit a grievance without submitting it to a staff member who is the subject of the complaint and such grievance is not referred to a staff member who is the subject of the complaint.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(d). The agency provided *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ for the auditor to review. This procedure states, “PBSO shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within ninety (90) days of the initial filing of the grievance. Computation of the ninety (90) day time period shall not include time consumed by inmates in preparing any administrative appeal. PBSO may claim an extension of time to respond, up to seventy (70) days, if the normal time period for response is insufficient to make an appropriate decision. PBSO shall notify the inmate in writing of any such extension and provide a date by which a decision will be made. 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; the inmate may consider the absence of a response to be a denial at that level.” The auditor was provided with a copy of the *PBSO Inmate Handbook*. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “PBSO shall issue a final decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance. Computation of the 90 day time period shall not include time consumed by you in preparing any administrative appeal. PBSO may claim an extension of time to respond, up to 70 days. At any level of the administrative process, including the final level, if you do not receive a response within the time allotted for reply, including any

properly noticed extension, you may consider the absence of a response to be a denial at that level.”

In the PAQ, the agency stated there were two (2) grievances received alleging an incident of sexual abuse over the last 12 months. There were no instances where the agency requested an extension of time to respond to the grievance.

During the onsite phase of the audit, the auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. None of the four individuals had reported their allegation by way of a grievance. All were reported verbally to a staff member. Therefore, the individuals were unable to provide any information to the auditor related to this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(e). The agency provided *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ for the auditor to review. This procedure states, “Third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse, and shall also be permitted to file such requests on behalf of inmates. a. If the inmate declines to have the request processed on their behalf, the inmate’s decision shall be documented.” The auditor was provided with a copy of the *PBSO Inmate Handbook*. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “Third parties, including fellow inmates, staff members, family members, attorneys and outside advocates shall be permitted to assist you in filing requests for administrative remedies relating to allegations of sexual abuse and shall also be permitted to file such requests on your behalf.” In the PAQ, the agency stated there were no third-party grievances filed and no instances where the incarcerated individual declined to have the allegation investigated on their behalf. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.52(f). The agency provided *PBSO COP 927.02 Inmate Grievance Procedures* in the PAQ for the auditor to review. This procedure states, “A grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse may be filed at any time of the day or night (twenty-four (24) hours a day - seven (7) days a week). After receiving such a grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the staff member shall immediately forward the grievance (or any portion thereof which alleges the substantial risk of imminent sexual abuse) to the watch commander on duty so that immediate action may be taken. PBSO shall provide an initial response within forty-eight (48) hours and shall issue a final decision within five (5) calendar days.” The auditor was provided with a copy of the *PBSO Inmate Handbook*. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “A grievance alleging that you are subject to a substantial risk of imminent sexual abuse may be filed at any time of the day or night (24 hours a day - 7 days a week). PBSO shall address immediately.” In the PAQ, the agency indicated they had received no emergency grievances over the last 12 months. Based on this analysis, the auditor finds the facility in compliance with this provision.

	<p>115.52(g). The agency provided <i>PBSO COP 927.02 Inmate Grievance Procedures</i> in the PAQ for the auditor to review. This procedure states, “PBSO may discipline an inmate for filing a grievance related to alleged sexual abuse only where the agency demonstrates that the inmate filed the grievance in bad faith.” The auditor was provided with a copy of the <i>PBSO Inmate Handbook</i>. In the Handbook, incarcerated individuals are provided the agency’s grievance procedures. The procedures include, “ PBSO may discipline you for filing a grievance related to alleged sexual abuse only where the agency demonstrates that you filed the grievance in bad faith.” In the PAQ, the agency stated there were no instances where an incarcerated individual was disciplined for filing a grievance in bad faith. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.53	Inmate access to outside confidential support services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO Inmate Handbook</i> 3. <i>Amended Partnership Agreement - Palm Beach County Sheriff’s Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Random incarcerated individuals 3. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Housing units <p>Findings (by provision):</p> <p>115.53(a). The facility provided information from <i>PBSO COP 934.00 Sexual Offenders and Victims</i> in the PAQ. The procedure states, “ Alleged inmate victims of sexual abuse shall receive timely, unimpeded access to emergency treatment and crisis intervention services. a. Ensure that all alleged victims shall be transported to the appropriate outside facility for prompt forensic and medical treatment and crisis intervention counseling.” The auditor was provided a copy of the <i>Amended Partnership Agreement - Palm Beach County Sheriff’s Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services</i> in the PAQ. The agreement allows for Palm Beach Victim Services to provide victim</p>

advocacy services for incarcerated victims at the PBSO Department of Corrections. Incarcerated individuals are provided the telephone number and mailing address for the Victim Services SART Center in the *PBSO Inmate Handbook*, so incarcerated victims can contact them for advocacy following events that occur at the facility and for prior events that may require emotional support. The PBSO Department of Corrections does not house individuals solely for civil immigration purposes, so they do not comply with this provision.

The auditor was also provided the *PBSO Inmate Handbook* in the PAQ. On pages 38 and 39, the incarcerated individuals are provided information regarding the Victim Services SART Center. The Handbook states, "You will receive a forensic exam and be assigned a victim rights counselor. • You will receive follow-up medical and mental healthcare while in custody. You may also request to see a mental health provider at any time you feel necessary. • There is no fee associated with care provided for this alleged assault. SERVICES PROVIDED THROUGH VICTIM SERVICES SART CENTER • Information about Victim's rights • 24-hour crisis response to hospitals law enforcement agencies and crime scenes • Sexual Assault Nurse Examiner (SANE) to provide Victim-centered assistance • Criminal Justice advocacy and court accompaniment • Assistance with filing State Crime Victim Compensation applications and Restraining Orders • Individual therapy and support groups • Information and referral to community resources, including shelters and Legal Aid CERTIFIED RAPE CRISIS VICTIM ADVOCATES WILL PROVIDE • Crisis Intervention and Personal Advocacy • Accompaniment during forensic rape exams at The Butterfly House and other medical facilities • Coordination of follow-up medical care, therapy and referrals • Criminal Justice advocacy and court accompaniment." Also, the incarcerated individuals are advised about confidentiality in this manner, "No one except the victim can compel the sexual assault counselor to reveal information about their communications. Only the victim can waive the privilege, and this must be done in writing."

During the onsite phase of the audit, the auditor interviewed 22 random incarcerated individuals. Nineteen of the 22 interviewed incarcerated individuals were able to explain to the auditor the available support and advocacy services. They knew that these services were available if someone was a victim of sexual abuse. They knew they could contact someone outside because they had read it in the Handbook. They did not know the phone number or address but knew it was in the Handbook. None of the incarcerated individuals interviewed had utilized the services. The auditor interviewed four (4) incarcerated individuals who had reported in incident of sexual abuse or sexual harassment. All four incarcerated individuals were given the opportunity to contact a victim advocate, and they chose not to. They told the auditor they saw no reason to talk with someone but knew they could do that. The auditor noted in the available records there had been one (1) incarcerated individual who had been transported for a forensic medical examination during the prior 12 months. That individual, however, had already been released from the facility and the auditor was not able to speak with the individual regarding the victim advocacy. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.53(b). The auditor was provided the *PBSO Inmate Handbook* in the PAQ. On

pages 38 and 39, the incarcerated individuals are provided information regarding the Victim Services SART Center. The Handbook states, “No one except the victim can compel the sexual assault counselor to reveal information about their communications. Only the victim can waive the privilege, and this must be done in writing.”

During the onsite phase of the audit, the auditor interviewed 22 random incarcerated individuals. Nineteen of the 22 interviewed incarcerated individuals were able to explain to the auditor the available support and advocacy services. They knew that these services were available if someone was a victim of sexual abuse. They knew they could contact someone outside because they had read it in the Handbook. They did not know the phone number or address but knew it was in the Handbook. None of the incarcerated individuals interviewed had utilized the services. Those incarcerated individuals were aware of the confidentiality because they read it in the Handbook.

The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals were given the opportunity to contact a victim advocate, and they chose not to. They told the auditor they saw no reason to talk with someone but knew they could do that.

They told the auditor the Handbook stated clearly that statements to advocates were confidential. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.53(c). The auditor was provided a copy of the *Amended Partnership Agreement - Palm Beach County Sheriff’s Office and the Palm Beach County Board of County Commissioners, Public Safety Department, Victim Services* in the PAQ. The agreement allows for Palm Beach Victim Services to provide victim advocacy services for incarcerated victims at the PBSO Department of Corrections. Incarcerated individuals are provided the telephone number and mailing address for the Victim Services SART Center in the *PBSO Inmate Handbook*, so incarcerated victims can contact them for advocacy following events that occur at the facility and for prior events that may require emotional support. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>Palm Beach County Sheriff’s Office Department of Corrections Website</i>

2. *PBSO Inmate Handbook*

Findings (by provision):

115.54(a). In the PAQ, the auditor was directed to the Palm Beach County Sheriff's Office Department of Corrections website, **Corrections General - Palm Beach County Sheriff's Office**. The auditor reviewed the Palm Beach County Sheriff's Office Department of Corrections web page, and under the tab for Prison Rape Elimination Act, the agency lists the agency's zero-tolerance information and provides the public an opportunity to file an allegation of sexual abuse or sexual harassment directly to the PBSO or through the 24-hour rape crisis hotline. The agency's PREA policy is also posted. The information can be found here: **Prison Rape Elimination Act (PREA) - Palm Beach County Sheriff's Office**. Incarcerated individuals are informed through signage and the *PBSO Inmate Handbook* that the public can file allegations on their behalf. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61 Staff and agency reporting duties

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
2. Interviews:
 1. Agency Head
 2. PREA Coordinator
 3. Specialized staff
 4. Random staff

Findings (by provision):

115.61(a). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "All reports of sexual abuse are reported immediately and investigated thoroughly. Upon receiving any report that an inmate now in PBSO Corrections custody is reporting sexual abuse that allegedly occurred while incarcerated at another correctional institution, the Corrections detectives shall be notified and information obtained pertaining to the complaint. This information shall be documented in a report to the PREA Coordinator's attention and the referenced facility PREA Coordinator or agency head will be notified within seventy-two (72) hours of receiving the inmate's complaint. The notification is documented. This

treatment plan will include observing the conduct of the alleged victim for changes that may suggest possible retaliation by inmates or staff and will be reported immediately to the zone sergeant, who will take action to remedy any such retaliation.”

During the onsite phase of the audit, the auditor interviewed 18 random staff members. Every person interviewed clearly stated that they were required to immediately report all allegations of sexual assault or sexual harassment. During the site review, the auditor spoke with staff members throughout the facility. Each staff member knew that it was a requirement for all staff to immediately report all knowledge or suspicion of sexual abuse of an inmate. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(b). The auditor was provided with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure includes a prohibition on releasing information related to sexual abuse or sexual harassment incidents. The procedure states that staff will not reveal any information related to the sexual abuse or sexual harassment allegation to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

During the onsite phase of the audit, the auditor interviewed 18 random staff members. All 18 deputies and supervisors were aware of the agency policy that required immediate reporting of sexual abuse and sexual harassment allegations. Each of the staff members interviewed understood the requirement to maintain privacy and not share the information with others unless necessary. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(c). *PBSO COP 934.00 Sexual Offenders and Victims*, included in the PAQ, states that medical and mental health practitioners shall inform incarcerated individuals of the practitioner’s duty to report, and the limitation of confidentiality, at the initiation of services to the inmate. The State of Florida requires mandatory reporting of incidents of sexual abuse of an inmate under Florida State Statute 944.35(3)(d). This law does not provide an exception for medical and mental health practitioners, and all staff members of the Palm Beach County Sheriff’s Office Department of Corrections are required to immediately report all incidents.

During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed that they are mandatory reporters of sexual abuse of incarcerated individuals. Staff did confirm that they would inform the incarcerated individual of their duty to report and the limits to the confidentiality of information learned from the individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(d). *PBSO COP 934.00 Sexual Offenders and Victims*, provided to the auditor in the PAQ, includes the statement that if the alleged victim is under the age of 18 or considered a vulnerable adult, the allegation will be reported to the Department of Children and Families in accordance with mandatory reporting laws. In the State of Florida, staff are required to report allegations of sexual abuse of a person under the

age of 18 to the Florida Department of Children and Families (DCF).

The auditor interviewed the Colonel, the Agency Head, during the onsite phase of the audit. The Colonel confirmed that immediate action would be taken to ensure the individual's safety and DCF and law enforcement would be notified along with the required internal agencies. Medical and mental health would be notified and the PBSO Violent Crimes Division Detective would be notified. The auditor also interviewed the PREA Coordinator who stated that for individuals under the age of 18, the agency would contact law enforcement and report the incident to DCF per Florida Statute. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.61(e). *PBSO COP 934.00 Sexual Offenders and Victims* states that all allegations of sexual abuse or sexual harassment shall be investigated by the agency's investigators and local law enforcement agency.

The auditor interviewed the Colonel, the Agency Head, during the onsite phase of the audit. The Colonel was clear that each and every allegation of sexual abuse and sexual harassment is investigated at the institution. They take every allegation very seriously. When they receive the allegation, they follow a process that includes an immediate reporting to the PBSO Violent Crimes Division Detective and the PREA Coordinator. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 927.02 Inmate Grievance Procedures</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head 2. Random staff <p>Findings (by provision):</p> <p>115.62(a). In the PAQ, the facility provided <i>PBSO COP 927.02 Inmate Grievance Procedures</i>. The procedure states, "After receiving such a grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, the staff member shall immediately forward the grievance (or any portion thereof which alleges the substantial risk of imminent sexual abuse) to the watch commander on duty so that</p>

	<p>immediate action may be taken.” In the PAQ, the agency included information that there were no incarcerated individuals found to be at substantial risk of imminent sexual abuse during the 12 months prior to the audit. The auditor was unable to locate any incident reports or complaints filed related to the risk of imminent sexual abuse.</p> <p>During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel told the auditor that they would take immediate action to separate the individual from the potential abuser as soon as the staff was notified. Staff would make a full report of the individual’s concern and then take action to rehouse the individual in a safer situation. The auditor interviewed 18 random staff members during the onsite audit. All 18 deputies and supervisors stated that they would take immediate action to remove the individual from the situation, including rehousing the individual to another housing unit or building or potentially placing the individual in protective custody if the situation warranted such action. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.63	Reporting to other confinement facilities
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency head <p>Findings (by provision):</p> <p>115.63(a). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Upon receiving any report that an inmate now in PBSO Corrections custody is reporting sexual abuse that allegedly occurred while incarcerated at another correctional institution, the Corrections detectives shall be notified and information obtained pertaining to the complaint. This information shall be documented in a report to the PREA Coordinator’s attention and the referenced facility PREA Coordinator or agency head will be notified within seventy-two (72) hours of receiving the inmate’s complaint. The notification is documented.” In the PAQ, the agency noted no such notifications during the 12 months prior to the audit. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.63(b). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “This information shall be documented in a report to</p>

the PREA Coordinator’s attention and the referenced facility PREA Coordinator or agency head will be notified within seventy-two (72) hours of receiving the inmate’s complaint.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.63(c). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “This information shall be documented in a report to the PREA Coordinator’s attention and the referenced facility PREA Coordinator or agency head will be notified within seventy-two (72) hours of receiving the inmate’s complaint. The notification is documented.” In the PAQ, the agency noted no such notifications during the 12 months prior to the audit. Therefore, there was no documentation available for the auditor to review to verify compliance. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.63(d). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “In the event PBSO Corrections receives a complaint from another correctional facility, that an inmate in their custody has made an allegation of sexual abuse while they were incarcerated at one of the PBSO facilities, an immediate report will be generated and forwarded to the PREA Coordinator for dissemination and Corrections detectives for investigation.” The auditor was notified in the PAQ that there were no such notifications received during the 12 months prior to the audit. Therefore, there was no documentation available for the auditor to review to verify compliance.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel confirmed that any notification from another agency would be investigated to the extent possible. He was not aware of any such incident occurring over the previous 12 months. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.64	Staff first responder duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. Interviews: <ol style="list-style-type: none"> 1. Targeted incarcerated individuals 2. Specialized staff 3. Random staff

Findings (by provision):

115.64(a). The facility provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, “In the event of an alleged complaint of sexual assault, the deputy arriving on the scene of a reported crime should: 1. Notify the control center of the nature of the incident to ensure a quick response by the shift supervisor. 2. Take control of the situation to prevent injury, or additional injury to staff member or inmate by the perpetrator. 3. Place the alleged victim under protective custody and notify the medical department. 4. Advise the alleged victim not to eat, drink, change clothing, wash, bathe, shower, rinse their mouth, brush their teeth, urinate, or defecate until examined by a forensic specialist. 5. Place the alleged perpetrator(s) under administrative segregation, pending investigation of the complaint. 6. Ensure that the alleged perpetrator does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, drinking, or eating. 7. Secure areas where the assault is alleged to have occurred and treat the area as a crime scene.” In the PAQ, the agency stated there were 25 allegations of sexual abuse reported over the previous 12 months, where the security staff member took action to separate the alleged victim from the alleged abuser. Of those, there were 19 reported within a time period that allowed for the collection of physical evidence and staff took the appropriate actions to preserve potential evidence.

During the onsite phase of the audit, the auditor interviewed three (3) staff members who had been a first responder to an incident of sexual abuse. All three staff members identified the proper steps to take as a first responder. All three told the auditor that upon learning of the allegation, they immediately separated the individual who reported the allegation and safeguarded the individual to prevent the potential loss of evidence as required by policy. The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse during the onsite audit. All three incarcerated individuals told the auditor that they were immediately removed from other incarcerated individuals and taken to see staff in medical. All four stated they were asked to preserve evidence while awaiting an interview from a supervisor. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.64(b). The facility provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, “If an allegation of sexual assault is reported to a non-sworn staff member, they are required to notify sworn staff immediately. To preserve evidence, staff will instruct the alleged victim not to take any actions that could destroy physical evidence.” In the PAQ, the agency provided the auditor information showing there were no allegations first reported by a non-security staff member during the 12 months prior to the audit.

During the onsite phase of the audit, the auditor interviewed one (1) non-security staff member who had not been a first responder to an incident of sexual abuse but could be in the future. The staff member correctly identified all the proper steps to take in such a situation. The auditor was satisfied the non-security staff member would perform these steps properly if that instance occurred. The auditor interviewed 18 random staff members during the onsite audit. All 18 deputies and supervisors

	<p>understood the proper steps to take upon identifying an incident of sexual abuse. When asked, they told the auditor a non-security staff member would ensure the victim was safe then immediately notify a deputy, probably a supervisor. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.65	Coordinated response
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head <p>Findings (by provision):</p> <p>115.65(a). The agency provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i> in the PAQ. The procedure outlines the agency's zero-tolerance for sexual abuse within the agency's corrections facilities. The procedure states, "All reports of sexual abuse are reported immediately and investigated thoroughly. When crimes are committed within correctional facilities, the perpetrator and victim of, and witnesses to these crimes must be identified, and evidence of these crimes collected and preserved. To ensure successful prosecution of the perpetrator, proper investigation procedures must be followed, which includes a complete report of the incident." The procedure goes on to outline the specific steps to take when these instances occur. In Section V-G, the procedure outlines first response, "In the event of an alleged complaint of sexual assault, the deputy arriving on the scene of a reported crime should..."</p> <p>Section V-J outlines the proper process for investigators, "Detectives shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator..." Section V-K outlines the health services responsibilities, "Medical Staff: Any inmate reporting sexual assault/abuse during their present incarceration is provided with a medical evaluation and necessary treatment by a qualified health care professional utilizing the sexual assault (Sexual Assault Nurse Examiner-SANE/Sexual Assault Forensic Examiner-SAFE) protocol..." Section V-L outlines investigation follow-up, "Post ER Corrections: The agency will employ protection measures, such as housing changes or transfers for</p>

	<p>inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations...” Section V-M outlines the proper reporting measures, “Reports: The watch commander or designee shall review and sign the reports and ensure all copies are distributed...” Finally, Section V-T outlines the agency’s reporting and incident reviews, “The PREA coordinator or designee shall review all cases of alleged inmate sexual assault/battery and staff sexual misconduct/harassment to ensure that the incidents are accurately tracked in accordance with current Department of Justice PREA Standards...”</p> <p>The agency also provided <i>PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff’s Office Corrections Facility</i> in the PAQ. The procedure is a detailed document that directs response to any incidents inside the corrections facility. The procedure states, “When crimes are committed within correctional facilities, the perpetrator of, and witness(es) to, these crimes must be identified, and evidence of these crimes collected and preserved. To ensure successful prosecution of the perpetrator, proper investigation procedures must be followed, which must include a complete report of the incident.” The procedure compliments the sexual abuse procedure to detail clearly the steps and responsibilities of staff at all levels.</p> <p>During the onsite phase of the audit, the auditor reviewed the steps of the coordinated response plan with the Colonel, the Agency Head. The Colonel made it clear that having a clear plan of action is vital to the safety of the incarcerated population, the preservation of evidence, proper investigations, and detailed reporting. This ensures that all staff will react properly to any incident that may occur, including incidents of sexual abuse or sexual harassment. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>The PBSO Department of Corrections provides two (2) detailed documents that provide step-by-step directions to take in the event an incarcerated individual reports an incident of sexual abuse. With these documents in place, which the staff are aware of, the chances of missing evidence, causing harm to an alleged victim, or providing failed reporting are extremely low. The agency’s attention to detail for their coordinated plan has exceeded the standard.</p>
--	--

115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *Collective Bargaining Agreement Between Palm Beach County Sheriff's Office And Palm Beach County Police Benevolent Association*
2. Interviews:
 1. Agency Head

Findings (by provision):

115.66(a). The agency provided the auditor with a copy of the executed *Collective Bargaining Agreement Between Palm Beach County Sheriff's Office And Palm Beach County Police Benevolent Association*. The agreement expires on September 30, 2027. The auditor reviewed the document and found no provision that prevented the Sheriff's Office from disciplining a corrections deputy covered under the bargaining agreement for committing an offense of sexual misconduct, including removing that deputy from contact with an incarcerated individual pending the outcome of an investigation.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel stated that the agency would properly discipline any staff member who was found to be responsible in an incident of sexual abuse or sexual harassment. The agency does not tolerate such behavior and the agreement with the union does not prevent the agency from issuing such discipline that would be warranted relative to the behavior performed. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.66(b). The auditor is not required to audit this provision.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head 2. Targeted incarcerated individuals 3. Specialized staff <p>Findings (by provision):</p> <p>115.67(a). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and</i></p>

Victims. The procedure states, “The agency will employ 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations.” The agency has designated the PREA Compliance Manager, the Classification Division, and a Licensed Clinical Social Worker (from the contracted mental health team) as the retaliation monitors. Staff members who may require retaliation monitoring will be monitored by staff in Internal Affairs. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(b). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “The agency will employ 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 that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. For at least 90 days following a report of sexual abuse, the contract mental health staff will provide counseling for the alleged victim at regular intervals. This treatment plan will include observing the conduct of the alleged victim for changes that may suggest possible retaliation by inmates or staff and will be reported immediately to the zone sergeant, who will take action to remedy any such retaliation.”

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. He stated that the agency uses many ways to protect incarcerated individuals from retaliation, including housing changes, transferring the individual to the other corrections facility, and providing the individual information about available emotional support services. The auditor interviewed the PREA Compliance Monitor, who is responsible for the retaliation monitoring. She told the auditor that she visits victims shortly after receiving notification of the reported allegation and tells them about her role to monitor their safety. She tells them to contact her if they have a problem, offers them assistance, and provides them with information about the outside emotional support services. She visits the inmate periodically, every 30 days, and documents their meeting. The auditor was told that mental health assists with the monitoring by talking with the individuals as well. The social worker will immediately notify her if something is reported by the individual. This monitoring lasts for 90 days following the report of the allegation. If problems arise, she reports it immediately and can offer a transfer to another housing unit or to the other facility. She may have to locate a new work assignment, if needed. The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse. All four incarcerated individuals discussed talking with mental health about possible retaliation. None of the incarcerated individuals reported problems with retaliation but did talk with someone and report they were having no problems. The auditor was provided retaliation monitoring reports and could see the periodic checks with notations. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(c). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “For the next 90 days, staff will monitor any

disciplinary reports, housing or program changes, negative performance reviews, or assignments of staff. PBSO will continue the monitoring past 90 days if the initial monitoring indicates a continuing need.” In the PAQ, the agency there were no instances where the agency had to extend the monitoring period over the last 12 months.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. He stated that the agency uses many ways to protect incarcerated individuals from retaliation, including housing changes, transferring the individual to the other corrections facility, and providing the individual information about available emotional support services. The Colonel stated the victims would be interviewed and provided the opportunity to tell staff what problems might be occurring, if there were any. This monitoring would continue for 90 days. The auditor interviewed the retaliation monitor, the PREA Compliance Manager, who stated that she would review incident reports and housing assignments before she would go to meet with the individual. She would also obtain information from mental health. If necessary, the individual would be separated to provide an opportunity for the individual to speak freely to staff and describe the problems that were occurring. The monitoring would continue for 90 days but could extend longer if it appeared to be necessary based on the individual’s behavior. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(d). During the onsite phase of the audit, the auditor interviewed the retaliation monitor, the PREA Compliance Manager, who stated that she would review incident reports and housing assignments. She stated that her periodic checks are performed every 30 days. She can always see an individual more frequently if behavior warrants that, but the procedure requests a visit with the individual at 30-day intervals. She continues to monitor every day by reviewing records from her office but will only meet with the individual every 30 days. She stated that monitoring can be continued if there appears to be a need based on the statements from the victim or from other indications. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(e). During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head, who was asked about steps that would be taken if retaliation of any person who cooperated in an investigation was suspected. The Colonel stated the individual would be interviewed and provided with the opportunity to tell staff what problems might be occurring. The agency would take immediate action to protect the individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.67(f). The auditor is not required to audit this provision.

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

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

- 1. Documents: (*Policies, directives, forms, files, records, etc.*)
 - 1. *PBSO COP 934.00 Sexual Offenders and Victims*
- 2. Interviews:
 - 1. Agency Head
 - 2. Specialized staff
 - 3. Random staff
 - 4. Targeted incarcerated individuals
- 3. Site Review Observations:
 - 1. Segregated housing

Findings (by provision):

115.68(a). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “Upon the return to the facility after an emergency room visit for an alleged sexual assault, corrections staff will ensure the inmate is immediately placed into a safe housing assignment and not returned to the area of the alleged assault. The alleged victim shall only be placed in segregated housing after an assessment of all available alternatives has been made, and it has been determined that there are no other alternatives available.” In the PAQ, the agency stated there were no individuals involuntarily segregated following the report of a sexual abuse allegation over the last 12 months.

During the onsite review, the auditor interviewed the Colonel, the Agency Head, about involuntary segregation. Just as he stated about segregation for risk of victimization, he said that the agency does not see the need to utilize confinement to keep incarcerated individuals safe. If it were to become necessary to place an individual in segregation, it would only be done until another alternative safe housing became available. The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse. None of the four incarcerated individuals had been placed in segregated housing following their allegation. The auditor also interviewed two (2) staff members that work in segregated housing. Both staff members confirmed that incarcerated individuals are not placed in segregated housing to keep them safe following the filing of allegations of sexual abuse. Those incarcerated individuals remain in general population unless they report they feel uncomfortable and request housing in protective custody. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Exceeds Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. *PBSO General Order 506.01 Sex Crime Investigations*
 3. Sexual Abuse Investigation Files
2. Interviews:
 1. Agency Head
 2. PREA Coordinator
 3. Specialized staff

Findings (by provision):

115.71(a). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "PBSO conducts its investigation into allegations of sexual abuse and sexual harassment promptly, thoroughly, and objectively for all such allegations, including third-party and anonymous reports." The agency also provided *PBSO General Order 506.01 Sex Crime Investigations* in the PAQ. The order applies to all investigations for the PBSO and states, "This Order establishes guidelines for the investigation of sex crimes by the Special Investigations Division (SID) Special Victims Unit (SVU). The guidelines set forth in this procedure will be used under various circumstances during the investigation of sex crimes; however, will not be limited to these guidelines. Investigators will use a trauma-informed/victim-centered approach in order to minimize traumatization in completing all steps which are reasonable and prudent to bring these investigations to successful resolution. The trauma-informed/victim-centered approach is defined as the systematic focus on the needs and concerns of a victim to ensure the compassionate and sensitive delivery of services in a nonjudgmental manner. Investigators will refer to the current Palm Beach County Sexual Assault Response Team (SART) Sexual Battery Investigations General Orders for Law Enforcement and the Palm Beach County Sexual Assault Response Team (SART) Response to Child Sexual Abuse & Sexual Assault Cases for additional guidance. In the event an alleged sex crime occurs within a confinement (Corrections) setting, investigation procedures will follow the standard compliance regulations found in the United States Department of Justice Prison Rape Elimination Act (PREA). This Order applies to all Sheriff's Office sworn members."

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO Violent Crimes Division (VCD), who is assigned to investigate crimes within the PBSO corrections facilities. The detective confirmed told the auditor that there are three (3) VCD detectives currently assigned to the PBSO corrections facilities. They investigate all potential crimes, including reported allegations of sexual abuse and sexual harassment. The detectives are notified immediately as part of the first response protocol after an allegation is received by the agency. The detectives take

over to collect any preserved evidence, following the agency's evidence protocol procedures. The auditor was told that the detectives investigate allegations the same if the allegation is reported anonymously or through a third-party. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the previous 12 months and was able to confirm the investigative process. A referral to the VCD detectives was completed immediately for each allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(b). The agency provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Where sexual abuse is alleged, detectives who have received special training in sexual abuse investigations shall be used."

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective confirmed that all three (3) VCD detectives assigned to the PBSO corrections facilities, including himself, have completed the Investigating Sexual Abuse in Confinement Settings specialized training course for investigators of sexual abuse crimes in corrections facilities. The class covers interviewing sexual abuse victims, Miranda and Garrity, sexual abuse evidence collection in confinement, and preparing a case for referral. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(c). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Detectives shall gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data; shall interview alleged victims, suspected perpetrators, and witnesses; and shall review prior complaints and reports of sexual abuse involving the suspected perpetrator."

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective confirmed that all investigations of sexual abuse allegations inside the corrections facility are investigated just as they are for any other sexual abuse case in Palm Beach County. The detectives follow General Order 506.01 for sexual abuse investigations. They collect and preserve all available evidence, including video coverage, DNA, documents located inside a cell or housing area, recorded telephone calls, and witness statements are taken from the alleged victim and any available witnesses. The detectives talk to as many potential witnesses as possible to attempt to gather information that can be utilized to determine if the allegation is valid. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(d). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "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 to subsequent criminal prosecution."

During the onsite phase of the audit, the auditor interviewed a detective from the

PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that any administrative investigation, if the alleged abuser is a staff member, would be placed on hold until the criminal investigation is completed. This would avoid the need to utilize Garrity to compel an interview with the subject staff member. The PBSO would assign the administrative investigation to Internal Affairs, who would begin their investigation after the criminal investigation is complete. At that point, there would be no need to compel a statement from the subject staff member. This would be standard practice even if this were not a provision of the PREA Standards. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(e). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “The credibility of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person’s status as an inmate or staff. Inmates who allege sexual abuse shall not be required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation.”

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that he makes all decisions regarding credibility after reviewing available evidence and all witness statements. He told the auditor he investigates many potential crimes in the facility and utilized the same process to determine credibility for all investigations. He stated clearly, he does not automatically assume that an incarcerated individual is telling a lie or that a staff member is telling the truth. The detective also stated that he would never utilize a polygraph examination in an investigation. The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse. All four incarcerated individuals told the auditor they had not been asked to take a polygraph examination and were given the opportunity to fully explain their allegation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(f). During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that a part of all administrative investigations is an attempt to determine if any staff member failed to follow the agency directives or if someone failed to properly perform their duties, thus enabling an incarcerated individual or other staff member to violate rules and commit an act of sexual misconduct. This information would be included in the investigation final report, along with the evidence collected, the statements taken, facts determined through the investigation, and the reasoning behind the credibility of the accuser and any other party to the investigation.

The auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files and noted the investigation report in each file. In each case, the report was well-written and clearly listed the evidence reviewed, the statements taken, the investigator’s reasoning, and determination of the allegation’s outcome. Each investigation listed several witnesses, showing that the detectives took the

time to speak with multiple incarcerated individuals in an attempt to find the truth. In all, the auditor was impressed with the way the investigators wrote their reports and included all the necessary information. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(g). During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that just as he would for an administrative investigation report, the criminal investigation report would include the evidence collected, the statements taken, facts determined through the investigation, and the reasoning behind the credibility of the accuser and any other party to the investigation. He told the auditor that every attempt would be made to file criminal charges. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(h). In the PAQ, the agency provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Substantiated allegations of conduct that appear to be criminal are referred for prosecution."

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective confirmed that in every case, the expected end result of the investigation is to file criminal charges. This is the process for all investigations in the corrections facility. He told the auditor that county prosecutors work well with the VCD detectives, and they accept criminal charges and prosecute all possible cases.

During the onsite phase of the audit, the auditor reviewed the agency's 30 sexual abuse investigation files from the previous 12 months. The auditor noted one (1) substantiated allegation of incarcerated individual-on-incarcerated individual sexual abuse. Although that case was determined to be substantiated, the detective determined the abuse was not to the level where criminal charges were relevant.

Also, the victim stated that he would not like to press criminal charges against the perpetrator. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(i). The auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "All written reports pertaining to the administrative or criminal investigation of alleged sexual assault or sexual harassment shall be retained for as long as the alleged abuser is incarcerated or employed by the agency, plus five years."

During the onsite audit, the auditor was shown storage of the sexual abuse and sexual harassment investigation files in the office of the PREA Compliance Manager.

Her office is in the administrative building, and her office is secure when she is not present. The files are stored in locked cabinet. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(j). During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that the agency would continue with an

investigation of a sexual abuse allegation even if the incarcerated individual who filed the allegation was released from the facility or if the alleged abuser was no longer employed by PBSO. The detective stated that this is how all investigations are completed in the community and they would progress the same way inside the corrections facility. The detective was not able to show the auditor an example, as he was not sure it had happened during an investigation. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.71(k). The auditor is not required to audit this provision.

115.71(i). All investigations of sexual abuse and sexual harassment allegations are performed by members of the PBSO VCD. If the alleged abuser is a staff member, the case will be turned over to Internal Affairs. Under normal circumstances, all investigations will be completed by internal sources.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. He told the auditor that they investigate all allegations internally, so there is no need to coordinate with an outside agency. If, however, some outside agency were brought in to investigate an allegation, the PBSO team would cooperate fully and stay informed on the progress of the investigation. The auditor interviewed the PREA Coordinator, who agreed with the Colonel. Since all investigations are completed internally, there is no need to have a concern with coordinating with outside agencies. The auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. He stated that the VCD investigates all crimes in the corrections facilities. Based on this analysis, the auditor finds the facility in compliance with this provision.

The auditor reviewed each of the 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the onsite audit. Each of the files is complete with all documentation expected. The file includes the initial incident report, victim and alleged abuser information, law enforcement reports from the VCD detective, the initial incident report, a description of the evidence collected, a full investigative report, proof of referral to medical and mental health, notification to the inmate and retaliation monitoring. The detectives investigate the allegations aggressively, interviewing staff members present as well as multiple incarcerated individuals from the housing units. The auditor did not find any allegations where detectives took a shortcut to the investigation or dismissed the report as false from the beginning. Each investigation was completed promptly, thoroughly, and timely, as required. Based on this review and the interview with the VCD detective, the auditor has determined that they have exceeded the requirements of this Standard.

115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. Sexual Abuse Investigation Files
2. Interviews:
 1. Specialized staff

Findings (by provision):

115.72(a). The auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "In administrative investigations, the standard of proof shall not be higher than a preponderance of evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated."

During the onsite phase of the audit, the auditor interviewed a detective from the PBSO VCD, who is assigned to investigate crimes within the PBSO corrections facilities. The detective stated that the standard of proof for all administrative investigations is a preponderance of the evidence. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the previous 12 months prior to the audit. The determination in each investigative memo is based on the preponderance of the evidence. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none">1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>)<ol style="list-style-type: none">1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i>2. <i>PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility</i>3. Sexual Abuse Investigation Files2. Interviews:<ol style="list-style-type: none">1. Agency Head2. PREA Compliance Manager3. Specialized staff4. Targeted incarcerated individuals

Findings (by provision):

115.73(a). The auditor was provided *PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility* in the PAQ. The procedure states, "Following an investigation into an inmate's allegation of sexual abuse, the inmate will be informed as to whether the allegation was found to be substantiated unsubstantiated, or unfounded." In the PAQ, the agency stated that there were 30 criminal or administrative investigations of sexual abuse and sexual harassment completed by the agency investigators. Of those, all 30 alleged victims had received notification of the outcome of the investigation.

During the onsite phase of the audit, the auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. Each of the four incarcerated individuals reported to the auditor they had received written notification of the outcome of the investigation. One (1) individual was clearly not pleased with the outcome and told the auditor he felt the agency was covering up the incident and that everyone was violating his civil rights. The auditor took time to review the investigation file from this individual's allegation. The original allegation was made regarding a deputy's normal security rounds in the housing unit and was determined to be unfounded. In the auditor's opinion, this was the proper outcome of the review. The PREA Compliance Manager explained to the auditor that the individual had several allegations that were not valid. The auditor interviewed a detective from the PBSO VCD, who is assigned to perform investigations in the corrections facility. The detective told the auditor that every incarcerated individual is provided a written notification of the outcome of the investigation after he files the final investigation report. The auditor also interviewed the Colonel, the Agency Head, during the onsite audit. The Colonel stated that all incarcerated individuals are notified of the outcome of the investigation after it is completed. They must be notified if the allegation is sustained, not sustained, or unfounded. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the previous 12 months. The auditor noted in each file a document indicating the outcome of the investigation that is addressed to the incarcerated individual.

There was also a copy of that document in each file, with the individual's signature at the bottom of the form indicating receipt of the document. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(b). This provision of the Standard does not apply, as the agency performs their own investigations of sexual abuse and sexual harassment allegations. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(c). The auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure requires that incarcerated individuals be notified, unless the allegation is unfounded, when the staff member is no longer assigned to the housing unit, assigned to the institution, employed by the agency, or when the alleged abuser has been indicted on a charge related to sexual abuse or convicted on a charge of sexual abuse.

During the onsite phase of the audit, the auditor interviewed four (4) incarcerated

individuals who had reported an incident of sexual abuse or sexual harassment. Each of the four incarcerated individuals reported to the auditor they had received written notification of the outcome of the investigation. One (1) individual had filed his allegation against a staff member. The outcome of the investigation was unfounded, so there was no additional notification required. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were no substantiated allegations of sexual abuse or sexual harassment against a staff member in the 12 months prior to the audit, so the auditor was unable to review any additional evidence relative to this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(d). The auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure includes a provision that requires notification to the victim when the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse or when the alleged abuser has been convicted on a charge of sexual abuse.

During the onsite phase of the audit, the auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. Each of the four incarcerated individuals reported to the auditor they had received written notification of the outcome of the investigation. Two (2) of the individuals had filed an allegation against another incarcerated individual. Both told the auditor the outcome of the investigation was unfounded, so they would not have received any additional notification. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There was one (1) substantiated allegation of sexual abuse and two (2) substantiated allegations of sexual harassment against another incarcerated individual. There were no criminal charges filed in any case, so there were no notifications required. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(e). In the PAQ, the auditor was provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "All notifications to inmates shall be documented."

During the onsite phase of the audit, the auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. The auditor noted in each file a document indicating the outcome of the investigation that is addressed to the incarcerated individual. There was also a copy of that document in each file, with the individual's signature at the bottom of the form indicating receipt of the document. Because there were no additional notifications required regarding the filing of criminal charges, the auditor did not see copies of those written notifications. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.73(f). In the PAQ, the auditor was provided *PBSO COP 917.25 Crimes Committed Within a Palm Beach County Sheriff's Office Corrections Facility*. The procedure states, "The obligation to report to an inmate under PREA standards will terminate if the inmate is released from custody."

	The auditor is not required to audit this provision.
--	--

115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. PREA Compliance Manager <p>Findings (by provision):</p> <p>115.76(a). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Violations of this sexual abuse policy may result in discipline up to and including termination.”</p> <p>115.76(b). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Violations of this sexual abuse policy may result in discipline up to and including termination.” In the PAQ, the agency stated there were no terminations or resignations of staff members related to staff sexual abuse allegations over the 12 months prior to the audit.</p> <p>During the onsite phase of the audit, the auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were no substantiated allegations against a staff member. The auditor confirmed through conversations with the PREA Compliance Manager that there have been no substantiated incidents of staff sexual abuse over the last two (2) years. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.76(c). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Violations of this sexual abuse policy may result in discipline up to and including termination.” In the PAQ, the agency stated there were no terminations or resignations of staff members related to staff sexual abuse allegations over the 12 months prior to the audit.</p> <p>During the onsite phase of the audit, the auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were no substantiated allegations against a staff member. The auditor confirmed through conversations with the PREA Compliance Manager that there have been no substantiated incidents of staff sexual abuse over the last two (2) years.</p>

	<p>Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.76(d). In the PAQ, the facility provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Any terminations or resignations of a staff member who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to PBSO Corrections Detectives and relevant licensing bodies.” In the PAQ, the agency stated the were no such disciplinary actions taken upon staff members over the 12 months prior to the audit.</p> <p>During the onsite phase of the audit the auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were no substantiated allegations against a staff member, so the auditor was unable to review additional evidence to confirm this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.77	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 933.00 Volunteer Program</i> 3. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head <p>Findings (by provision):</p> <p>115.77(a). In the PAQ, the agency provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Any volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to PBSO Corrections Detectives and relevant licensing bodies.” In the PAQ, the agency provided <i>PBSO COP 933.00 Volunteer Program</i>. The procedure states, “Any volunteer who engages in sexual abuse shall be prohibited from contact with inmates and shall be reported to PBSO Corrections Detectives and relevant licensing bodies.” In the PAQ, the agency stated that there were no such reports to licensing bodies or to law enforcement over the last 12 months prior to the audit.</p> <p>During the onsite phase of the audit, the auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were no allegations of sexual abuse or sexual harassment made against</p>

a volunteer or contractor and no substantiated allegations. Therefore, there were no instances where a volunteer or contractor had to be disciplined, reported to law enforcement, or to any licensing body. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.77(b). The auditor interviewed the Colonel, the Agency Head, during the onsite phase of the audit. The Colonel stated that although such remedial measures were certainly an option, PBSO would not take advantage of such remedial measures. He clearly told the auditor that if any contractor or volunteer was found to be responsible following an allegation of sexual abuse or sexual harassment of an incarcerated individual, the agency would immediately remove them from the facility and prohibit their reentry. There have been no such cases over the last year. The Colonel stated there would be no reason to place the incarcerated individuals at risk for another abuse incident. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>PBSO COP 919.00 Inmate Rules and Disciplinary Process</i> 3. <i>PBSO Inmate Handbook</i> 4. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Agency Head 2. Specialized staff <p>Findings (by provision):</p> <p>115.78(a). In the PAQ, the agency provided <i>PBSO COP 919.00 Inmate Rules and Disciplinary Process</i>. The procedure outlines the disciplinary action process for incarcerated individuals and states, "Any staff member witnessing or having reasonable belief that an inmate has committed a violation of the rules and regulations shall prepare an inmate disciplinary report and incident report. A separate disciplinary report and supporting documentation will be provided for each rule infraction. When an alleged rule violation is reported, the shift supervisor will cause an appropriate investigation to determine if the circumstances support the charges. The investigation shall begin within twenty-four (24) hours from when the violation is reported and will be completed without unreasonable delay unless there</p>

are exceptional circumstances for delaying the investigation. An impartial disciplinary committee or hearing review officer, as determined by the division commander, shall conduct a hearing for rule violations. Any member of the disciplinary committee or any person appointed as a disciplinary committee member shall be disqualified if he/she has any involvement in the case against the inmate or investigated the violation.” The agency stated in the PAQ that there were no incarcerated individuals disciplined for offenses of sexual abuse over the last 12 months prior to the audit. The auditor was provided a copy of the *PBSO Inmate Handbook* in the PAQ. The incarcerated individuals are advised of the disciplinary process beginning on page 26 of the Handbook, so all individuals are aware of the process and the requirements to provide the individuals with due process for such disciplinary hearings.

During the onsite phase of the audit, the auditor reviewed the agency’s 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. There were three (3) substantiated investigations against the accused incarcerated individual, but no administrative disciplinary sanctions were filed against the accused individual. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(b). During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head, who confirmed that discipline for incarcerated individuals would be consistent with the level and type of offense committed. The penalty assigned would be consistent for comparable offenses and consistent for all incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(c). During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head, who confirmed that any disciplinary process would take into account the individual’s mental disability or mental illness if it were noted by mental health staff. This would definitely be taken into account when considering disciplinary sanctions to be imposed. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(d). During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, stated that since the county jail population was transient, they did not offer sexual offender therapy or counseling. Therefore, the facility was not able to offer such interventions for incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.78(e). The agency has provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “Palm Beach County Sheriff's Office Department of Corrections is committed to emphasizing zero tolerance of the sexual abuse/assault/harassment of inmates, and sexual acts involving inmates regardless of consensual status either by staff or by other prisoners.” Based on this analysis, the auditor finds the facility in compliance with this provision.

	<p>115.78(f). The agency has provided the auditor with <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “PBSO prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.” Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.78(g). The agency has provided the auditor with <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Palm Beach County Sheriff's Office Department of Corrections is committed to emphasizing zero tolerance of the sexual abuse/assault/harassment of inmates, and sexual acts involving inmates regardless of consensual status either by staff or by other prisoners.” The auditor was provided a copy of the <i>PBSO Inmate Handbook</i> in the PAQ. On pages 26 and 27 of the Handbook, incarcerated individuals are advised of the rule violation for sexual contact, “Category II Offenses: 2-1 Engaging in sexual acts with others. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	--

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals 3. Site Review Observations: <ol style="list-style-type: none"> 1. Intake/Booking 2. Health services <p>Findings (by provision):</p> <p>115.81(a). This provision is for prisons and does not apply to the Palm Beach County Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.81(b). This provision is for prisons and does not apply to the Palm Beach County Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

115.81(c). The agency provided a copy of the *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse* in the PAQ. In the *Screening for Risk of Sexual Victimization and Abusiveness* section, the procedure states, “Patients identified as being at-risk for sexual victimization or abusiveness with no identified, immediate medical and/or mental health needs will be referred for medical/mental health screening within 14 days of intake.” In the PAQ, the agency indicated that all the incarcerated individuals who reported prior sexual abuse during the intake screening had received the required follow-up medical or mental health meeting.

During the onsite phase of the audit, the auditor interviewed three (3) incarcerated individuals who reported prior sexual victimization on their risk screening. All three incarcerated individuals told the auditor that they were provided the opportunity to meet with someone from mental health. They all told the auditor that the initial mental health consultation occurred within the first two (2) weeks in the facility. The auditor also interviewed the corporal from classification, who performs the intake risk screening. She stated that during the screening, if an incarcerated individual reports prior victimization, the individual would be provided the opportunity to see medical or mental health. Unless the individual rejects that opportunity, the individual is scheduled for an appointment with mental health. This would also happen with the screening questions that are asked by the nursing staff. The scheduled visits are tracked within the individual’s electronic health record. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81(d). The agency provided a copy of the *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse* in the PAQ. The procedure states, “All information related to sexual victimization or abusiveness that occurred in the institutional setting will be strictly limited to health care staff and other staff to inform treatment plans and security/management decisions, as required by federal, state, and local law.”

During the onsite phase of the audit, the auditor talked with several staff members while performing the site review. Staff members were asked about the screening of incarcerated individuals and how to access the screening information on the computer. The auditor was told they were unable to access that information on the computer. The auditor asked three (3) deputies to access the computer and show him the screening information, and they were unable to do so. All other screening information and information regarding prior sexual victimization would be maintained in the incarcerated individual’s electronic health record, which can be accessed by the contracted medical and mental health staff only. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.81(e). The agency provided a copy of the *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse* in the PAQ. The procedure states, “Consent of the patient, 18 years of age or older, is required before reporting an incident of sexual abuse that occurred prior to incarceration, except when the incident occurred in another correctional institution or in the event that the patient is under 18 years of age, as permitted by law.”

	<p>During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, explained that obtaining informed consent is a regular part of Wellpath’s process prior to engaging in services with incarcerated individuals. Upon learning of an individual’s sexual assault history and prior to contacting security staff, the clinician will remind the individual about the consent form and the clinician’s mandatory reporting requirements. For incarcerated individuals under the age of 18, this is not a requirement, due to State law. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.82	Access to emergency medical and mental health services
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse</i> 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals <p>Findings (by provision):</p> <p>115.82(a). In the PAQ, the auditor was provided <i>PBSO COP 934.00 Sexual Offenders and Victims</i>. The procedure states, “Medical Staff: Any inmate reporting sexual assault/abuse during their present incarceration is provided with a medical evaluation and necessary treatment by a qualified health care professional utilizing the sexual assault (Sexual Assault Nurse Examiner-SANE/Sexual Assault Forensic Examiner-SAFE) protocol. 1. Administer necessary first aid. 2. Prepare the appropriate ER paperwork. 3. Document findings in the individual’s medical record.” The auditor was provided access to medical records for several incarcerated individuals who had reported incidents of sexual abuse over the 12 months prior to the audit. The auditor was able to verify the immediate medical response and evaluation of the incarcerated victim.</p> <p>During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed that any incarcerated individual who reported an incident of sexual abuse would be immediately brought to the health services as part of the coordinated response plan. The first step taken would be to evaluate the individual for injuries and the urgent need for medical care. Special care would be</p>

taken to ensure that any evidence would be preserved. This evaluation is done immediately and is based on the medical professional's credentials. A medical professional is on duty 24 hours a day at the facility and there would be no waiting for care from a medical professional. The auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse. All four incarcerated individuals told the auditor they were taken to medical immediately after reporting the incident and were seen by a medical staff member. They all reported no injuries, although they were evaluated immediately. They told the auditor that an appointment was also scheduled with mental health. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82(b). During the onsite phase of the audit, the auditor interviewed three (3) staff members who had been a first responder to an allegation of sexual abuse. All three understood the immediate need to provide the incarcerated individual with access to medical care. They told the auditor that medical staff are always available and there is no need for security staff to make other arrangements. Although mental health staff are not on duty 24 hours a day, appointments are scheduled for an immediate meeting with a mental health practitioner, which would normally occur the following day. If staff believe there is an urgent need for the incarcerated victim to see mental health, a mental health staff member can be called for an immediate response to the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.82(c). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure states, "Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, Hepatitis B) are offered to all victims, as appropriate. Emergency contraception is available to female victims of sexual abuse." The auditor was provided access to medical records for several incarcerated individuals who had reported incidents of sexual abuse over the 12 months prior to the audit. The auditor was able to verify the immediate medical response and evaluation of the incarcerated victim. In one (1) record, the incarcerated individual had been transported to the hospital to receive a forensic medical examination. In that record, the auditor could see the notes for the prophylactic testing and medications. There were no victims assaulted to the level that required testing for pregnancy.

During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed that any incarcerated individual who reported an incident of sexual abuse would be immediately brought to the health services as part of the coordinated response plan. Testing and treatment for sexually transmitted infections would be coordinated through a follow-up treatment plan provided by the SANE at the hospital. Pregnancy testing, if needed, would be ordered by the provided, then performed, based on the level of physical contact. The auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse. All four incarcerated individuals told the auditor they were taken to medical immediately after reporting the incident and were seen by a medical staff member.

	<p>They all reported no injuries, although they were evaluated immediately. They told the auditor that an appointment was also scheduled with mental health. All four stated the level of physical contact in their allegation did not require any testing for sexually transmitted diseases. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.82(d). In the PAQ, the auditor was provided <i>Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse</i>. The procedure states, "Treatment services are provided free of charge to every victim of sexual abuse, regardless of whether the victim discloses the name of the abuser or fails to cooperate with any investigation arising out of the incident." Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p>
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse</i> 3. Sexual Abuse Investigation Files 2. Interviews: <ol style="list-style-type: none"> 1. Specialized staff 2. Targeted incarcerated individuals <p>Findings (by provision):</p> <p>115.83(a). <i>PBSO COP 934.00 Sexual Offenders and Victims</i> was provided to the auditor in the PAQ. The procedure states, "Upon the return of the inmate from the emergency room, ensure the paperwork from the ER is returned and reviewed, and that the alleged victim is referred to mental health and medical for appropriate follow-up." In the PAQ, the auditor was provided <i>Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse</i>. The procedure states, "Continued evaluation and treatment of medical and mental health needs related to sexual abuse will be provided in accordance with the patient's desire for treatment and the community standard of care. Services may be provided through sick call, chronic care clinics, and regular annual health examinations. Mental health staff will offer ongoing follow-up services. If the patient refuses such services, the patient will be informed that a mental health staff member will follow up in 14 days to determine</p>

if the patient is functioning adequately and offer any follow-up services. All encounters will be documented in the patient's health record, including any refusals of follow-up services.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(b). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure states, “If needed, a treatment plan will be developed regarding any additional medical follow-up required. When necessary and appropriate, post-release information and instructions will be provided for continuity of care. All discharge planning actions/instructions will be documented. One copy will be given to the patient and the other copy will be filed in the patient's health record.”

During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed to the auditor that the facility would provide a full treatment plan for all incarcerated individuals, especially for incarcerated individuals who have been sexually abused. The treatment plan would include information for the Palm Beach Victim Services if the victim had received a forensic examination. The auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals reported receiving care from medical and mental health. None were provided testing and prophylactic medications, as their assaults were not to the level that required such testing or follow-up or ongoing care. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(c). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure states, “Continued evaluation and treatment of medical and mental health needs related to sexual abuse will be provided in accordance with the patient's desire for treatment and the community standard of care. Services may be provided through sick call, chronic care clinics, and regular annual health examinations.”

During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed to the auditor that the facility would provide a full treatment plan for all incarcerated individuals, especially for incarcerated individuals who have been sexually abused. Wellpath does not charge any fees to any incarcerated individual who is the victim of sexual abuse or sexual harassment inside the corrections facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(d). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure does not specifically state that pregnancy testing would be provided, but the procedure states, “Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, Hepatitis B) are offered to all victims, as appropriate.”

During the onsite phase of the audit, the auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals reported receiving care from medical and mental health. All four incarcerated individuals are male, so they offered no information for this standard. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. None of the cases involved vaginal penetration, so the auditor was unable to confirm additional information for this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(e). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure states, "Emergency contraception is available to female victims of sexual abuse."

During the onsite phase of the audit, the auditor interviewed three (3) staff members from health services. All three, the healthcare administrator, the charge nurse, and the mental health director, confirmed to the auditor that all female victims of sexual abuse, especially those who had experienced vaginal penetration, would be offered pregnancy testing. If the individual tested positive, the individual would be explained lawful options. The auditor interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals reported receiving care from medical and mental health. All four incarcerated individuals are male, so they offered no information for this standard. The auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the audit. None of the cases involved vaginal penetration, so the auditor was unable to confirm additional information for this provision. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(f). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure states, "Continued evaluation and treatment of medical and mental health needs related to sexual abuse will be provided in accordance with the patient's desire for treatment and the community standard of care. Services may be provided through sick call, chronic care clinics, and regular annual health examinations. Prophylactic treatment and follow-up care for sexually transmitted or other communicable diseases (e.g., HIV, Hepatitis B) are offered to all victims, as appropriate."

During the onsite phase of the audit, the auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals reported receiving care from medical and mental health. None were provided testing and prophylactic medications, as their assaults were not to the level that required such testing or follow-up or ongoing care. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(g). In the PAQ, the auditor was provided *Wellpath Palm Beach County Jail Policies & Procedures HCD-100-F-06 Response to Sexual Abuse*. The procedure

states, "Treatment services are provided free of charge to every victim of sexual abuse, regardless of whether the victim discloses the name of the abuser or fails to cooperate with any investigation arising out of the incident."

During the onsite phase of the audit, the auditor also interviewed four (4) incarcerated individuals who had reported an incident of sexual abuse or sexual harassment. All four incarcerated individuals reported receiving care from medical and mental health. All four incarcerated individuals told the auditor that services provided to them after the incident were at no cost. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.83(h). This provision is for prisons and does not apply to the Palm Beach County Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86 Sexual abuse incident reviews

Auditor Overall Determination: Meets Standard

Auditor Discussion

The following evidence was analyzed in making the compliance determination:

1. Documents: (*Policies, directives, forms, files, records, etc.*)
 1. *PBSO COP 934.00 Sexual Offenders and Victims*
 2. *PREA AIR (After Incident Review) Meeting Minutes*
 3. *115.86 Sexual Abuse Incident Review*
 4. *Sexual Abuse Investigation Files*
2. Interviews:
 1. Agency Head
 2. PREA Compliance Manager
 3. Specialized staff

Findings (by provision):

115.86(a). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "For each incident of sexual assault there will be a formal sexual abuse incident review conducted at the conclusion of every sexual abuse investigation including when the allegation has not been substantiated, unless the allegation has been determined to be unfounded." In the PAQ, the agency reported there were two (2) incident review meetings completed following the sexual abuse investigations over the last 12 months prior to the audit.

During the onsite phase of the audit, the auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the

onsite audit. The auditor located the completed after incident review in the two files where the investigation outcome was not unfounded. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(b). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "This review will occur within 30 days of the conclusion of the investigation."

During the onsite phase of the audit, the auditor reviewed the agency's 30 sexual abuse and sexual harassment investigation files from the 12 months prior to the onsite audit. The auditor located the completed after incident review in the two files where the investigation outcome was not unfounded. The auditor noted that the after-incident reviews were completed within 30 days following the completion of the investigation as required. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(c). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "The review team shall include at a minimum, the PREA coordinator, supervisors, detectives, medical and mental health practitioners, and other individuals the PREA coordinator deems necessary." In the PAQ, the auditor was provided a copy of the *PREA AIR (After Incident Review) Meeting Minutes* for his review. The meeting minutes show the meeting facilitator (the PREA Coordinator), lists the members who attended the meeting, and a description of the sexual abuse allegations that are being reviewed during the meeting. A form, entitled *115.86 Sexual Abuse Incident Review*, is completed for each allegation reviewed. The form lists the required items for review that are direct from the PREA Standard. The form is then signed by the PREA Coordinator.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel explained that the incident reviews following completed investigations are extremely important to the process to ensure sexual safety for the incarcerated individuals. The incident review is the best way to evaluate policy failures, physical plant issues, motivations of the incarcerated individuals, or staff failures which may have led to the individual's opportunity to perpetrate sexual abuse within the facility. Involving the correct administrative staff, as well as shift personnel, ensures that the agency receives a complete picture of exactly what happened during the incident. The auditor reviewed the agency's 30 sexual abuse investigation files from the 12 months prior to the onsite audit. In the two (2) files where the completed sexual abuse incident review document was included, the auditor was able to see a full review to verify the Colonel's statement. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(d). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, "Consideration should be given as to whether the allegation was motivated by race, ethnicity, gender identity, gay, lesbian, bisexual, transgender, and intersex status, or gang affiliation. Other factors to be considered are the adequacy of staffing levels and the level of monitoring technologies. A report of findings will be generated citing determinations and recommendations for

improvement. Such recommendations shall be implemented, where appropriate. Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse. Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse.”

During the onsite phase of the audit, the auditor interviewed two (2) staff members who participated in the sexual abuse incident reviews. They both confirmed for the auditor that each incident review includes a review of all the items listed in this provision. One (1) said that without this full review, the agency would not continue to improve and provide an atmosphere of sexual safety. The auditor interviewed the PREA Compliance Manager as well. She made it clear that these incident reviews are important for the facility to not just say that sexual safety is important, but to show to staff and all of administration that it is important. If they identify an action that must be taken following the review, the action must be taken immediately. The auditor also interviewed the Colonel, the Agency Head. The Colonel confirmed that the incident reviews following completed investigations were extremely important to the process to ensure sexual safety for the incarcerated individuals. The incident review is the best way to evaluate policy failures, physical plant issues, motivations of the incarcerated individuals, or staff failures which may have led to the individual’s opportunity to perpetrate sexual abuse within the facility. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.86(e). In the PAQ, the facility provided *PBSO COP 934.00 Sexual Offenders and Victims*. The procedure states, “The report following an incident review shall be submitted to the PREA Coordinator and the agency head.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> <p>Findings (by provision):</p> <p>115.87(a). The agency provided the auditor with <i>PBSO COP 934.00 Sexual Offenders and Victims</i> in the PAQ. The procedure states, “The PREA coordinator or designee shall review all cases of alleged inmate sexual assault/battery and staff sexual misconduct/harassment to ensure that the incidents are accurately tracked in</p>

accordance with current Department of Justice PREA Standards. This report shall include incident data collected by using a uniform, standardized instrument and set of definitions.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(b). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states “This data is aggregated annually through a collection of information from incident based documents including reports, investigation files, and sexual abuse incident reviews.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(c). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, “This report shall include incident data collected by using a uniform, standardized instrument and set of definitions.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(d). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, “The PREA coordinator or designee shall review all cases of alleged inmate sexual assault/battery and staff sexual misconduct/harassment to ensure that the incidents are accurately tracked in accordance with current Department of Justice PREA Standards.” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(e). The agency does not contract with any facility or contracted agency for the confinement of its incarcerated individuals. Therefore, this provision does not apply. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.87(f). The agency completes the *Survey of Sexual Violence (SSV)* when the request is received from the Department of Justice. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Palm Beach County Sheriff’s Office 2024 Annual PREA Report</i> 3. <i>Palm Beach County Sheriff’s Office Department of Corrections</i>

Webpage

2. Interviews:

1. Agency Head
2. PREA Coordinator
3. PREA Compliance Manager

Findings (by provision):

115.88(a). The agency provided the auditor with a copy of the *Palm Beach County Sheriff's Office 2024 Annual PREA Report* in the PAQ. The Annual Report is fairly detailed and includes a description of the agency's efforts to prevent, detect, and respond to incidents of sexual abuse and sexual harassment. The report provides a comparison of the sexual abuse and sexual harassment case data from 2023 and 2024, an analysis of the data, and corrective action taken by the agency.

The auditor interviewed the Colonel, the Agency Head, during the onsite phase of the audit and discussed the agency's annual report. He stated the report was prepared by the PREA Coordinator utilizing the agency's annual data and then submitted to him for review and approval. The report includes a corrective action plan based on indications found in the annual data. The auditor interviewed the PREA Coordinator who confirmed the annual data collection. She stated she reviews the outcomes of the sexual abuse investigations as well as the locations of the incidents. She looks for patterns of behavior or common trends. All issues are reviewed, and actions are taken for prevention of future incidents, which may require training and education.

This information is then written into the annual corrective action plan. The auditor also interviewed the PREA Compliance Manager, who agreed with the PREA Coordinator. In her role, she maintains the data and prepares the report for the PREA Coordinator. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88(b). The agency provided the auditor with a copy of the *Palm Beach County Sheriff's Office 2024 Annual PREA Report* in the PAQ. The Annual Report includes a comparison of the current year's data and corrective actions with those from the prior year. The report also provides an assessment of the agency's progress in addressing sexual abuse. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.88(c). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, "Aggregate data and reports, after approval by the Sheriff, shall be made available to the public on the PREA section of the PBSO website." The auditor accessed the Sheriff's Office website, went to the PREA page, and located the agency's Annual Report for 2017 through 2024 posted to the page, as required.

During the onsite phase of the audit, the auditor interviewed the Colonel, the Agency Head. The Colonel stated the report was prepared by the PREA Coordinator utilizing the agency's annual data and then submitted to him for review and approval. Based on this analysis, the auditor finds the facility in compliance with this provision.

	<p>115.88(d). The agency provided the auditor with <i>PBSO COP 934.00 Sexual Offenders and Victims</i> in the PAQ. The procedure states, “Prior to making this report publicly available, the agency shall remove all personal identifiers.”</p> <p>During the onsite phase of the audit, the auditor interviewed the PREA Coordinator. The PREA Coordinator stated that the annual report is posted without redacted information. The annual report is written without data that would require redaction. The auditor reviewed reports posted to the webpage and noted no redacted information or personally identifiable information in the reports. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. <i>PBSO COP 934.00 Sexual Offenders and Victims</i> 2. <i>Palm Beach County Sheriff’s Office Department of Corrections Webpage</i> 2. Interviews: <ol style="list-style-type: none"> 1. PREA Coordinator <p>Findings (by provision):</p> <p>115.89(a). <i>PBSO COP 934.00 Sexual Offenders and Victims</i> was provided to the auditor in the PAQ. The procedure states, “All case records associated with claims of sexual abuse, including incident reports, investigative reports offender’s information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule pursuant to Florida Law and 28 CFR Part 115 (PREA National Standards).”</p> <p>The auditor interviewed the PREA Coordinator during the onsite phase of the audit. The PREA Coordinator confirmed that all of the data is maintained on the secure computer server or in a locked cabinet in the secure office of the PREA Compliance Manager. The auditor observed the file storage in the office during the onsite audit. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.89(b). The agency provided the auditor with <i>PBSO COP 934.00 Sexual Offenders and Victims</i> in the PAQ. The procedure states, “Aggregate data and reports, after approval by the Sheriff, shall be made available to the public on the</p>

PREA section of the PBSO website.” The auditor accessed the Sheriff’s Office website, went to the PREA page, and located the agency’s Annual Report for 2017 through 2024 posted to the page, as required. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.89(c). The agency provided the auditor with *PBSO COP 934.00 Sexual Offenders and Victims* in the PAQ. The procedure states, “Prior to making this report publicly available, the agency shall remove all personal identifiers.”

During the onsite phase of the audit, the auditor interviewed the PREA Coordinator. The PREA Coordinator stated that the annual report is posted without redacted information. The annual report is written without data that would require redaction. The auditor reviewed reports posted to the webpage and noted no redacted information or personally identifiable information in the reports. Based on this analysis, the auditor finds the facility in compliance with this provision.

115.89(d). *PBSO COP 934.00 Sexual Offenders and Victims* was provided to the auditor in the PAQ. The procedure states, "All case records associated with claims of sexual abuse, including incident reports, investigative reports offender’s information, case disposition, medical and counseling evaluation findings, and recommendations for post-release treatment and/or counseling are retained in accordance with an established schedule pursuant to Florida Law and 28 CFR Part 115 (PREA National Standards).” Based on this analysis, the auditor finds the facility in compliance with this provision.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: (<i>Policies, directives, forms, files, records, etc.</i>) <ol style="list-style-type: none"> 1. Agency website 2. Interviews: <ol style="list-style-type: none"> 1. PREA Coordinator <p>Findings (by provision):</p> <p>115.401(a). This was the fourth audit completed by the Palm Beach County Department of Corrections. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(b). This is the first year of the fifth PREA audit cycle. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>

	<p>115.401(h). During the onsite phase of the audit, the auditor was given the opportunity to complete a full site review. This included full access to all areas of the institution, so the auditor could assess all operations and talk with staff and incarcerated individuals. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(i). During the onsite phase of the audit, the auditor was provided with all documentation requested to properly review and verify all operations related to the PREA standards. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(m). During the onsite phase of the audit, the auditor requested to interview a total of 45 incarcerated individuals. The institution provided a private room for the auditor to meet with each individual for the interview, without interruption. Based on this analysis, the auditor finds the facility in compliance with this provision.</p> <p>115.401(n). The institution posted the required audit notice in every housing unit, on colored paper, printed in two (2) languages. The notices were also seen in public areas throughout the institution, including the public lobby. The audit notice included the auditor’s contact information and explained the process to send confidential information or correspondence. Based on this analysis, the auditor finds the facility in compliance with this provision.</p>
--	---

115.403	Audit contents and findings
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>The following evidence was analyzed in making the compliance determination:</p> <ol style="list-style-type: none"> 1. Documents: <i>(Policies, directives, forms, files, records, etc.)</i> <ol style="list-style-type: none"> 1. Agency website 2. Interviews: <ol style="list-style-type: none"> 1. PREA Coordinator <p>Findings (by provision):</p> <p>115.403(f). This was the fourth audit completed by the Palm Beach County Department of Corrections. All prior audit reports are posted to the Palm Beach County Sheriff’s Office Department of Corrections webpage, as required by this provision and the auditor understands that this audit report will be posted properly after the agency receives it. Based on this analysis, the auditor finds the facility in compliance with this provision.</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.)	na
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	na

	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.)	
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	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	na
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or 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).)	yes
115.14 (b) Youthful inmates		
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.14 (c) Youthful inmates		
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	yes
115.15 (a) Limits to cross-gender viewing and searches		
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b) Limits to cross-gender viewing and searches		
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.15 (f)	Limits to cross-gender viewing and searches	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
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	yes

	formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	
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	yes

	U.S.C. 1997)?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b) Hiring and promotion decisions		
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c) Hiring and promotion decisions		
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d) Hiring and promotion decisions		
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes
115.17 (e) Hiring and promotion decisions		
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit,	yes

	whichever is later.)	
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.)	na
115.22 (a)	Policies to ensure referrals of allegations for investigations	
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse?	yes
	Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment?	yes
115.22 (b)	Policies to ensure referrals of allegations for investigations	

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

	inmates on how to avoid inappropriate relationships with inmates?	
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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	yes

	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)?	
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	yes

	prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes
115.41 (d)	Screening for risk of victimization and abusiveness	
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?	yes

	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent?	yes
	Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?	yes
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	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	yes

	being sexually abusive, to inform: Work Assignments?	
	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	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (d)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (e)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (f)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.42 (g)	Use of screening information	
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
	This provision is no longer applicable to your compliance finding, please select N/A.	na
115.43 (a)	Protective Custody	

	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes
115.43 (b) Protective Custody		
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	yes
115.43 (c) Protective Custody		
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes

	Does such an assignment not ordinarily exceed a period of 30 days?	yes
115.43 (d) Protective Custody		
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes
115.43 (e) Protective Custody		
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes
115.51 (a) Inmate reporting		
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes
115.51 (b) Inmate reporting		
	Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency?	yes
	Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials?	yes
	Does that private entity or office allow the inmate to remain anonymous upon request?	yes
	Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials	yes

	and relevant officials at the Department of Homeland Security? (N/A if the facility never houses inmates detained solely for civil immigration purposes.)	
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	yes

	is exempt from this standard.)	
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	yes

	inmates and these organizations and agencies, in as confidential a manner as possible?	
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	yes

	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?	
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	yes

	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?	
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	yes

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

	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).)	
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	na

	order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	
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?	no
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	yes

	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.)	
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	na
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	na
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes
115.82 (a)	Access to emergency medical and mental health services	

	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

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

	has been determined to be unfounded?	
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
	The subsection of this provision is no longer applicable to your compliance finding, please select N/A.	na
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes
115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes
115.87 (b)	Data collection	

	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes
115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes
115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes
115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	na
115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes
115.88 (a)	Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes
115.88 (b)	Data review for corrective action	

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

(b)		
	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	yes

	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.)	
--	---	--