

**Prison Rape Elimination Act (PREA) Audit Report
Adult Prisons & Jails**

Interim Final

Date of Report: December 4, 2018

Auditor Information

Name: **Wynnie Testamark**

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Company Name: **WTS Consultant Services, Inc.**

Mailing Address: **P.O. Box 693081**

City, State, Zip:

Miami, Florida 33169

Telephone: **786.258.4951**

Date of Facility Visit: **October 22 - 25, 2018**

Agency Information

Name of Agency:
The GEO Group Inc.

Governing Authority or Parent Agency (If Applicable):

Physical Address: **One Park Place,
Suite 700, 621 Northwest 53rd Street**

City, State, Zip: **Boca Raton, FL 33487**

Mailing Address: **One Park Place, Suite 700, 621
Northwest 53rd Street**

City, State, Zip: **Boca Raton, FL 33487**

Telephone: **561-999-5827**

Is Agency accredited by any organization? Yes No

The Agency Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Agency mission: **GEO's mission is to develop innovative public-private partnerships with government agencies around the globe that deliver high quality, cost-efficient correctional, detention, community reentry, and electronic monitoring services while providing industry leading rehabilitation and community reintegration programs to the men and women entrusted to GEO's care.**

Agency Website with PREA Information:

[http://www. Geogroup.com/PREA](http://www.Geogroup.com/PREA)

Agency Chief Executive Officer

Name: George C. Zoley

Title: Chairman of the Board, CEO and Founder

Email: gzoley@geogroup.com

Telephone: (561) 893-0101

Agency-Wide PREA Coordinator

Name: Phebia Moreland

Title: Director, Contract Compliance, PREA Coordinator

Email: pmoreland@geogroup.com

Telephone: (561) 999-5827

PREA Coordinator Reports to:

Daniel Ragsdale, Executive Vice President,
Contract Compliance

Number of Compliance Managers who report to the PREA Coordinator

57 (US Corrections), 41 (Reentry Services)
8 (Youth Services) , 3 (Lockups) = **109**

Facility Information

Name of Facility: South Bay Correctional & Rehabilitation Facility

Physical Address: 600 US Hwy 27 South,
South Bay, Florida 33493

Mailing Address (if different than above):

Telephone Number: (561) 992-9505, ext. 107

The Facility Is:

Military

Private for profit

Private not for profit

Municipal

County

State

Federal

Facility Type:

Jail

Prison

Facility Mission:

To protect the public safety, to ensure the safety of Department personnel, and to provide proper care and supervision of all offenders under our jurisdiction while assisting, as appropriate, their re-entry into society.

Facility Website with PREA Information: <http://www.geogroup.com/PREA>

Warden/Superintendent

Name: William Hamilton	Title: Warden
Email: Whamilton@geogroup.com	Telephone: 561-992-9505, ext. 103

Facility PREA Compliance Manager

Name: Charles Lawrence	Title: Assistant Warden, Programs
Email: chlawrence@geogroup.com	Telephone: 561-992-9505, ext. 107

Facility Health Service Administrator

Name: Denise Jones	Title: Director of Nursing
Email: djones@geogroup.com	Telephone: 561-992-9505

Facility Characteristics

Designated Facility Capacity: 1948	Current Population of Facility: 2068		
Number of inmates admitted to facility during the past 12 months			1428
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more:			1428
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more:			1428
Number of inmates on date of audit who were admitted to facility prior to August 20, 2012:			280
Age Range of Population:	Youthful Inmates Under 18: N/A	Adults: 18 and older	
Are youthful inmates housed separately from the adult population?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> NA
Number of youthful inmates housed at this facility during the past 12 months:			0
Average length of stay or time under supervision:			5 years or less
Facility security level/inmate custody levels:			Minimum Medium Custody
Number of staff currently employed by the facility who may have contact with inmates:			350
Number of staff hired by the facility during the past 12 months who may have contact with inmates:			350
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:			3

Physical Plant

Number of Buildings: 12	Number of Single Cell Housing Units: 0
Number of Multiple Occupancy Cell Housing Units:	6 multi occupancy cells (5 pods each)
Number of Open Bay/Dorm Housing Units:	1 open bay (4 pods each)
Number of Segregation Cells (Administrative and Disciplinary):	73

Description of any video or electronic monitoring technology (including any relevant information about where cameras are placed, where the control room is, retention of video, etc.):

Currently, South Bay Correctional & Rehabilitation Facility has an electronic monitoring system. South Bay Correctional & Rehabilitation Facility has numerous cameras strategically placed throughout the facility to enhance inmate monitoring and safety.

Medical

Type of Medical Facility:	Full clinical care, staffed 24/7, with a four-bed infirmary.
Forensic sexual assault medical exams are conducted at:	Lakeside Medical Center

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility:	101 (6 contractors/95 volunteers)
Number of investigators the agency currently employs to investigate allegations of sexual abuse:	111

Audit Findings

Audit Narrative

Wynnie R. Testamark, CEO of WTS Consultant Services, Inc., Department of Justice (DOJ) Certified PREA Auditor, conducted the PREA Audit of South Bay Correctional & Rehabilitation Facility (South Bay C&RF), a privately owned prison facility operated by the GEO Group, Inc. under contract with the Florida Department of Corrections (FDOC), on October 22 – 25, 2018.

Approximately four weeks prior to the audit, agency wide and facility specific supplemental documentation was mailed to this auditor via U S Express Mail, which was received, on October 2, 2018. The documentation arrived in digital format (on a flash drive). The documentation consisted of agency policies, directives and facility specific procedures responding to policy, samples of supporting documentation to each standard and the completed Pre-Audit Questionnaire.

Prior to the audit, the facility was provided with a memorandum noting the scheduled date of the facility audit and tour, contact information to be posted throughout the facility for inmates and staff to view. The facility onsite audit and tour was scheduled for, and conducted on, October 22 – 25, 2018.

The PREA Resource Audit Instrument used for Adult Prisons and Jails was provided by the National PREA Resource Center. There are seven sections: A) Pre-Audit Questionnaire; B) the Auditor Compliance Tool; C) Instructions for the PREA Audit Tour; D) the Interview Protocols; E) the Auditor's Summary Report; F) the Process Map; and G) the Checklist of Documentation.

On October 22, 2018, the Auditor met with Chadwick Anderson, Manager, Contract Compliance, GEO Corporate and discussed the PREA audit process and what to be expected during the on-site portion of the audit. Shortly thereafter, the auditor met with Warden Hamilton, and the South Bay Correctional & Rehabilitation Facility executive team for an entrance briefing. Immediately thereafter, we began with a tour of the facility. The tour began at 2:00p. and concluded at 4:30p. Accompanying on the tour was Warden Hamilton, Assistant Warden of Security, Assistant Warden of Operations, and Chadwick Anderson, Manager, Contract Compliance; GEO Corporate.

On day one of the audit, South Bay CF reported an inmate count of (2064). The South Bay Correctional & Rehabilitation Facility is a compound comprised of twelve (12) buildings; inclusive of which includes: six (6) multiple occupancy cells housing units with five (5) pods each (1) open bay with four (4) pods, Restrictive Housing Unit (RHU) with seventy-three (73) cells, and a Medical Unit staffed 24/7, with a four (4) bed infirmary.

While touring the facility, the auditor interacted with both staff and inmates. Areas toured were all housing units, medical, intake, reception screening, recreation, laundry, kitchen, library, program areas, visitation, commissary, maintenance, chapel, and all areas that's accessible to the inmate population.

The auditor also had the opportunity to observe the operations of the facility, and the interaction between staff and inmates. While touring, informal interviews with staff and inmates; observation of log-book entries of unannounced rounds being conducted by intermediate and higher level facility staff were made; and visually reviewed view of toilet and shower areas.

Following the tour, the auditor began formal random interviews of inmates and staff; inclusive of specialized staff and inmates present at the facility during the time of the audit. Interviews were conducted in areas of relative privacy.

Everyone interviewed participated willingly and appeared to have a good understanding of the PREA standards and the agency's response and requirements regarding the standards, zero tolerance policy and reporting procedures. Each inmate interviewed expressed a thorough understanding of their right to be free from sexual abuse, harassment, and retaliation. They also knew the appropriate channels in which to report allegations and they were aware of the medical and counseling services available to them.

The auditor reviewed the documentation provided by the facility prior to the facility visit. During the tour, the auditor randomly reviewed additional documentation throughout the facility in order to verify that the samples provided was consistent with routine facility practice. This included viewing postings, pamphlets, investigative files, inmates' files, employee personnel files, medical and mental health files, and training documentation for staff, contractors, volunteers, and inmates.

The auditor observed signage posted in English, and Spanish, throughout the facility- explaining inmates' rights to be free from sexual abuse and how to report allegations of sexual abuse and harassment. The agency's PREA Coordinator in collaboration with facility PREA Compliance Manager, and facility staff, has done a remarkable job ensuring the information is disseminated throughout the facility.

No forensic medical exams are conducted at South Bay Correctional & Rehabilitation Facility, but can provide emergency medical healthcare if needed. Forensic examinations by SANE/SAFE staff are provided at the outside hospital, Lakeside Medical Center.

The auditor conducted formal interviews with (2) Volunteer; (2) Investigative staff; (1) Agency Contract Administrator's designee, (0) SANE/SAFE staff; (86) random inmates; (1) Disabled inmates; (1) Hard of hearing inmate; (7) LGBT inmates; (0) Transgender inmates, (8) Limited English Proficient inmates; (0) Inmates with cognitive disorders, (0) inmate in restrictive housing, (0) inmates who report sexual abuse or harassment, (0) High risk of victimization inmate and (0) inmates who reported previous abuse or harassment during the intake screening.

South Bay Correctional & Rehabilitation Facility does not house youthful inmates.

There was no inmate who reported sexual abuse; who disclosed sexual victimization during risk screening; nor housed in segregation for risk of sexual victimization at South Bay Correctional & Rehabilitation Facility. As previously stated, all inmates interviewed demonstrated knowledge of the agency's zero tolerance policy for sexual abuse, harassment and retaliation, and were able to identify how to report allegations of sexual abuse, harassment & retaliation.

South Bay Correctional & Rehabilitation Facility employs (350) staff at the time of the audit.

The auditor formally interviewed (62) random staff; comprised of all shifts. (1) Contractor Administrator (HR); (3) Medical staff; (1) Mental Health staff (Contract); (3) Volunteers; (2) Investigator; (2) Staff who perform screening for risk of victimization and abusiveness; (3) Staff member on the incident review team; (2) staff member in charge with monitoring retaliation; (17) staff first responders, both security and non-security staff interviewed; (3) Intake staff members; PREA Compliance Manager, Shift Supervisors.

In conclusion, a total of (62) staff from all three shifts, and (86) inmates' formal interviews were conducted. Formal interviews were conducted utilizing the approved PREA questionnaires from the PREA Resource Center. The random sample of inmates was selected from the general housing population.

South Bay Correctional & Rehabilitation Facility has not undergone any significant renovations or modifications during the past 12 months. Every area of the facility was observed as the standard requires and the auditor observed inmates being supervised throughout the audit.

After the on-site audit was completed, the auditor conducted an exit briefing with Facility Warden William Hamilton, and his executive team and provided a preliminary status of the audit findings. Chadwick Anderson, Manager, Contract Compliance, was in attendance from The GEO Group Corporate Office.

The agency was thanked for their cooperation prior to the audit and during the on-site visit. The auditor also commended staff on their work and commitment to creating a sexually safer environment and the Prison Rape Elimination Act.

Facility Characteristics

The South Bay Correctional & Rehabilitation Facility (South Bay CF), is a privately owned prison facility managed by the GEO Group, Inc. under contract with the State of Florida, Department of Management Services, Bureau of Private Prison Monitoring, to supervise Florida Department of Corrections offenders.

South Bay Correctional Facility is located at 600 US Highway 27 South, in South Bay, Florida, in Palm Beach County approximately, 55 miles west of West Palm Beach. There are approximately 21 acres inside the secure perimeter and approximately 80 acres outside the perimeter.

The facility consists of the following buildings: A large multi-functional building that houses administrative offices, training area, medical unit, intake/receiving area, vocational program areas, food service, laundry, maintenance, and the segregation unit. Other buildings include four double occupancy cellblock-housing units each with a capacity of 250 inmates and two larger housing units that can house 296 inmates.

Building E is an open-bay dormitory that houses the facility's Therapeutic Community (drug treatment program) that houses 270 inmates and can house up to 352 inmates. Building A has 5 general population double cell living units with a capacity of 250 inmates.

Building B has 5 general population double cell living units with a capacity of 250 inmates. Building C has 5 general population double cell living units with a capacity of 250 inmates. Building D has 5 general population double cell living units with a capacity of 250 inmates. Building G has 5 general population double cell living units with a capacity of 296 inmates. Building H has 5 general population double cell living units with a capacity of 296 inmates.

The industry building houses a Graphics and Print Shop management by Prison Rehabilitative Industries and Diversified Enterprises, Inc. (PRIDE). This program has operated at South Bay CF Since November 2006 and currently employs offenders. In addition, The Image Validation Program employ up to fifty inmates, where inmates verify license plate numbers with video from tollbooth cameras.

The segregation unit has 4 wings of single occupancy cells. Two of the wings have a capacity of 20 and the other 2 have a capacity of 18, totaling a capacity of 76 beds for administrative confinement, disciplinary confinement, or self harm observation status inmates. The segregation unit includes an outdoor covered recreation area.

The facility's security consists of two perimeter fences. The inner fence is ten feet high and the outer is twelve feet in height. The fences are a minimum of twenty feet apart and there is a zoned microwave detection system between the fences. Additionally the inner fence has two rows of razor wire at the top and bottom of the fence. The outer fence has three-double rows of razor wire at the bottom and two rows at the top. There are 34 perimeter security lights allowing for a well-lit perimeter at night. The entire fence is divided into 22 zones.

There are cameras throughout the institution monitoring the grounds and perimeter and recorded by DVR. Central Control monitors cameras. Central Control is able to effectively see the entire perimeter and throughout the complex.

All persons entering through the Facility Entrance go through a metal detector. A random number, specific number chosen daily, are subject to search: x-ray, pat down or wand searches. Correctional staff and guests are issued a man-down security device that is pin activated.

Medical services at the South Bay Correctional Facility are contracted through the Correct Care Solutions (CCS), and employ fulltime, part-time and contract health professionals to provide a full range of comprehensive medical, dental and mental health services 24/seven.

The facility has a physician and a designated health authority. The working relationship between medical, mental health, dental and security is remarkable. Medical staffs receives PREA refresher training annually.

Mission Statement

The mission of South Bay Correctional Facility is “to protect the public safety, to ensure the safety of Department personnel, and to provide proper care and supervision of all offenders under our jurisdiction while assisting, as appropriate, their re-entry into society”.

GEO’s mission is to develop innovative public-private partnership with government agencies around the globe that deliver high quality, cost efficient correctional, detention, community reentry and electronic monitoring service while providing industry leading rehabilitation and community reintegration programs to men and women entrusted to GEO’s care.

Summary of Audit Findings

Number of Standards Exceeded: 4

Standard 115.17: Hiring and promotion decisions

Standard 115.31: Employee training

Standard 115.33: Inmate education

Standard 115.35: Specialized training: Medical and mental health care

Number of Standards Met: 43

Number of Standards Not Met: 0

Summary of Corrective Action (if any) NONE

PREVENTION PLANNING

**Standard 115.11: Zero tolerance of sexual abuse and sexual harassment;
PREA coordinator**

All Yes/No Questions Must Be Answered by The Auditor to Complete the Report

115.11 (a)

- Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment? Yes No
- Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment? Yes No

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- 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 No

115.11 (c)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and FDOC Policy 125: Sexual Offense Reporting has a written plan mandating zero tolerance towards all forms of sexual abuse and sexual harassment and outlines the agency's approach to preventing, detecting and responding to such conduct. Both policies include definitions of prohibited behaviors and sanctions for those found to participate in these prohibited behaviors outlines the definitions of prohibited behaviors for inmates and staff.

GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), outline the responsibilities of the PREA Coordinator and the PREA Compliance Manager. In interview with the agency's PREA Coordinator, at an earlier audit date, and the PREA Compliance Manager, they both stated that they have sufficient time and authority to manage their PREA-related responsibilities.

Random staff interviewed, knew clearly the agency's' zero tolerance policy on sexual abuse and assault and the reporting process for PREA incidents. Inmates interviewed were aware of South Bay CF Zero Tolerance Policy on Sexual Abuse, Harassment, and Assault. This information is included in the issued Inmate Handbook and they are shown the PREA Orientation Video upon arrival.

Based upon review of GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), and FDOC Policy 125: Sexual Offense Reporting, observations of PREA postings, pamphlets, and interviews with facility Warden, Assistant Warden, agency PREA Coordinator, PREA Compliance Manager and random staff and inmates, South Bay CF meets this standard.

Standard 115.12: Contracting with other entities for the confinement of inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

- Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates OR the response to 115.12(a)-1 is "NO".) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

GEO is a private provider and does not contract with other agencies for the confinement of inmates; therefore, this standard is not applicable.

Standard 115.13: Supervision and monitoring

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? Yes No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration all components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? Yes No NA
- Does the agency ensure that each facility's staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? Yes No
- Does the agency ensure that each facility's staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? Yes No

115.13 (b)

- In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)
 Yes No NA

115.13 (c)

- 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 No

- 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 No
- 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 No

115.13 (d)

- 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 No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

South Bay Correctional & Rehabilitation Facility has an established staffing plan, which provides for adequate levels of staffing to protect inmates against sexual abuse. According to FDOC Policy 602.030: Security Staff Utilization, Post Order #3: Shift Supervisor, Facility Staffing Plan, Security Rosters, and Housing Logs of unannounced rounds, the agency has made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing and uses video monitoring to protect inmates against sexual abuse.

A "PREA Annual Facility Assessment" is completed by the PREA Compliance Manager and the Compliance Administrator and forwarded to Geo Corporate PREA Coordinator and the Corporate Divisional Vice President for review and signature.

The most recent PREA Facility Assessment completed on 8/17/2018, noted no deviations from the staffing plan and no recommendations were made for any changes to the current staffing levels. The facility covers any vacancies of security posts by utilizing overtime. Staffing reports are submitted to and monitored by FDOC to ensure contract requirements are being met. The Chief of Security reviews the staffing roster on a daily basis.

Additionally, according to the Chief of Security, the staffing plan was developed considering the generally acceptable correctional practices; any judicial findings, any findings of inadequacy from federal investigative agencies, any findings of inadequacy from internal or external oversight bodies, all components of the physical plant, the inmate population, the number and placement of supervisory staff, institutional programs and the shifts they occur on applicable state or local laws or regulations, the prevalence of substantiated and unsubstantiated incidents of sexual abuse and any other relevant information.

Agency's policies also mandate that facility management staff and mid-level supervisors will conduct and document unannounced PREA rounds within their respective areas to deter employee sexual abuse and sexual harassment. This practice was confirmed by interview with inmates and staff who reported frequent rounds being conducted on a daily basis.

During the past 12 months, according to documentation presented and reviewed, South Bay CF had no deviations from the staffing plan.

South Bay CF has an electronic monitoring system and have numerous cameras strategically placed throughout the facility.

Based on my review of FDOC Policy 602.030: Security Staff Utilization, Post Order #3: Shift Supervisor, Annual PREA Assessment, GEO Contract with Florida Department of Corrections & South Bay CF Staffing Pattern, South Bay CF Shift Rosters, Inspections Reports, Housing Unit Logs, and interviews with Assistant Warden (PREA Compliance Manager), Chief of Security, Shift Supervisors, staff and inmates, South Bay CF meets this standard.

Standard 115.14: Youthful inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.14 (a)

- 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 No NA

115.14 (b)

- 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 No NA

- In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (c)

- 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 No NA
- Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA
- Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

South Bay CF does not house youthful inmates; therefore, this standard does not apply.

Standard 115.15: Limits to cross-gender viewing and searches

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.15 (a)

- 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 No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates in non-exigent circumstances? (N/A here for facilities with less than 50 inmates before August 20,2017.) Yes No NA

Females are not housed at this facility

- 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 here for facilities with less than 50 inmates before August 20, 2017.) Yes No NA

Females are not housed at this facility

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? Yes No NA

Females are not housed at this facility

115.15 (d)

- Does the facility implement a policy and practice 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 No
- Does the facility require staff of the opposite gender to announce their presence when entering an inmate-housing unit? Yes No

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No

- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

- Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No
- Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Agency's policies and procedures addresses inmate pat searches, strip searches, body cavity searches and the limits to cross gender viewing and searches. Policy also states that staff members of the same gender may perform strip searches and specifying searches of transgender and intersex inmates.

South Bay CF does not conduct cross gender pat down searches, strip searches or body cavity searches. A staff member of the same gender conduct pat searches and these searches are documented in an Incident Report.

All security staff at South Bay CF has received training in how to conduct cross-gender pat down searches and how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible; consistent with security needs.

South Bay CF houses only male inmates.

No cross-gender strip-searches or cross gender visual body cavity searches have been performed at South Bay CF during the past 12 months.

Based upon review of FDOC Policy 602.018: Contraband Searches of Inmates, FDOC Policy 602.036: Gender Specific Security Positions, Shifts, Posts & Assignments, Training Logs, Training Curriculum, and interviews with Assistant Warden (PREA Compliance Manager), Supervisors and staff, South Bay CF meets this standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.16 (a)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- 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 No
- 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 No
- 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 No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- 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 No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?
 Yes No

115.16 (c)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The South Bay CF takes all necessary steps to ensure inmates with limited English proficiency have an opportunity to participate in and benefit from the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment.

A contract with Language Line Services, Inc. provides translation services of any other languages. Inmates with literacy problems or visual impairments are provided oral translations of PREA training material when needed. The agency does not use inmates as interpreters, readers of other types of inmate assistants. A list of staff identified as interpreters is provided by facility Warden.

Bilingual Posters were observed throughout the facility and in inmate housing units, library, and program areas. During the past 12 months, there were no instances where inmate interpreters, readers, or other types of inmate assistants have been used.

During the onsite, there were: (1) deaf, (8) LEP inmates interviewed; and a TTY phone observed for the hearing impaired.

Based on my review of FDOC Policy 602.053: Prison Rape: Prevention, Detection & Response, FDOC Policy 604.101: Americans with Disabilities Act Provision for Inmates, Unit Interpreters Memo, Language Line Contract, FDC Translator List, South Bay CF PREA Training Curriculum, Statement of Fact, posters, and signs throughout the facility, housing units, the PREA pamphlets, and interviews with staff and inmates, South Bay CF meets this standard.

Standard 115.17: Hiring and promotion decisions

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.17 (a)

- 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 No

- 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 No
- 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 question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- 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 No
- 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 question immediately above? Yes No

115.17 (b)

- Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone, or to enlist the services of any contractor, who may have contact with inmates? Yes No

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency: perform a criminal background records check? Yes No
- 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 No

115.17 (d)

- Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates? Yes No

115.17 (e)

- 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 No

115.17 (f)

- 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 No
- 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 No
- Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct? Yes No

115.17 (g)

- Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination? Yes No

115.17 (h)

- 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 No NA

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to FDOC Policy 33.601.202 & FDOC Policy 208.049: Background Investigation & Appointment of Certified Officers, GEO Application & FDMS Criminal History Face Sheet, Files of Staff hired w/in the past 12 months & Background checks, South Bay CF do not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer who may have contact with inmates, who has engaged in sexual abuse in prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community.

GEO Human Resource Service unit screens all applicants for the facility. Criminal background checks are completed before hiring any new employee. FDOC & GEO performs NCIC background checks and checks on all potential employees. For consideration for promotions or transfers, employees complete a "PREA Disclosure and Authorization Form Promotions – PREA Related.

The Departmental Policy for Background Investigation and Appointment of Certified Officers (208.049) does not allow hiring or promotions of anyone who has been convicted of sexual abuse in prison/jail or in community. Background checks are done on all employees, contractors and volunteers. Background checks (FCIC/NCIC) are conducted on all new hires. The department is connected as a level II employer and any arrest is provided to the department upon entry into the system. All volunteer and contract re-checks are completed annually and are up to date.

Background checks are completed on all employees and contractors every five years.

In the past 12 months, there have been eighty-five (85) persons hired at South Bay CF who may have contact with inmates who have had criminal background record checks.

In the past 12 months, there have been six (6) contracts for services at South Bay CF, where criminal background record checks were conducted on all staff covered in the contract that might have contact with inmates.

Based upon: FDOC Policy 33.601.202 & FDOC Policy 208.049: Background Investigation & Appointment of Certified Officers, GEO Application & FDMS Criminal History Face Sheet, Background Check of staff, volunteers/contractors, Background Check of New Hire, Promotional Information, GEO Application reviewed; and interview with Assistant Warden, PREA Compliance Manager, HR staff, Supervisors, and random staff, South Bay CF exceeds this standard.

Standard 115.18: Upgrades to facilities and technologies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.18 (a)

- 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 No NA

115.18 (b)

- If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Currently, the South Bay CF has an electronic monitoring system; and uses effectively placed security mirrors, see through wall partitions, privacy screens and security staffing to enhance inmate monitoring and safety.

South Bay CF has not installed or updated no video monitoring system, electronic surveillance system, or other monitoring technology since the last PREA audit.

The South Bay CF meets this standard.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.21 (a)

- 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 No NA

115.21 (b)

- 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 No NA
- 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 No NA

115.21 (c)

- 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 No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- 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 No
- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- 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? Yes No
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- 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 No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating entity follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- 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 attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to FDOC Policy 602.053: PREA- Prevention, Detection, & Response, Panhandle Forensic Nurse Specialists Region 3, and MOU with Abuse Counseling & Treatment, the facility follows a uniform evidence protocol for the collection and preservation of evidence for administrative and criminal investigations of sexual abuse.

The Inspector General's Office is responsible for all investigations of sexual abuse and/or sexual harassment at South Bay CF. In addition, they ensure that all evidence is collected and preserved according to evidence protocol established by the Department of Justice. Office of Inspector General also conducts the sexual assault investigations determined to be criminal investigations.

No forensic medical exams are conducted at South Bay CF but; emergency medical healthcare is provide if needed. Lakeside Medical Center and Panhandle Forensic Nurse Specialist Region 3 provides forensic examinations by SANE/SAFE staff.

These services are provided at no cost to the inmate. A victim advocate is provided to the inmate upon request to provide emotional support.

During the past 12 months, there were no forensic medical exams performed by SANE/SAFE staff.

In the past 12 months, there were no incidents that required the use of a victim advocate.

FDOC-OIG/ South Bay CF has current agreement with Panhandle Forensic Nurse Specialist-Region 3 to conduct medical examinations. Investigative staff confirms the Chain of Evidence Protocol during the interview process. Policy is no co pay for any PREA incident or follow-up. Mental health services and counseling are provided by agreement with Abuse Counseling & Treatment Center staff.

Based upon on, FDOC Policy 602.053: PREA- Prevention, Detection, & Response, Panhandle Forensic Nurse Specialists Region 3, and MOU with Abuse Counseling & Treatment Investigative, Medical, Mental Health staff interviews, and training certificates, South Bay CF meets this standard.

Standard 115.22: Policies to ensure referrals of allegations for investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.22 (a)

- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual abuse? Yes No
- Does the agency ensure an administrative or criminal investigation is completed for all allegations of sexual harassment? Yes No

115.22 (b)

- 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 No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

- If a separate entity is responsible for conducting criminal investigations, does such publication describe the responsibilities of both the agency and the investigating entity? [N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).] Yes No NA

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 108.003 - Investigative Process, 108.015 – Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations, 602.053 PREA- Prevention, Detection, & Response Interviews with Administrative staff and investigative staff verify that all reports of sexual abuse or harassment are reported to the OIG office.

The agency ensures that an administrative and/or a criminal investigation are completed for all allegations of sexual abuse and sexual harassment as defined in policy FDOC 108.015. All allegations of sexual abuse shall be investigated. In addition, procedures outline evidence protocols for administrative investigations and criminal prosecutions.

The agency's policy regarding referral of allegations for sexual abuse and sexual harassment is available on the agency website at: www.geogroup.com (Social Responsibility Section), and FDOC website at www.dc.state.fl.us; was reviewed by this auditor.

During the past 12 months, there have been twelve (12) (11 abuse/ 1 harassment) allegations of sexual abuse and sexual harassment; all twelve (12) allegations resulting in administrative investigations; and zero (0) allegation were referred for criminal investigation. Four (4) of these cases still remain "open". The auditor reviewed investigative cases reference, these allegations and investigations.

Based on the Warden, PREA Compliance Manager interviews, and reviewed policies/procedures: FDOC Policy 108.003 - Investigative Process, 108.015 – Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations, 602.053 PREA- Prevention, Detection, & Response, agency website: www.geogroup.com (Social Responsibility Section), FDOC website at www.dc.state.fl.us/PREA; MINS Reports, FDOC OIG Summary Reports, and PREA Incident Tracking Log, South Bay CF meets this standard.

TRAINING AND EDUCATION

Standard 115.31: Employee training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No
- 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 No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- 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 No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- 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 No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- 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 No

115.31 (c)

- Have all current employees who may have contact with inmates received such training?
 Yes No
- 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 No
- 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 No

115.31 (d)

- Does the agency document, through employee signature or electronic verification, that employees understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy: 602.053 PREA- Prevention, Detection, & Response and, GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA) addresses the agency's training requirements. All employees, contractors and volunteers receive FDOC and GEO PREA training on the agency's zero-tolerance policy for sexual abuse and sexual harassment at pre-service for all correctional staff, New Employee Orientation for non-correctional staff and annually as part of in-service training. The training curriculum was reviewed and found to contain all the requirements of the requirements of this standard.

Staff interviewed at South Bay CF was very knowledgeable about the agency zero-tolerance policy for sexual abuse and sexual harassment; How to fulfill their responsibilities concerning

prevention, detection, reporting, and response concerning sexual abuse and sexual harassment; The inmates' rights to be free from sexual abuse and sexual harassment; Inmate and employee's rights to be free from retaliation for reporting sexual abuse and sexual harassment; The dynamics of sexual abuse and harassment in confinement; The common reaction of victims to sexual abuse and sexual harassment; How to detect signs of sexual abuse and sexual harassment; How to avoid inappropriate relationships; How to communicate effectively and professionally with inmates (LBGTI); and how to comply with relevant laws related to mandatory reporting.

Employees who may have contact with inmates; receive refresher training on PREA requirements annually at in-service training and were knowledgeable of the zero tolerance policy and of their responsibilities related to the prevention, detection and response to sexual abuse and sexual harassment.

Training records are maintained for each employee. Training records assessed of 30 employees (31 security/11medical), confirmed staff are receiving the mandated PREA training. Employees acknowledged receiving and understanding this training by their signature on the GEO "PREA Training Acknowledgement" form as well as being documented in the employee's electronic training record.

During the past 12 months, there were 85 new hires at South Bay CF; that were trained on the PREA requirements. In addition, 265 employees, who may have contact with inmates, were trained or retrained on the PREA requirements.

Based on random staff, inmate, and PREA Compliance Manager interviews, staff training records, information packets, posters throughout the facility, and the following policies/procedures: FDOC Policy: 602.053 PREA- Prevention, Detection, & Response and, GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), FDOC PREA Curriculum, GEO PREA Training Acknowledgment and training files reviewed, South Bay CF exceeds this standard.

Standard 115.32: Volunteer and contractor training

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.32 (a)

- 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 No

115.32 (b)

- Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)? Yes No

115.32 (c)

- Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

All volunteers and contractors who have contact with inmates receive South Bay CF PREA Orientation training prior to assuming their responsibilities. The training includes the agency's zero tolerance and the policy and procedures regarding sexual abuse/harassment prevention, detection, reporting, and response including zero tolerance.

During the past twelve months, 101 (6 contractors / 95 volunteers), who have contact with inmates, have been trained in agency policies and procedures regarding sexual abuse/harassment prevention, detection, and response. Upon completion of the orientation training, the volunteer/contractor signs the Acknowledgment Form. Signed forms are maintained at the facility.

During onsite visit, five (5) volunteer/contractor training files were randomly selected and reviewed.

Based upon interviews with the PREA Compliance Manager, Training Specialist, and the following documentation: FDOC PREA Curriculum, Current Roster for Volunteers/Contractors, FDOC & GEO PREA Training Acknowledgment form/affidavit, and PREA Brochure, South Bay CF meets this standard.

Standard 115.33: Inmate education

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.33 (a)

- During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment? Yes No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? Yes No

115.33 (b)

- 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 No
- 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 No
- 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 No

115.33 (c)

- Have all inmates received such education? Yes No
- 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 No

115.33 (d)

- Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are deaf? Yes No

- Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled? Yes No
- Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills? Yes No

115.33 (e)

- Does the agency maintain documentation of inmate participation in these education sessions? Yes No

115.33 (f)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy: 602.053 PREA- Prevention, Detection, & Response and, 601.210: Inmate Orientation outlines the agency's requirements on inmate education. Incoming inmates receive information on FDOC zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Upon arrival and during orientation, inmates sign a form acknowledging receipt of the Inmate Handbook, which contains PREA information.

In addition, all inmates receive the FDOC PREA Brochure and receive comprehensive PREA education as part of the institutional orientation process. Inmates signed acknowledgement form and training information is stored electronically and at the facility.

PREA information provided is in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired or otherwise disabled as well as to inmates who have limited reading skills. Posters in both English and Spanish were notably displayed in various locations the housing units and throughout the facility.

South Bay CF admitted 1428 inmates during past 12 months who were given PREA information at intake.

During the past 12 months, 1428 inmates at South Bay CF (whose length of stay in the facility was for 30 days or more) received comprehensive education on their rights to be free from both sexual abuse/harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake.

At South Bay CF, there were 280 inmates who were admitted to the facility prior to August 20, 2012, who were so educated as required.

All inmates interviewed acknowledged receiving the training and were knowledgeable of the methods of reporting allegations of sexual abuse and sexual harassment, and counseling services available to them.

During onsite visit, sixty-one (61) inmate files were randomly selected and reviewed.

Based upon random interviews with staff/inmates, review of FDOC Policy: 602.053 PREA-Prevention, Detection, & Response and, 601.210: Inmate Orientation, GEO & FDOC Inmate Acknowledgement of Receipt of Orientation Form, Documentation of PREA Educational Materials (PREA Brochure), Inmate Orientation Handbook, and PREA Posters, South Bay CF exceeds this standard.

Standard 115.34: Specialized training: Investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.34 (a)

- 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 have received 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 No NA

115.34 (b)

- 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 No NA

- 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 No NA

- 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 No NA

- Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? [N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).] Yes No NA

115.34 (c)

- 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 No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on FDOC Policy 108.015 – Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations, mandates that all agency investigators receive specialized training in addition to the general PREA training provided to all employees.

Office of Inspector General investigates all PREA allegations at South Bay CF. The MOSS GROUP and The GEO Corporate PREA Coordinator provided the training. Completion of this training is maintained at the facility and electronically stored in the investigators' Employee Training file.

At South Bay CF, there are two (2) assigned investigators. The Investigators interviewed, acknowledged receiving specialized investigations training and was knowledgeable of their duties in conducting investigations, sexual abuse evidence collection and the evidence required to substantiate a case for administrative action or prosecution referral.

During onsite visit, twelve (12) investigation files were randomly selected and reviewed.

Based on my review of: FDOC Policy 108.015 – Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations, PREA Specialized Investigator Training Curriculum, Certificate of Completion Training Records (March 2014, November 2015 and October 2017), the interviews with Investigators, and the PREA Compliance Manager, South Bay CF meets this standard.

Standard 115.35: Specialized training: Medical and mental health care

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.35 (a)

- 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? Yes No

- 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? Yes No
- 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? Yes No
- 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? Yes No

115.35 (b)

- 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.) Yes No NA

115.35 (c)

- 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? Yes No

115.35 (d)

- Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? Yes No
- Do medical and mental health care practitioners contracted by and volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

At South Bay CF, medical and mental health staff receives specialized training in addition to training provided to all staff. All full and part time medical and mental health staff is required to complete all training outlined in this standard. HSB 15.03.36: Post Sexual Battery Action on Program (PREA) and Correct Cares Solutions (CCS) PREA Curriculum: outlines how 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; How to preserve physical evidence of sexual abuse; How to respond effectively and professionally to victims of sexual abuse and sexual harassment; and How and to whom to report allegations or suspicions of sexual abuse and sexual harassment.

Panhandle Forensic Nurse Specialists Region 3 provides forensic examinations by SANE/SAFE staff at Lakeside Medical Center.

These services are at no cost to the inmate.

Interviews with medical and mental staff disclosed that they are knowledgeable of their duties and responsibilities under PREA and know how to properly respond to or report an allegation of sexual abuse or assault. Also, Effective July 1, 2018, the CCS Contractors are now In House Health Care providers to inmates at South Bay CF.

Based on HSB 15.03.36: Post Sexual Battery Action, Specialized Medical and Mental Health PREA Training, CCS Certificate of Completion-Medical, Statement of Fact, Correct Cares Solutions (CCS) PREA Curriculum, Training Records, and GEO PREA Training Acknowledgment form, South Bay CF exceeds this standard.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.41 (a)

- 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 No
- 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 No

115.41 (b)

- Do intake screenings ordinarily take place within 72 hours of arrival at the facility?
 Yes No

115.41 (c)

- Are all PREA screening assessments conducted using an objective screening instrument?
 Yes No

115.41 (d)

- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No

- 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 No
- 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 No
- 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 No

115.41 (e)

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? Yes No
- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: history of prior institutional violence or sexual abuse? Yes No

115.41 (f)

- 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 No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a: Referral? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Request? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Incident of sexual abuse? Yes No
- Does the facility reassess an inmate's risk level when warranted due to a: Receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness? Yes No

115.41 (h)

- 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 No

115.41 (i)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on FDOC Policies 601.209: Reception Process- Initial Classification, 602.053: PREA Individual Inmate Assessments and Reviews, all inmates are assessed within 24hrs of arrival for potential mental & physical vulnerabilities; and within 72 hours for risk of being sexually abused by other inmates or sexually abusive toward other inmates.

The screening instrument includes whether the inmate has a mental, physical, or developmental disability, the age and physical build of the inmate, previously incarceration history, whether the inmate's criminal history is exclusively nonviolent, prior convictions for sex offenses whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming, past sexual victimization, self-perception of vulnerability.

Inmates are not disciplined for refusing answer questions during the screening process. Information obtained during the initial assessment and reassessment is placed in the inmate's classification file. Only authorized staff has access to these files.

During the past 12 months, there were 1428 inmates at South Bay CF (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other inmates within 72 hours of their entry into the facility.

Within the past 12 months, there were 261 inmates at South Bay CF (whose length of stay in the facility was for 30 days or more) who were reassessed for their risk of sexual victimization or of being sexually abusive within 30 days after their arrival at the facility based upon any additional, relevant information received since intake. FDOC implemented this protocol, three months prior to September 2018.

Based on interviews with PREA Compliance Manager, random staff and random inmates as well as review of policies/procedures and supporting documentation: FDOC Policy 601.209: Reception Process- Initial Classification, 602.053: PREA and MINS Incident reports, South Bay CF meet this standard.

Standard 115.42: Use of screening information

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.42 (a)

- 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 No
- 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 No
- Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments? Yes No
- 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 No
- 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 No

115.42 (b)

- Does the agency make individualized determinations about how to ensure the safety of each inmate? Yes No

115.42 (c)

- When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)? Yes No
- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems? Yes No

115.42 (d)

- Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate? Yes No

115.42 (e)

- Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? Yes No

115.42 (f)

- Are transgender and intersex inmates given the opportunity to shower separately from other inmates? Yes No

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policies 601.209: Reception Process- Initial Classification, 602.053: PREA Individual Inmate Assessments and Reviews, provides guidelines on housing and program assignments and for the management of transgender and intersex inmates.

All inmates at South Bay CF are assessed within 24hrs of arrival for potential mental & physical vulnerabilities; and within 72 hours for risk of being sexually abused by other inmates or sexually abusive toward other inmates.

Transgender or intersex (TI) inmate's housing is considered on a case-by-case basis, placement considers the inmate's health and safety, and whether the placement would present management or security problems; placement is reassessed as needed; TI inmate's own view with respect to his or her own safety is given consideration; TI inmates are given the opportunity to shower separately from other inmates.

South Bay CF does not house gay, bisexual, transgender or intersex inmates in dedicated units.

South Bay CF had zero (0) transgender inmates at the time of the audit.

At the time of the audit, there were seven (7) inmates at South Bay CF that identified as being gay. This Auditor interviewed five (5) of them.

Based on documentation reviewed: FDOC Policies 601.209: Reception Process- Initial Classification, 602.053: PREA, Individual Inmate Assessments and Reviews, Transgender/Intersex Inmate Classification Reassessments, LGBTI unit housing assignments, Inmate Showers, SOF (08/14/18) and interviews conducted, South Bay CF meet this standard.

Standard 115.43: Protective Custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.43 (a)

- 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 No
- 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 No

115.43 (b)

- 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 No
- 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 No
- 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 No
- 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 No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? Yes No

- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? Yes No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? Yes No

115.43 (c)

- 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 No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

- 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 No
- 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 No

115.43 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053: PREA Individual Inmate Assessments and Reviews, and FDOC Rule 33.602.220, 33.602.221; outlines the process for involuntary placement of 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.

If an assessment cannot be made immediately, the inmate may be placed in involuntary segregated housing for no more than 24 hours. Agency's policy further states that if involuntary segregated housing is used for the safety of the inmate as a means of separation, it can be used for no more than 30 days and a review will be completed every 30 days to determine whether there is a continuing need for separation from the general population.

In the past 12 months at South Bay CF, there were zero (0) inmates at risk of sexual victimization who were held in involuntary segregated housing for one to 24 hours awaiting completion of assessment.

During this audit period, South Bay CF has not placed any inmate in Involuntary or Voluntary protective custody solely due to being a high risk for victimization.

Based upon interviews conducted with the Warden, PREA Compliance Manager, FDOC Policy 602.053: PREA Individual Inmate Assessments and Reviews, and FDOC Rule 33.602.220, 33.602.221, Statement of Fact, and Housing Unit Assignments; South Bay CF meets this standard.

REPORTING

Standard 115.51: Inmate reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? Yes No
- 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 No
- 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 No

115.51 (b)

- 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 No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No
- Does that private entity or office allow the inmate to remain anonymous upon request? Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? Yes No NA

115.51 (c)

- Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties? Yes No
- Does staff promptly document any verbal reports of sexual abuse and sexual harassment? Yes No

115.51 (d)

- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

South Bay CF procedures: FDOC Policy 602.053: PREA Individual Inmate Assessments and Reviews, FDOC Sexual Abuse Awareness posting, GEO Inmate Handbook, PREA Inmate Brochure, specify multiple internal and external ways for inmates to report sexual abuse, sexual harassment, and retaliation. PREA reporting methods are given to inmates at intake, during orientation, in the PREA Brochure, FDOC Sexual Abuse Awareness postings throughout the facility.

Inmates can also call the PREA hotline by dialing #8477. This number accesses the Abuse Counseling & Treatment Center. They are also advised that they can report allegations through a third party or send an anonymous report. In addition, agency's policy mandates that staff accept all reports of sexual abuse and sexual harassment made verbally, in writing, anonymously and from third parties.

Random inmate interviews confirmed inmates knew the various ways in which they can report allegations and; random staff interviews confirmed staff was aware of the multiple ways in which inmates may report.

South Bay CF does not detain inmates solely for civil immigration purposes. However, Consular Official contact information is available to inmates.

Based upon review of the FDOC Policy 602.053: PREA Individual Inmate Assessments and Reviews, FDOC Sexual Abuse Awareness posting, GEO Inmate Handbook, PREA Inmate Brochure, Abuse Counseling & Treatment Center Posting, Statement of Fact, PREA Postings, Employee Handbook, 1st Responder Card, agency website: www.geogroup.com (Social Responsibility Section), FDOC website at www.dc.state.fl.us/PREA; observations and interviews with staff and inmates, South Bay CF meets this standard.

Standard 115.52: Exhaustion of administrative remedies

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.52 (a)

- Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse. Yes No NA

115.52 (b)

- 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 No NA

- 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 No NA

115.52 (c)

- 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 No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (e)

- 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 No NA
- 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 No NA
- 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 No NA

115.52 (f)

- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA
- 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 No NA

115.52 (g)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

According to FDOC Rules 33.103.005 & 33.103.006-7 Informal Grievance, and GEO Inmate Handbook; inmates are not required to file grievances concerning alleged incidents of sexual abuse and sexual harassment. There is no time limit on when an inmate may submit a grievance regarding an allegation of sexual abuse. The agency does not require an inmate to use any informal grievance process or attempt to resolve with staff an alleged incident of sexual abuse.

FDOC Rules 33.103.005 & 33.103.006-7: Informal Grievance, also states when an emergency grievance is received, the agency shall provide an initial response within two (2) business days. Thereafter, after receiving said emergency grievance; the agency will provide a decision within 5 calendar days. Moreover, the Warden or designee issues a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing.

The agency may discipline an inmate for filing a grievance related to alleged sexual abuse if the agency determines that the inmate filed the grievance with malicious intent.

In the past 12 months, there has been one (1) grievance related to sexual abuse or sexual harassment filed. There was one (1) grievance alleging sexual abuse that reached final decision within 90 days after being filed.

Based on FDOC Rules 33.103.005 & 33.103.006-7 Informal Grievance, Statement of Fact, GEO Inmate Handbook, the auditor review of grievances, interviews with PREA Compliance Manager, Supervisors specialized staff, random staff, and numerous formal and informal interviews of inmates, South Bay CF meets this standard.

Standard 115.53: Inmate access to outside confidential support services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.53 (a)

- 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 No
- 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? Yes No

- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- 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 No

115.53 (c)

- 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 No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Rule 602.053: PREA Individual Inmate Assessments and Reviews, FDOC Sexual Abuse Awareness posting, GEO Inmate Handbook, PREA Inmate Brochure, Abuse Counseling & Treatment Center Posting, ensures that inmates are provided with access to outside victim advocates for emotional support.

Currently inmates have access to outside advocacy services by access to addresses and telephone numbers of state, local and national crisis centers. Inmates are made aware of this information in the Inmate Orientation Handbook, FDOC PREA Pamphlet, and PREA Postings throughout the inmate housing area and facility.

Furthermore; victim services are stipulated and outlined by FDOC Rule 602.053; which addresses the inmates' rights and access to crisis intervention services, forensic examination, and victim advocate presence during the forensic examination and/or the investigative interview.

FDOC/South Bay CF and Abuse Counseling & Treatment Center have a contract whereas Abuse Counseling & Treatment Center agrees to provide advocacy services to inmates who are victims of sexual violence. Further, the contractor will maintain confidentiality with reference to individual participants receiving their services. The auditor reviewed this contract effective March 16, 2017.

A call to Abuse Counseling & Treatment Center is free and will not be monitored.

South Bay CF does not house inmates solely for immigration purposes.

Based upon review of FDOC Rule 602.053: PREA Individual Inmate Assessments and Reviews, FDOC Sexual Abuse Awareness posting, GEO Inmate Handbook, PREA Inmate Brochure, Abuse Counseling & Treatment Center Posting (Victim Advocate Posting), MOU between Abuse Counseling & Treatment Center & FDOC South Bay CF, Inmate Orientation Handbook, observations of posters/brochures and interviews with inmates and staff, South Bay CF meets this standard.

Standard 115.54: Third-party reporting

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No

- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Both FDOC Policy 602.053: Prison Rape: Prevention, Detection, and Response & GEO Policy: 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), confirmed the agency has a method to receive third party reports of sexual abuse and sexual harassment. Family members or other individuals may report verbally or in writing anytime they have knowledge or suspect an inmate has been sexually abused, sexually harassed, or requires protection.

Additionally, at South Bay CF outside parties can report verbally or in writing to the Facility Administrator. Also, this information is available on the GEO Corporate website at: www.geogroup.com (Social Responsibility Section), and FDOC website at www.dc.state.fl.us.

Third party reporting is also available via The Hot line, which directly connects to the Abuse and Counseling Center. Lastly, The third party grievance form is available on agency's website and citizens may complete report by accessing the OIG website. <http://www.dc.state.fl.us/apps/igcomplaint.asp>

This information was observed posted throughout the facility and available in housing units.

Based upon above-mentioned documentations, facility specific examples, and interviews with PREA Compliance Manager, Agency PREA Coordinator, observations, review of websites, random staff and inmates, South Bay CF is compliant.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.61 (a)

- 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 No

- 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 No
- 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 No

115.61 (b)

- Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions? Yes No

115.61 (c)

- 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 No
- 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 No

115.61 (d)

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 No

115.61 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053: Prison Rape - Prevention, Detection, and Response, provides clear guidelines to all staff regarding their obligation 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 the alleged incident took place at the inmates' current facility or not; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.

Based on review of employee training curriculum, 40 training files (30 security/10 medical), all staff, contractors and volunteers are to report immediately any knowledge or information regarding an incident of sexual abuse or sexual harassment or any inmate subject to risk of imminent sexual abuse. Any retaliation or suspected retaliation against inmates or staff is to be reported immediately.

Agency policy also, requires all reports and information related to allegations remain confidential to the extent necessary for treatment, investigation and for other management decisions.

Interviews with random staff all confirmed compliance and all articulated the reporting process and what is required of them when doing so. Each staff also knew the importance of confidentiality.

Based upon review of FDOC Policy 602.053: Prison Rape - Prevention, Detection, and Response, Statement of Fact, training curriculum, employee training files, and interviews with PREA Compliance Manager, random staff and medical/mental health staff, South Bay CF meets this standard.

Standard 115.62: Agency protection duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.62 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response specifically state all staff shall take immediate action to protect inmates at risk of imminent sexual abuse. The interviews with the PREA Compliance Manager, Supervisors, and staff all confirmed when an inmate is subject to substantial risk; the inmate will be located, assessed and take the appropriate action.

In the past 12 months, there were zero (0) instances where the facility determined that an inmate was subject to a substantial risk of imminent sexual abuse.

Based upon reviewed FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, Statement of Fact, and interviews conducted, South Bay CF meets this standard.

Standard 115.63: Reporting to other confinement facilities

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.63 (a)

- 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 No

115.63 (b)

- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? Yes No

115.63 (c)

- Does the agency document that it has provided such notification? Yes No

115.63 (d)

- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, addresses upon receiving an allegation that an inmate was the victim of sexual violence or staff sexual misconduct while confined at another institution or facility, Warden where the allegation was received shall notify the head of the institution or appropriate office of the agency where the alleged incident occurred within 72 hours after receiving the allegation. Notification is to be made utilizing a "DC6-210" and entered into MINS for appropriate handling.

This information is to be shared with the FDOC OIG and the PREA Compliance Manager who ensures that the allegation is investigated in accordance with the PREA standards and agency policy.

During the past 12 months, South Bay CF received zero (0) report that claimed or alleged that inmate was sexually abused while in the custody of an outside correctional facility, city or county jail, or any other law enforcement agency.

During the past 12 months, South Bay CF received one (1) report from an outside facility that reported an inmate in their custody had been allegedly sexually abused while in the custody of South Bay CF.

Based upon review of FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, Information Reports (DC6-210), and interviews with the PREA Compliance Manager, Investigators, Supervisors, and staff, South Bay CF meets this standard.

Standard 115.64: Staff first responder duties

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.64 (a)

- 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 No
- 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 No
- 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 No
- 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 No

115.64 (b)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, Statement of Fact; provided information explaining the duties of staff that are first responders to allegations of sexual abuse or acts of sexual abuse.

The policy requires all staff to follow the procedure as dictated by this standard, including the separation of the alleged victim from the alleged abuser, preservation of evidence and the crime scene and to not allow the victim or abuser to take any action that would destroy physical evidence if the alleged incident took place within a time frame that would still allow for collection of that evidence.

If the first staff responder is not a security staff member, the responder is required to request the alleged victim not take any actions that could destroy the evidence and notify security staff immediately.

Security and support staff interviewed was knowledgeable of the policy and the practice to follow. They reported that they knew that the alleged victim and abuser must be separated and how to preserve the crime scene and the evidence.

In the past 12 months, there were eleven (11) numbers of allegations that an inmate was sexually abused. Of those allegations, ten (10), incidents required implementing first responder duties.

Based upon random staff interviews and review of FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, and Statement of Fact, South Bay CF meets this standard.

Standard 115.65: Coordinated response

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.65 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, South Bay Facility PREA Coordinated Response Plan, was reviewed and the plan coordinates actions taken in response to an incident of sexual abuse among first responders, security, medical and mental health practitioners, Office of Inspector General, Investigators, and facility leadership.

Interviews with specialized staff confirmed they were knowledgeable about their individual and collaborative responsibilities.

The facility specific plan also addresses, SAFE/SANE hospitals, third party and anonymous reports, victim advocates, and notifications.

Based upon review of FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, South Bay Facility PREA Coordinated Response Plan, and interviews with Warden, PREA Compliance Manager, Investigators, Supervisors, Medical staff, and random staff; South Bay CF meets this standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.66 (a)

- Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limits the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted? Yes No

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Florida Department of Corrections has the ability to protect inmates from contact with abusers reference collective bargaining agreements. According to Statement of Fact, South Bay CF does not have a Collective Bargaining Agreement.

In the past 12 months, there have been four (4) incidents where staff had to be separated from an inmate.

Based upon Statement of Fact reviewed, and interviews with the Warden, and PREA Compliance Manager, South Bay CF meets this standard.

Standard 115.67: Agency protection against retaliation

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.67 (a)

- 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 No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- 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 No

115.67 (c)

- 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 residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- 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 No

- 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 No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- 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 No
- 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 No
- 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 No
- 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 No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

- In the case of inmates, does such monitoring also include periodic status checks?
 Yes No

115.67 (e)

- 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 No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response specifies, "inmate/or staff who report sexual abuse will be monitored for retaliation for at least ninety (90) days, with at least three (3) contact status checks to occur within the ninety (90) day monitoring period at the thirty (30), sixty (60), and ninety (90) day marks from the date of the allegation."

The policy also confers conduct and treatment, and changes in demeanor of staff and inmates that will be observed and monitored during the review period. Additionally, monitoring continues for at least 90 days unless the allegation of retaliation is determined to be unfounded.

Inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations will be protected from retaliation from other inmates and staff. 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 who fear retaliation would be protection measures used as per FDOC Policy 602.053.

The Assistant Warden (PREA Compliance Manager), and the Classification Supervisor, are responsible for monitoring retaliation (Assistant Warden monitors staff, and Classification Supervisor monitor inmates).

There have been no incidents of retaliation during this audit.

Based upon review of the FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, Statement of Fact and interview with the Warden, PREA Compliance Manager (Assistant Warden), and Classification Supervisor, South Bay CF meets this standard.

Standard 115.68: Post-allegation protective custody

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.68 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response & FDOC Rule 33-602.220: Administrative Confinement, addresses the process for placement in administrative confinement and states that it is a temporary confinement that may limit some conditions, and privileges for the purpose of security, order, and the effective management of the institution.

The aforementioned policy and rule also specifies that inmates will not be placed in involuntary segregation unless an assessment of all available alternatives has been made and a determination is made that no alternative is available. The Institutional Classification Team (ICT) will assess any inmate in these circumstances immediately but no more than 72 hours.

Also, inmates that are placed in protective custody on this basis shall have access to programs privileges, education, and work opportunities as stipulated in PREA Standard 115.43. If an inmate is placed in involuntary protective custody; inmate status is then reviewed every thirty days.

There were no inmates who alleged sexual abuse or were victims of sexual abuse held in involuntary segregation housing in the past twelve months.

Based on review of FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response & FDOC Rule 33-602.220: Administrative Confinement, Statement of Fact, and interviews with the, Warden, Assistant Warden (PREA Compliance Manager), and random sample of staff, South Bay CF meets this standard.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.71 (a)

- 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 No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- 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 No

115.71 (c)

- Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? Yes No
- Do investigators interview alleged victims, suspected perpetrators, and witnesses?
 Yes No
- Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? Yes No

115.71 (d)

- 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 No

115.71 (e)

- 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 No
- 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 No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- 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 No

115.71 (g)

- 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 No

115.71 (h)

- Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? Yes No

115.71 (i)

- 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 No

115.71 (j)

- 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 No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (I)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 108.015: Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations & FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response establishes zero tolerance standards for sexual abuse and sexual harassment at South Bay CF. The policies require that all instances and allegations of sexual abuse and sexual harassment will be reported and will be reported to the Inspector General and the Management Information Notification System (as outlined by Policy 108.007, Investigations) and the Emergency Action Policy 602.012. & 108.007, further, directs that the "OIG shall be notified and respond to the scene of the crime without unnecessary delay."

Agency guidelines also states that inmates who allege sexual abuse are not required to submit to a polygraph examination as a condition for proceeding with the investigation of such an allegation. Additionally, the departure of the alleged abuser or victim from the employment or control of the facility or agency does not provide a basis for terminating an investigation.

The facility refers all allegations of sexual abuse and sexual harassment to the Office of Inspector General. Since the last audit cycle, there were no allegations that were referred for prosecution.

During interview, investigators stated that a referral would be made to appropriate authority if an incident were found to be prosecutable. The agency retains all written reports pertaining to all investigations for as long as the alleged abuser is incarcerated or employed by the agency, plus five years.

The review of twelve (12) investigation files during the audit revealed all allegations received were immediately addressed.

Based upon review of FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, Policy 602.012: Investigations, Policy 108.015: Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations; Policy 108.007: Emergency Action, PREA Tracking Logs, PREA Investigative Reports (12), Statement of Fact and interviews with Classification Supervisor, PREA Compliance Manager (Assistant Warden), and Investigators, South Bay CF meets standard requirements.

Standard 115.72: Evidentiary standard for administrative investigations

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.72 (a)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

A review of FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, & FDOC Policy 108.003, Administrative Investigations; the Florida Department of Corrections/OIG utilizes the standard of a preponderance of the evidence (no higher than a preponderance of evidence) for a finding of administrative investigations. This was confirmed during my interview with Investigators.

Based upon review of the FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, & FDOC Policy 108.003, Administrative Investigations; PREA Investigation Reports, OIG Summary Reviews, and interviews with PREA Compliance Manager (Assistant Warden) and Investigators, South Bay CF meets this standard.

Standard 115.73: Reporting to inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.73 (a)

- 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 No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- 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 posted within the inmate's unit? Yes No
- 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 No
- 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 No
- 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 No

115.73 (d)

- 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 No

- 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 No

115.73 (e)

- Does the agency document all such notifications or attempted notifications? Yes No

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, and FDOC Policy 108.018: Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations; both stipulate that all inmates who make allegations of sexual abuse/harassment/and or misconduct; shall be informed in writing whether the allegations have been substantiated, unsubstantiated, or unfounded; or the whenever the staff is no longer assigned to the facility or employed with the Department.

Inmate notification is made via an “Inmate Notification PREA Staff Allegation (DC6-2080), and/ or an “Inmate Notification Administrative Outcomes” form. The Warden or designee is responsible for making notification. In addition, following an investigation into an inmate’s allegation of sexual battery against a staff member, the Case Inspector notifies the inmate.

All notifications are forwarded to the PREA Coordinator; upon completion.

During the past twelve months, five (5) notifications were made and documented to inmates at

South Bay CF. Interviews with the PREA Compliance Manager (Assistant Warden), and Investigators verified that the facility is following the procedures.

Based upon review of the FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, and FDOC Policy 108.018: Sexual Battery, Sexual Harassment & Sexual Misconduct Investigations, Closed Investigative Cases and interviews with the Warden, PREA Compliance Manager (Assistant Warden), and Investigators, South Bay CF meets this standard.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.76 (a)

- Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies? Yes No

115.76 (b)

- Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse? Yes No

115.76 (c)

- 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 No

115.76 (d)

- 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 No
- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 208.039: Employee Counseling & Discipline; Florida Statute 944.35; FAC 60L-36.005 and GEO Employee Handbook outlines disciplinary standards for employees, volunteers and contractors and meet the requirements set by the standard.

Agency procedures define termination as the presumptive sanction and that disciplinary history, circumstances of the act and sanctions of similar offenses will be considered. Staff who would have been terminated if not for their resignation will be reported to law enforcement agencies, unless the activity was not criminal, and to any applicable licensing bodies.

Staff is made aware of the zero-tolerance policy in the Employee Handbook and the penalties for violating that policy.

In the past twelve months, there have been no terminations or discipline imposed on any staff member for sexual abuse or sexual harassment at South Bay CF.

Based on review of: FDOC Policy 208.039: Employee Counseling & Discipline; Florida Statute 944.35; FAC 60L-36.005, GEO Employee Handbook, PREA Incident Reports Involving Staff, SOF, interviews with Warden, PREA Coordinator, PREA Compliance Manager (Assistant Warden), and random staff, South Bay CF meets this standard.

Standard 115.77: Corrective action for contractors and volunteers

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? Yes No

115.77 (b)

- In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response prohibit contractors or volunteers who engaged in sexual abuse to have contact with inmates and require they be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

The Investigators, confirmed they will investigate allegations reported against contractors/volunteers as any other PREA case and would refer allegations for criminal prosecution if warranted.

Review of facility volunteer package acknowledgement/ orientation forms verified that volunteers were knowledgeable of policies and procedures. There have been no instances in the past twelve months involving contractors or volunteers being accused of PREA violations with inmates.

Based upon reviewed FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response, Statement of Fact, and interviews with PREA Compliance Manager (Assistant

Warden), and Investigators, South Bay CF meets this standard.

Standard 115.78: Disciplinary sanctions for inmates

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.78 (a)

- 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 No

115.78 (b)

- 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 No

115.78 (c)

- 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 No

115.78 (d)

- 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 No

115.78 (e)

- 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 No

115.78 (f)

- 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 No

115.78 (g)

- Does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)
 Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Rules 33-601.314 Inmate Discipline, 33.601.301; 33.301.314; 33.601.800: Inmate Prohibited Conduct and Penalties, outlines disciplinary sanctions that may be imposed on inmates who engage in sexual abuse and sexual harassment. Inmates are subject to discipline internally for inmate on inmate sexual abuse. Inmates are only disciplined for sexual relations with staff in cases where it is determined to be without consent from staff.

Sanctions are 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. Furthermore, it shall be determined whether the inmate's mental disabilities or mental illness contributed to the individuals' behavior.

In the past 12 months, there have been zero (0) administrative finding of inmate on inmate sexual abuse that have occurred at South Bay CF.

In the past 12 months, there have been zero (0) criminal finding of guilt for inmate on inmate sexual abuse that occurred South Bay CF.

Based upon FDOC Rules 33-601.314 Inmate Discipline, 33.601.301; 33.301.314; 33.601.800: Inmate Prohibited Conduct and Penalties, Statement of Fact reviewed; and interviews with PREA Compliance Manager (Assistant Warden), Investigators, random staff and inmates, South Bay CF meets this standard.

MEDICAL AND MENTAL CARE

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.81 (a)

- 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? Yes No

115.81 (b)

- If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.) Yes No NA

115.81 (c)

- 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? Yes No

115.81 (d)

- 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 No

115.81 (e)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response; require that South Bay CF screen all inmates for risk of victimization and abusiveness upon arrival. At the initial intake screening, if the inmate has disclosed prior sexual victimization and/or previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate is referred for medical and mental health services.

Additionally, routine medical and mental health referrals will be seen within 14 days. All information about sexual victimization or abusiveness is strictly limited to medical and mental health staff and other staff as needed.

Medical screening information is shared with appropriate staff, as needed, to make housing, bed, work, education, and program assignments. Informed consents are obtained before reporting prior sexual victimization that did not occur in an institutional setting. Inmate interviews confirmed that medical and mental health services are available as needed.

Interviews with medical and mental health staff indicate that they are knowledgeable of their duties and responsibilities under PREA and know how to properly respond to or report an allegation of sexual abuse or assault.

In the past 12 months, 100% percent of inmates at South Bay CF who disclosed prior victimization during screening were offered a follow-up meeting with a medical or mental health practitioner.

In the past 12 months, 100% percent of inmates at South Bay CF who previously perpetrated sexual abuse, as indicated during the screening, were offered a follow up meeting with a mental health practitioner.

No forensic medical exams are conducted at South Bay CF. Forensic examinations by SANE/SAFE staff are provided at the Lakeside Medical Center. These services are provided at no cost to the inmate.

Based upon documentation reviewed: FDOC Policy 602.053, Prison Rape: Prevention,

Detection, and Response; Mental Health Referral and follow-up progress reports; and interviews with Medical and Mental Health staff and PREA Compliance Manager, South Bay CF meets this standard.

Standard 115.82: Access to emergency medical and mental health services

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.82 (a)

- 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 No

115.82 (b)

- 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 No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- 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 No

115.82 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

South Bay CF policies FDOC 602.053, Prison rape: Prevention, Detection, and Response; 401.010: Co-pay Requirement for Inmates; & HSB 15.03.36: Post Sexual Battery Medical Action; require that inmates who are victims of sexual abuse be afforded access to forensic medical examinations at an outside facility without financial cost where evidentiary or medically appropriate. Also, inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services.

Forensic examinations by SANE/SAFE staff are provided at Lakeside Medical Center.

These services are at no cost to the inmate.

In the past 12 months, there has been no access to emergency medical and mental health services required.

Based upon reviewed FDOC Policies 602.053, Prison rape: Prevention, Detection, and Response, 401.010: Co-pay Requirement for Inmates; & HSB 15.03.36: Post Sexual Battery Medical Action; and interviews with the Acting Director of Nursing, Medical staff and PREA Compliance Manager, South Bay CF meets this standard.

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

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.83 (a)

- 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 No

115.83 (b)

- 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 No

115.83 (c)

- Does the facility provide such victims with medical and mental health services consistent with the community level of care? Yes No

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if all-male facility.) Yes No NA

115.83 (e)

- 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.) Yes No NA

115.83 (f)

- Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate? Yes No

115.83 (g)

- 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 No

115.83 (h)

- If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

South Bay CF policies FDOC 602.053, Prison rape: Prevention, Detection, and Response; 401.010: Co-pay Requirement for Inmates; & HSB 15.03.36: Post Sexual Battery Medical Action; address all elements of the standards. Medical and mental treatment including evaluations, on-going care, and treatment to all inmates that have been identified as victims and/or abusers are provided at no cost to the inmates and are consistent with the community level of care.

In addition, inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate. Victims of sexual abuse or sexual harassment are offered mental health services and referrals for long-term continuity of care and treatment upon release from the facility and documented in the inmate's medical record.

South Bay CF through Correct Care Solutions offers mental health services to all known inmate abusers, if appropriate. Interviews with PREA Compliance Manager, medical and mental health staff, and inmates, all verified agency's process.

Section (d) & (e) of this standard are non- applicable as South Bay CF houses only male inmates.

Based on my review of FDOC 602.053, Prison rape: Prevention, Detection, and Response; 401.010: Co-pay Requirement for Inmates; & HSB 15.03.36: Post Sexual Battery Medical Action, Statement of Fact, interviews with Acting Director of Nursing, Medical and Mental Health staff, PREA Compliance Manager (Assistant Warden) and inmates, South Bay CF meets this standard.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.86 (a)

- Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded? Yes No

115.86 (b)

- Does such review ordinarily occur within 30 days of the conclusion of the investigation? Yes No

115.86 (c)

- Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners? Yes No

115.86 (d)

- 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 No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No
- 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 No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- 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 No

115.86 (e)

- Does the facility implement the recommendations for improvement, or document its reasons for not doing so? Yes No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

At South Bay CF, FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response requires that the facility conducts a sexual abuse incident review at the conclusion of every sexual abuse investigation, including whether the allegation has not been substantiated, unless the allegation was determined to be unfounded within 30 workdays of the conclusion of an investigation.

FDOC Policy 602.053, Prison Rape: Prevention, Detection, and Response also established a Sexual Abuse, Investigative Review Committee (SAIRC) that is responsible for reviewing sexual abuse incidents at the facility.

The SAIRC reviews: staffing levels where the incident occurred; motivations, including race, ethnicity, LGBTI identification, gang affiliation, etc.; examines the area where the incident allegedly occurred; assesses whether monitoring technology should be recommended; and prepares a report for improvements and submits the report.

The incident review team is comprised of the Assistant Warden (PREA Compliance Manager), Chief of Security, Classification Supervisor, with input from the investigator, mental health, medical, line supervisors/staff, and others as deemed appropriate to complete the review.

The review is documented and upon completion is forwarded to the Warden for his review and signature and then form is forwarded to the Office of Inspector General and the PREA Coordinator.

The standard requires agency to look at the different factors that possibly motivated the incident. The SAIRC makes recommendations based on their review of the incident. The facility shall then implement recommendations that result from the review, or document the reasons for not making the implementations.

Based on my review of FDOC Policy 602.053, Prison Rape: Prevention, Detection, and

Response; Sexual Abuse Incident Reviews, and interviews with the PREA Compliance Manager (Assistant Warden), Chief of Security, Classification Supervisor, and Acting Director of Nursing, South Bay CF meets this standard.

Standard 115.87: Data collection

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.87 (a)

- 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 No

115.87 (b)

- Does the agency aggregate the incident-based sexual abuse data at least annually? Yes No

115.87 (c)

- 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 No

115.87 (d)

- 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 No

115.87 (e)

- Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) Yes No NA

115.87 (f)

- 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 No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC South Bay CF collects accurate, uniform data for each allegation of sexual abuse at the facility. Agency Policy 602.053 Prison Rape: Prevention, Detection, and Response direct and outlines data collection and analysis. The PREA Compliance Manager at South Bay CF is responsible for collecting specific PREA data and submitting it to central office. The Agency PREA Coordinator is responsible for collecting data from the agency institutions/facilities and ensuring that such data includes the information necessary to complete the Federal Bureau of Justice Statistics "Survey of Sexual Victimization-Incident Form," (SSV-IA).

The data is used to assist the department in prevention, detection, and response policies, practices, and training. An annual report is prepared and compared to prior year reports, thus assisting in identifying problem areas, and taking corrective actions.

The agency provides data collected to the Department of Justice from the previous calendar year upon request. The agency collects the uniform data using a standardized instrument and data dictionary based on the most recent definitions provided by the Bureau of Justice Statistics,

The latest Annual Report on Sexual Victimization report covering the period 2017 is available on the agency website at: www.geogroup.com (Social Responsibility Section), and FDOC website at www.dc.state.fl.us/PREA; MINS Reports (Reports and Documents Section); was reviewed by this auditor.

Based on FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, FDOC 2017 Annual PREA Report, GEO 2017 Annual Report, PREA Monthly Incident Tracking Logs, MINS Reports, agency website at: www.geogroup.com (Social Responsibility Section), and FDOC website at www.dc.state.fl.us/PREA; MINS Reports reviewed; and interviews with Agency PREA Coordinator, and PREA Compliance Manager (Assistant Warden), South Bay CF meets the standard.

Standard 115.88: Data review for corrective action

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.88 (a)

- 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 No
- 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 No
- 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 No

115.88 (b)

- 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 No

115.88 (c)

- 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 No

115.88 (d)

- 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 No

Auditor Overall Compliance Determination

Exceeds Standard (*Substantially exceeds requirement of standards*)

Meets Standard (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)

Does Not Meet Standard (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response requires review of all data collected in order to assess and improve the effectiveness of its sexual abuse prevention and intervention program.

The PREA Coordinator prepares an annual report, which includes findings and corrective actions taken for each GEO facility. The annual report includes a comparison of the current year's data and corrective action with those from prior years. The report does not address any case specific information. Policy also allows for data to be redacted if it presents a threat to safety and security.

The latest Annual Report on Sexual Victimization report covering the period 2017 is available on the agency website at: www.geogroup.com (Social Responsibility Section); and FDOC website at: www.dc.state.fl.us/PREA; and MINS Reports; was reviewed by this auditor.

Based on FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, GEO policy #5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), FDOC 2017 Annual PREA Report, GEO 2017 Annual PREA Report, FDOC 2017 PREA Corrective Action Plan, South Bay CF 2017 PREA Corrective Action Plan, and websites viewed: www.geogroup.com (Social Responsibility Section); and FDOC www.dc.state.fl.us/PREA; South Bay CF meets standard.

Standard 115.89: Data storage, publication, and destruction

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.89 (a)

- Does the agency ensure that data collected pursuant to § 115.87 are securely retained?
 Yes No

115.89 (b)

- 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 No

115.89 (c)

- Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available? Yes No

115.89 (d)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, and GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), all data collected is securely retained for 10 years or longer as required by state statute. Policies also provides guidance for the control and management of all FDOC records. Prior to publishing the annual report, on the GEO and FDOC website, all personal identifiers are removed.

The 2017 Annual Report is made available to the public through the agency's website: <http://www.geogroup.com> (Social Responsibility Section); and FDOC website at: www.dc.state.fl.us/PREA, which was reviewed by this auditor.

Based on FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response, and GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), FDOC 2017 Annual PREA Report, FDOC 2017 PREA Corrective Action Plan, and GEO 2017 Annual PREA Report, South Bay CF meets this standard.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, 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? (N/A before August 20, 2016.)
 Yes No NA

115.401 (b)

- During each one-year period starting on August 20, 2013, 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? Yes No

115.401 (h)

- Did the auditor have access to, and the ability to observe, all areas of the audited facility?
 Yes No

115.401 (i)

- Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)? Yes No

115.401 (m)

- Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?
 Yes No

115.401 (n)

- 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 No

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)

- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

Based on FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response and GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), during the three-year period starting on August 20, 2013, and each three-year period thereafter, GEO's Contract Compliance Department ensures that each facility is audited at least once by a PREA Auditor who has been certified through the Department of Justice.

According to GEO's PREA Coordinator, during the three-year period beginning on August 20, 2013, GEO ensured that each of its facilities were audited at least once and continues to ensure that its facilities are audited every three years.

During the audit, the facility administration and staff provided the Auditor access to all areas of South Bay Correctional & Rehabilitation Facility. Any relevant documents or information requested; including electronically stored information was provided; and a private area and access to randomly selected inmates and staff for interviews was provided.

Additionally, posted signs advising how inmates could send confidential information or correspondence to the Auditor like legal counsel was observed throughout the facility and inmate housing units.

Inmates were notified six weeks before the audit on posted facility notices in both English and Spanish that they could send confidential correspondence that would be handled as legal mail and were provided the auditor's name and mailing address. No PREA-related correspondence from any inmates of South Bay Correctional Facility was received.

The Auditor reviewed web page: https://www.geogroup.com/PREA_Certification_Information containing the PREA Reports & FDOC website at: www.dc.state.fl.us/PREA

Based on information above mentioned, South Bay CF meets the standard.

Standard 115.403: Audit contents and findings

All Yes/No Questions Must Be Answered by the Auditor to Complete the Report

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports within 90 days of issuance by auditor. The review period is for prior audits completed during the past three years PRECEDING THIS AGENCY AUDIT. In the case of single facility agencies, the auditor shall ensure that the facility's last audit report was published. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or in the case of single facility agencies that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

- Exceeds Standard** (*Substantially exceeds requirement of standards*)
- Meets Standard** (*Substantial compliance; complies in all material ways with the standard for the relevant review period*)
- Does Not Meet Standard** (*Requires Corrective Action*)

The Auditor reviewed web page: https://www.geogroup.com/PREA_Certification_Information containing the PREA Reports & FDOC website at: www.dc.state.fl.us/PREA

Based on FDOC Policy 602.053 Prison Rape: Prevention, Detection, and Response and GEO Policy 5.1.2-A: Sexual Abusive Behavior Prevention & Intervention Program (PREA), GEO's PREA Coordinator ensures that this final report will be published on both: www.geogroup.com/PREA and www.dc.state.fl.us/PREA website; to be available to the public.

Based on information above mentioned, South Bay CF meets the standard.

AUDITOR CERTIFICATION

I certify that:

- The contents of this report are accurate to the best of my knowledge.

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

Auditor Instructions:

Type your full name in the text box below for Auditor Signature. This will function as your official electronic signature. Auditors must deliver their final report to the PREA Resource Center as a searchable PDF format to ensure accessibility to people with disabilities. Save this report document into a PDF format prior to submission.¹ Auditors are not permitted to submit audit reports that have been scanned.² See the PREA Auditor Handbook for a full discussion of audit report formatting requirements.

Wynnie R. Testamark

January 10, 2019

Auditor Signature

Date

¹ See additional instructions here: <https://support.office.com/en-us/article/Save-or-convert-to-PDF-d85416c5-7d77-4fd6->

² See *PREA Auditor Handbook*, Version 1.0, August 2017; Pages 68-69.