PREA Facility Audit Report: Final

Name of Facility: Baker Correctional Institution Facility Type: Prison / Jail Date Interim Report Submitted: NA Date Final Report Submitted: 04/20/2020

Auditor Certification			
The contents of this report are accurate to the best of my knowledge.			
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.			
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.		V	
Auditor Full Name as Signed: Lynni O'Haver Date of Signature: 04/2		0/2020	

AUDITOR INFORMATION		
Auditor name:	O'Haver, Lynni	
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Telephone number:	(239) 223-0947	
Start Date of On-Site Audit:	03/03/2020	
End Date of On-Site Audit:	03/06/2020	

FACILITY INFORMAT	FACILITY INFORMATION		
Facility name:	Baker Correctional Institution		
Facility physical address:	20706 Us Hwy 90 West, Sanderson, Florida - 32399		
Facility Phone			
Facility mailing address:			

Primary Contact	
Name:	AWP Paul Kish
Email Address:	paul.kish@fdc.myflorida.com
Telephone Number:	386-719-6005

Warden/Jail Administrator/Sheriff/Director		
Name:	Nan Jeffcoat	
Email Address:	nan.jeffcoat@fdc.myflorida.com	
Telephone Number:	386-719-6001	

Facility PREA Compliance Manager		
Name:	Paul Kish	
Email Address:	paul.kish@fdc.myflorida.com	
Telephone Number:	M: (386) 719-6005	

Facility Health Service Administrator On-site		
Name: Tiffany Roseke		
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Telephone Number:	386-719-6048	

Facility Characteristics		
Designed facility capacity:	1885	
Current population of facility:	1851	
Average daily population for the past 12 months:	1848	
Has the facility been over capacity at any point in the past 12 months?	No	
Which population(s) does the facility hold?		
Age range of population:	19-89	
Facility security levels/inmate custody levels:	Facility Level 5, Custodies Close to Community	
Does the facility hold youthful inmates?	No	
Number of staff currently employed at the facility who may have contact with inmates:	369	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	134	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	325	

AGENCY INFORMATION		
Name of agency:	Florida Department of Corrections	
Governing authority or parent agency (if applicable):		
Physical Address:	501 S Calhoun Street, Tallahassee, Florida - 32399	
Mailing Address:		
Telephone number:	850-717-3498	

Agency Chief Executive Officer Information:		
Name: Mark Inch		
Email Address:	Mark.Inch@fdc.myflorida.com	
Telephone Number:		

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

AUDIT FINDINGS

Narrative:

The auditor's description of the audit methodology should include a detailed description of the following processes during the pre-audit, on-site audit, and post-audit phases: documents and files reviewed, discussions and types of interviews conducted, number of days spent on-site, observations made during the site-review, and a detailed description of any follow-up work conducted during the post-audit phase. The narrative should describe the techniques the auditor used to sample documentation and select interviewees, and the auditor's process for the site review.

Audit Narrative

The Florida Department of Corrections, Baker Correctional Institution is located at 20706 U.S. Highway 90 W. Sanderson, Florida. Sanderson Florida is located in the northeast region of Florida approximately 40 miles west of Jacksonville Florida.

Baker Correctional Institution is participating in the Prison Rape Elimination Act (PREA) audit. The on-site portion of the audit was conducted by a certified Department of Justice PREA Auditor, at the above address on March 3 - 6, 2020. The assigned PREA Auditor is an independent sub-contractor with no conflict of interest, working for the primary contract holder for the Florida Department of Corrections. This is the second audit for Baker Correctional Institution; the first audit was completed on April 25 -27, 2017.

Baker Correctional Institution is referred as Baker C. I. by the Florida Department of Corrections staff members, therefore, for the purpose of this report, the Auditor will refer to Baker Correctional Institution as Baker C. I. Additionally, Baker C. I. PREA Compliance Manager is also the Assistant Warden of Programs, however for the purpose of this report, the Auditor will refer to the Assistant Warden of Programs as the PREA Compliance Manager. Baker Correctional Institution consists of the Main Unit, Work Camp, and Re-entry Center, unless stated otherwise, for the purpose of this report, the Auditor's use of Baker C. I. encompasses all (MU, WC and RE).

Pre-Onsite Audit Phase

On December 30, 2019, the Auditor sent an introduction email to the Florida Department of Corrections PREA Coordinator to discuss the facility's upcoming PREA audit and to request a conference call to discuss further specifics of the audit.

On January 2, 2020, the Auditor emailed the PREA Coordinator the PREA Audit Notifications (English/Spanish), which contained the mailing address (P.O. Box) for confidential correspondence from inmates or staff relating to PREA prior to, during, and after the PREA audit; the Auditor also requested the notifications be posted in accordance with the required standards. The Post Office box acquired for the audit was used strictly for correspondence from inmates or staff for the purpose of the PREA Audit.

The audit notifications contained the scheduled dates of the audit, the purpose of the audit, the Auditor's name and contact information, and a statement regarding the confidentiality of any communication between the Auditor and inmates who respond to the notice with the exception of mandatory reporting laws that may apply to the Auditor.

The Auditor did not receive any confidential correspondence from inmates or staff either prior to, during, or after the PREA audit.

During the on-site tour of the facility, the Auditor observed the audit notifications posted throughout the facility's Main Unit, Work Camp, Re-entry, and both satellite facilities, The Transition House of Dinsmore and the Bridges of America – The Jacksonville Bridge. The audit notifications were posted in visible locations were inmate traffic is high. These locations included every housing dormitory, throughout each building – programs, educational, and vocational – in assigned inmate work areas, (laundry, barbershop, and food service), Chapel, and Visitor Park (VP) and commissary store.

On January 10, 2020, a conference call with the Florida Department of Corrections Correctional Services Consultant (CSC) was conducted. Florida Department of Corrections utilizes Correctional Services Consultants to assist with organizing the audit process; it should be noted, the Auditor found the assistance of the CSC to be extremely helpful. With the sheer number of facilities under the agency's jurisdiction, the use of a CSC to coordinate the logistics of each facility's audit provides the Auditor with the opportunity of an efficient auditing process.

Following brief introductions, the CSC confirmed she would be the primary point of contact for Baker C.I. audit and the facility PREA Compliance Manager and additional support staff were tasked with providing the *PREA Audit Questionnaire (PAQ)* information and agency documentation. The Auditor and the CSC discussed the use of the PREA Online Audit System (OAS), purpose of the audit, audit logistics, audit schedule / timelines, goals, and expectations of the audit.

On January 27, 2020, the Auditor began a systematic review process of the *Pre-Audit Questionnaire* responses to each standard and the supporting documentation, policies, and procedures. Supporting documentation included, but not limited to:

- Staff training records (certified, civilian, contractor, volunteer)
- Inmate intake screenings & assessments
- Inmate medical & mental health assessments
- Inmate PREA education (initial & comprehensive)
- All Sexual abuse & sexual harassment Administrative Investigations March 2019 March 2020
 (Substantiated, unsubstantiated, inmate-on- inmate, staff-on-inmate)
- All Sexual abuse & sexual harassment Criminal Investigations March 2019 March 2020
 - (Substantiated, unsubstantiated, inmate-on-inmate, staff-on-inmate)

Upon completion of the systematic review of the PAQ and supporting documentation, the Auditor emailed the CSC on February 20, 2020, with a list of additional information that warranted clarification to the PAQ responses and upon completion of the supporting documentation review process. The requested information included:

- Clarification on standards/provisions showing conflicting responses in the OAS
- Clarification on documentation provided showing conflicting responses in the OAS
- Additional documentation requested on three standards
- Documentation missing on one standard

The facility clarified the conflicting responses on the *PREA Audit Request for Information* and uploaded the additional documentation into the OAS Supplemental file within an hour of the request. In addition to the Auditor's request, the following documents were also uploaded to the OAS Supplemental file:

- All hotline calls made in the 12 months preceding the audit
- All allegations of sexual abuse & sexual harassment reported in the 12 months preceding the audit
- All incident reports from the 12 months preceding the audit
- Staff roster (certified & civilian staff, contract, & volunteer; requested by shift assignment/work hours)
- Inmate Rosters by Housing location for Baker MU, Re-entry, Work Camp, Transition House of Dinsmore, & Jacksonville Bridge
- Camera & Security Information
- Inmates identified as LEP, Disabled, LGBTI
- Informal & Formal grievance reports
- Allegations for each unit
- Staff Roster (with assignment, title & shift)
- Diagram of the facility
- Copy of the FLDOC Inmate Handbook
- Full copy of FLDOC Procedure 602.053

On February 22, 2020, the Auditor emailed the CSC and provided the staff interviews list and documents/files to be reviewed during the on-site visit:

- Agency Head or Designee
- Administrative (Human Resources) Staff
- Agency Contract Administrator
- Classification Staff
- Contractors & volunteers who have contact with inmates
- Designated Staff who monitor retaliation
- Incident Review Team
- Intake Staff
- Intermediate or Higher-level Facility Staff
- Investigative Staff
- Medical & Mental Health Staff
- PREA Compliance Manager
- PREA Coordinator
- SANE/SAFE Staff
- Security Staff First Responders
- Staff who perform screening for risk of victimization
- File review personnel, volunteer/contractor, inmate & Medical and Mental Health (victims of SA/SH)
- All Baker C. I. PREA investigative case files

The total number of PREA hotline calls reported during the 12 months preceding the audit was zero. The number of sexual abuse and sexual harassment allegations in the 12 months prior to the audit (March 2019 – March 2020) was seven. The following charts provide a breakdown of the seven allegations:

Total Number of Allegatons			
	Inmate-on-Inmate	Staff-on-Inmate	Total
Substantiated	0	0	0
Unsubstantiated	2	0	2
Unfounded	0	0	0
In progress	4	1	5
Total	6	1	7

Total Number of Sexual Abuse Allegations				
	Inmate-on-Inmate Staff-on-Inmate Total			
Substantiated	0	0	0	
Unsubstantiated	1	0	1	
Unfounded	0	0	0	
In progress	4	1	5	
Total	5	1	6	

Total Number of Sexual Harassment Allegations				
Inmate-on-Inmate Staff-on-Inmate Total				
Substantiated	0	0	0	
Unsubstantiated	1	0	1	
Unfounded	0	0	0	
In progress	0	0	0	
Total	1	0	1	

Investigations			
Inmate-on-Inmate Staff-on-Inmate Total			
Administrative	1	0	1
Criminal	5	1	6
Total	6	1	7

Referred for Prosecution		
	Sexual Abuse	Sexual Harassment
Inmate-on-Inmate	0	0
Staff-on-Inmate< /td>	0	0

Research

During the pre-on-site audit phase, the Auditor conducted an internet search on the facility to include reviewing the agency website. The agency website contained multiple links to previous annual reports and audits for Baker C. I. as well as other facilities under the agency's jurisdiction. The Auditor reviewed the prior PREA Audit (April 2017) and the Annual Reports (§115.88). The Auditor also reviewed the mandatory reporting laws for the State of Florida.

The Auditor contacted Just Detention International, a health and human rights organization that seeks to end sexual abuse in all forms of confinement. The Auditor submitted an inquiry to determine if the agency had received any complaints from Baker C. I. within the past 12 months; a representative from Just Detention International informed the Auditor that Just Detention International had not received any complaints regarding Baker C. I. The Auditor also conducted research, specific to Baker C. I., on the websites of the Department of Justice Civil Rights Division and the Southern Poverty Law Center with negative results from each.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, contracts between FDOC and the Panhandle Forensic Nurse Specialist, the FDOC and the Women's Center of Jacksonville, Inc. and FDOC and the Gulf Coast Children's Advocacy Center, Inc. Each FDOC contract uses clear and concise language, provides the agency's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each.

The Auditor requested the contact information for the representative(s) from the Panhandle Forensic Nurse Specialist, the Gulf Coast Children's Advocacy Center, and the Women's Center of Jacksonville.

The Panhandle Forensic Nurse Specialist, Inc. is contracted to provide sexual abuse forensic examiners/sexual abuse nurse examiners (SANE/SANES) services for Baker C. I. The Panhandle Forensic Nurse Specialist, Inc. is a non-profit agency consisting of seven certified Sexual Assault Nurse Examiners and one certified Sexual Assault Forensic Examiner.

The Auditor conducted an interview with the certified SAFE Doctor, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department of Justice (DOJ) *National Protocol for Sexual Assault Medical Forensic Examinations Adults*. The SAFE Doctor explained when they receive a notification for services request from the facility, either herself or a SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either herself or one of her staff members are available 24/7. The SAFE Doctor verified that no forensic medical examinations have been conducted for Baker Correctional Institution for the past 12 months.

The Gulf Coast Children's Advocacy Center, Inc. is a non-profit rape crisis center that provides advocacy services for victims of sexual assault. The Gulf Coast Children's Advocacy Center provides inmates incarcerated at Baker C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Gulf Coast Children's Advocacy Center include providing mailing addresses and phone numbers of victim advocates and in-prison visits during forensic exams and investigatory interviews, if requested. The Gulf Coast Children's Advocacy Center also provides a toll-free outside reporting hotline for services, support, and is designated as the outside reporting hotline for Baker C. I. inmates. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested at least one phone in every dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Gulf Coast Children's Advocacy Center. The victim advocate confirmed the Gulf Coast Children's Advocacy Center provides the services, as stated in the contract, to the inmates incarcerated at Baker C. I.

The Women's Center of Jacksonville, Inc. is a non-profit rape crisis center that provides advocacy services for inmate victims of sexual assault. Advocacy services include providing a 24/7 toll-free rape crisis hotline staffed by certified victim advocates, provide a mailing address for inmate victims to send correspondence, provide a certified victim advocate for advocacy accompaniment during pre-scheduled investigatory interviews, and provide follow-up services and crisis intervention to inmate victims of sexual assault.

During the on-site phase of the audit, the Auditor conducted an interview with a certified rape crisis counselor and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Baker C.I. to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week.

On-Site Audit Phase

The Baker Correctional Institution is located at 20706 U.S. Highway 90 W. Sanderson, Florida. Sanderson Florida is located in the northeast region of Florida approximately 40 miles west of Jacksonville Florida. Under the jurisdiction of the State of Florida Department of Corrections, Baker C. I. Main Unit is classified as a Security Level 5 / Custody Level – Close, Medium, Minimum, and Community. The Baker Work Camp and Baker Re-entry are both classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community.

Baker Correctional Institution also contracts with other entities for the confinement of inmates, the Bridges of America, Inc. and the Transition House of Dinsmore, Inc.

Bridges of America – The Jacksonville Bridge Community Release Center and is located in Jacksonville Florida, approximately 40 miles east of Baker Correctional Institution Main Unit and the Transition House of Dinsmore is located in Starke Florida, approximately 35 miles southeast of Baker Correctional Institution Main Unit. Both are Community Custody Level facilities and house Community Release inmates provide a multitude of programs that help transition them back into the community upon release from prison.

Inmates accepted into the program must be gainfully employed during the day and work on substance abuse treatment, education, and vocation courses at night. To qualify for a Community Release Center, an inmate must have fourteen months or less left on their prison sentences. Once accepted into the program, Community Release inmates are required to pay subsistence for room and board, make court-ordered payments, send money home for family support, and are required to set money aside for savings upon their release.

During the on-site phase of the audit, the Auditor reviewed the contracts between the Florida Department of Corrections and Bridges of America-The Jacksonville Bridge (contract #C2959) and the Transition House (contract #C2798) both contracts contained the PREA obligation for the facilities to adopt and comply with the PREA Standards. Each contract outlines additional legal requirements in accordance with Section 945.05, Florida Statutes.

Florida Youthful Offender Act Section 958.11, Florida Statutes, requires the Department of Corrections to designate separate institutions and programs for youthful offenders. Baker C. I. is not designated as a youthful offender facility.

The rated capacity of Baker C. I. is 1885 with an average daily population (ADP) of 1848 for the 12 months preceding the audit. The inmate population on the day of the audit was 1827.

The Baker Correctional Institution is designed as a level one-security institution; the compound is surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by full time Security personnel. The compound has 13 housing units (dormitories) – ten open bay dormitories, two multiple occupancy (two man) cell housing units, and one housing unit designated with 131 cells designated as the segregated housing unit. Additional buildings on the compound include Administration building, Medical & Mental Health Department, and Classification, Chapel, Barbershop, Programs, Re-Entry, Educational, Vocational, Visiting Park, 2 Recreation Yards, Laundry, Cafeteria and Food Service as well as a number of other designated purpose buildings.

Administration Building, is outside the security fencing of the compound, and includes the administrative offices of the Facility Warden, Assistant Wardens, Secretary to the Warden, Captain, Classification Supervisor, and Inspector from the OIG, and offices for several Support Staff Members.

Dormitory's A - D are single story building's with dormitory style beds, each housing inmates with security level 5 / medium, minimum, or community custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory's E and F are two-story buildings with two-man cells, each housing inmates with security level 5 / close, medium, minimum, or community custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory G is a two-story building with segregation cells and housing inmates with security level 5 / custody level close, medium, minimum, or community custody level. This building houses inmates placed on Administrative Management, Protective Management, or Disciplinary Management.

The Classification, Medical, and Mental Health building is a single story building with administrative offices on one side for Classification and Program Staff. The other half of the building is designated for Medical and Mental Health staff offices, exam rooms, six-bed infirmary, three suicide observation cells, a

fully equipped emergency room, and a dental room for exams / procedures.

Vocational building is a single story building and houses the facilities plumbing and masonry programs. Educational building is a single story building and houses multiple classrooms and the inmate library / media center. Programs building is a single story building which has multiple classrooms for drug and therapy programs.

Facility Chapel is a single story building which has designated meeting place for religious activities.

Institutional Barber Shop is a one-story building, which is equipped with barber chairs, tools, and barber necessities and is staffed by qualified, trained hairstylists' inmates.

Food Service and Cafeteria building is a single story building; adequately equipped with cooking equipment and seating for food service.

Baker Work Camp compound is also surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has two open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park / Programs building, Cafeteria, Food Service, and Recreation Yard.

Baker Re-Entry Center is also surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has three open bay dormitories, Medical Laundry, Cafeteria, Food Service, Recreation Yard, and an area designated specifically for dog walking. One of the well-known programs offered at Baker Re-Entry is the T.A.I.L.S. Program (Teaching Animals and Inmates Life Skills).

On Tuesday, March 4, the first day of the audit, an entrance meeting was held with the Facility Warden, Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and a multitude of Facility Supervisors. Following the entrance meeting, the Auditor toured the facility from 0845 hours to 1230 hours. The Auditor was escorted by the Facility Warden, Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and various Facility Staff members.

On Wednesday, March 5, the second day of the audit, the Auditor toured the Baker Work Camp from 0930 hours to 1130 hours. The Auditor was escorted by the Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and several Baker Work Camp Facility Supervisors.

On Wednesday, March 5, the second day of the audit, the Auditor toured the Baker Re-entry Center from 1330 hours to 1600 hours. The Auditor was escorted by the Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and several Baker Re-entry Center Facility Supervisors.

On Thursday, March 6, the third day of the audit, the Auditor toured the Jacksonville Bridge Community Release Center and the Transition House of Dinsmore Community Release Center. The Auditor was escorted by the Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and Directors from each Community Release Center.

The Auditor used the *National PREA Resource Center, PREA Compliance Instrument-Instructions for PREA Audit Tour* when conducting the on-site review. All areas for each facility were made available to the Auditor and include all dormitories, medical area, intake and transfer, security control rooms, inmate classification, food service, laundry, barbershop, commissary, educational, vocational, and program areas, work assignment areas, visitor park, and facility Chapel.

During the tour, the Auditor observed opposite gender announcements, tested the inmate phone system in every housing dormitory, observed grievance collection boxes, viewed PREA Audit notifications posted throughout, and PREA educational material and contact information for rape crisis counseling and emotional support services. The Auditor observed PREA information posted in each dormitory, inmate common areas, recreational and educational buildings, and in the facility lobby.

The Auditor also observed multiple security cameras including the camera angles, privacy, and line of sight for shower and toilets. The Auditor did not observe any issues with privacy or line of sight; announcements are made when opposite gender enters the dormitory. The shower and bathroom areas within each dorm contain concrete privacy walls, which are constructed in such a manner that provides privacy as well as allowing staff to have a partial view of the inmate (walls covers midsection of the body); this allow privacy as well as ensuring the safety and security of all inmates. The Auditor did not observe any blind spots during the facility tour.

The Auditor observed supervision practices of unannounced rounds, supervision ratios and security staff ratios, and security staff posts throughout the facility. Security Staff demonstrated an inmate intake and transfer processes that also included the initial PREA education inmates receive upon arriving to the facility.

The Facility Staff provided a complete overview of the inmate classification process and the risk screening process. The Auditor was able to observe these processes when the Classification Supervisor demonstrated the interview process (inmate volunteer), by utilizing the *Inmate Risk Management System (IRMS)* and *Inmate Behavior Assessment Scale (IBAS)* to determine the inmate's risk screening, and needs assessment. The Offender Based Information System auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the Inmate Risk Management System. The Classification Supervisor provided the Auditor with a detailed overview of how the classification process begins upon their arrival to the facility, including one within 30 days of arrival, as well as multiple follow-up interviews during their incarnation at the facility.

Throughout the facility tour, the Auditor observed inmates participating in educational programs, various inmate movement throughout the facility, inmates participating in recreation, and inmates actively working in assigned jobs throughout the facility compound. The Auditor was able to observe the interaction between staff and inmates inside the housing units and throughout the facility and conduct informal interviews of certified staff, civilian staff, contract staff, and inmates in each dormitory and throughout the facility compound.

Baker C. I. reported 201 cameras installed and operational. Of the total, 180 are located in the interior of the buildings and 21 on the exterior. The interior cameras are located in the facility lobby, throughout the

facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and along the outside perimeter.

Staff Interviews

The PREA Auditor handbook requires Auditors to interview a representative sample of staff, supervisors, and administrators in the audited facility. Auditors must conduct interviews with a random sample of staff selected from varying shifts and work assignments, as well as targeted interviews with staff, which have specialized roles and responsibilities within the facility.

The Auditor conducted 20 random sampling of staff interviews. This random sampling of staff included at least one member from each shift, staff from diverse work assignments, supervisors and line staff, males and females, and staff of various diversities. There are two security staff shifts. Dayshift hours are 0700 - 1900 hours and nightshift hours are 1900 - 0700 hours. Contract medical shift hours are the same as the facility security staff and civilian support staff hours are 0800 - 1700 hours. At the time of the audit, the facility has 369 staff employed at the facility who have contact with inmates.

Thirty-two targeted staff interviews were conducted and were selected based upon their work assignment and subject matter expertise. Interviews were conducted in designated rooms that provided privacy and all interviews were conducted without interruption.

At the time of the audit, the facility has 134 contractors and 325 volunteers authorized to enter the facility and who may have contact with inmates. Interviews with staff were conducted in designated rooms that provided privacy and were all completed without interruption.

All staff interviews were conducted in accordance with the *National PREA Resource Center PREA Compliance Audit Instruments Interview Guide.* Upon arrival to the facility, the Auditor requested an updated employee roster to assist with the selection process for the random and targeted staff interviews. The Auditor conducted all interviews in a separate room which provided privacy and allowed for sufficient time to conduct each interview. A detailed list and quantities for each interviewed are listed below:

Staff Categories	Number of Interviews Conducted
Random Sample of Staff:	20
Agency and PREA Staff:	
Agency Head	1
Facility Warden	1
PREA Coordinator	1

PREA Compliance Manager	1
Specialized Staff:	
Agency Contract Administrator	1
Intermediate or Higher Level Facility Staff	4
Medical Staff	2
Mental Health Staff	1
Administrative / Human Resources Staff	1
SANE / SAFE Staff	1
Rape Crisis / Advocacy Center Staff	2
Volunteers	2
Contractors	3
Investigative Staff	1
Staff who perform Risk Screening	1
Staff of the sexual incident review team	1
Designated staff member monitoring retaliation	1
First Responders	2
Staff who supervise inmates in Segregated Housing	1
Intake Staff	2

Incident Review Team	1
Classifcation Staff	1
Total Random Staff Interviewed	20
Total Agency and PREA Staff	4
Total Specialized Interviewed	28
Total Staff Interviewed	52

Inmate Interviews

The inmate count on the first day of the audit was 1827. In accordance with the *PREA Auditor Handbook Table 1: Required Number of Inmate Interviews*, the Auditor was required to conduct 20 random sample inmate interviews. All inmate interviews were conducted in accordance with the *National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide.*

The Auditor conducted 58 random samples of inmate interviews. The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided; inmates interviewed included every housing dormitory and inmates of various diversities. The Auditor conducted all interviews in a separate room which provided privacy and allowed for sufficient time to conduct each interview.

In accordance with the *PREA Auditor Handbook Table 1: Required Number of Inmate Interviews*, the Auditor was required to interview at least 20-targeted inmates. The Auditor conducted 10 targeted inmate interviews. The facility provided documentation confirming they did not have the following targeted inmate categories housed at their facility at the time of the on-site review. As a result, these categories of inmates were not interviewed.

- Youthful inmates
- Inmates in segregated housing for high risk of sexual victimization
- Inmates who reported sexual abuse

As previously stated in the report, Baker C. I. does not house youthful inmates. Baker C. I. reported during the twelve months prior to the audit, there were no allegations of retaliation reported nor where there any inmates placed in segregated housing due to risk of sexual victimization.

During the twelve months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse allegations, however, the Auditor was provided with facility documentation showing three of the inmates had been released from the custody of the Florida Department of Corrections. The fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse or sexual misconduct allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Therefore, the categories of youthful inmates, inmates in segregated housing for high risk of sexual victimization, and inmates who reported sexual abuse were not interviewed.

All inmate interviews were conducted in accordance with the *National PREA Resource Center PREA Compliance Audit Instruments Interview Guide.* The Auditor requested an updated facility inmate roster to assist with the selection process for the random and targeted inmate interviews. All interviews were conducted in private and without interference. A detailed list and quantities for each interviewed are listed below:

Inmate Categories	Number of Interviews Conducted
Random Sample of Inmates:	58
Targeted Inmates:	
Inmates with a physical disability	1
Inmates with a cognitive disability	2
Inmates who are blind, deaf, or hard of hearing	1
Inmates who are limited English proficient	2
Inmates who identify as LGBTI	6
Total Random Inmates Interviewed	58
Total Targeted Inmates Interviewed	12
Total Inmates Interviewed	70

On-site Documentation Review

According to the information provided in the PAQ, during the past 12 months, Baker Correctional Institution reported nine allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually seven. After discussion, it was determined the additional two cases were outside the parameters of the 12 months preceding the audit and were counted inadvertently; therefore, for the purpose of this report, the total number of allegations of sexual abuse and sexual harassment are seven; one allegation of sexual harassment and six allegations of sexual abuse.

The sexual harassment allegation was inmate-on-inmate allegation and was closed by the Office of the

Inspector General as unsubstantiated. There were six sexual abuse allegations, included five inmate-oninmate, and one staff-on-inmate; one of the five inmate-on-inmate cases was closed by the Office of the Inspector General as unsubstantiated. At the time of the on-site phase of the audit, the remaining five sexual abuse investigations were pending a final disposition with the Office of the Inspector General.

The Auditor reviewed one administrative sexual harassment investigation and six criminal sexual abuse or sexual misconduct investigations. All of these cases were selected and reviewed based upon the outcome and the Auditor's requirement to review all of the required steps and processes to verify compliance with multiple PREA Standards.

Employee personnel files are maintained in the Human Resources Department at the agency's Central Office. Employee criminal background checks and training records are maintained in the employee personnel files. The Auditor reviewed documentation from twenty employee personnel files. The Auditor selected files of a newly hired employee, long-term staff members, recently promoted staff members, and employees with specialized training. All files reviewed contained the required training documentation, revealed thorough background investigations, and included updated documentation of current background investigations (five-year intervals) of current staff members.

The Auditor reviewed twenty-eight inmate records. These records were selected based upon the inmate sexual abuse investigations, length at facility, and inmates that disclosed sexual orientation as bisexual or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy. In the 12 months prior to the audit, the facility reported there were no inmates who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer.

Medical and mental health files are maintained in a secured section of the medical office. The Auditor reviewed six medical and mental health files. These files were reviewed based upon the screening for risk of sexual victimization and those inmates who identify as gay, lesbian, or bisexual. Medical files also contain a body chart, which is a form that is completed by medical staff when an inmate reports either a sexual harassment or sexual abuse allegation.

Type of File	Number of Files Reviewed
Administrative Investigative files	7
Human Resources (Personal / Training) files	20
Inmate Institutional Records	28
Medical & Mental Health files	6
Total number of files reviewed	61

The list below details the documentation reviewed from the various files:

Exit Briefing

At the conclusion of this audit, an exit meeting was held with the Facility Warden, Assistant Warden, PREA Compliance Manager, Correctional Services Consultant, and a multitude of Facility Supervisors to discuss the audit findings. The Auditor informed all in attendance the need to review on-site observations, documentation, and interview responses in order to determine compliance for each standard and provision

AUDIT FINDINGS

Facility Characteristics:

The auditor's description of the audited facility should include details about the facility type, demographics and size of the inmate or resident population, numbers and type of staff positions, configuration and layout of the facility, numbers of housing units, description of housing units including any special housing units, a description of programs and services, including food service and recreation. The auditor should describe how these details are relevant to PREA implementation and compliance.

Facility Characteristics

The Baker Correctional Institution is located at 20706 U.S. Highway 90 W. Sanderson, Florida. Sanderson Florida is located in the northeast region of Florida approximately 40 miles west of Jacksonville Florida. Under the jurisdiction of the State of Florida Department of Corrections, Baker C. I. Main Unit is classified as a Security Level 5 / Custody Level – Close, Medium, Minimum, and Community. The Baker Work Camp and Baker Re-entry are both classified as a Security Level 3 / Custody Level – Medium, Minimum, and Community.

Baker Work Camp compound is also surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control Room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has two open day dormitories. Additional buildings include the Administrative offices located off the Control Room, Visitor Park / Programs building, Cafeteria, Food Service, and Recreation Yard.

Baker Re-Entry Center is also surrounded by double fencing with multiple rolls of razor ribbon for security. Access to the compound is limited to one pedestrian access point secured by Control room personnel and one vehicular access gate with entrance regulated by Control Room personnel. The compound has three open bay dormitories, Medical Laundry, Cafeteria, Food Service, Recreation Yard, and an area designated specifically for dog walking. One of the well-known programs offered at Baker Re-Entry is the T.A.I.L.S. Program (Teaching Animals and Inmates Life Skills).

Baker Correctional Institution also contracts with other entities for the confinement of inmates, the Bridges of America, Inc. and the Transition House of Dinsmore, Inc.

Bridges of America – The Jacksonville Bridge Community Release Center and is located in Jacksonville Florida, approximately 40 miles east of Baker Correctional Institution Main Unit and the Transition House of Dinsmore is located in Starke Florida, approximately 35 miles southeast of Baker Correctional Institution Main Unit. Both are Community Custody Level facilities and house Community Release inmates provide a multitude of programs that help transition them back into the community upon release from prison.

Florida Youthful Offender Act Section 958.11, Florida Statutes, requires the Department of Corrections to designate separate institutions and programs for youthful offenders. Baker C. I. is not designated as a youthful offender facility.

The rated capacity of Baker C. I. is 1885 with an average daily population (ADP) of 1848 for the 12 months preceding the audit. The inmate population on the day of the audit was 1827.

The Baker Correctional Institution is designed as a level one-security institution. The compound, encompasses eighty-three buildings, is surrounded by double fencing with multiple rolls of razor ribbon for security.

Administration Building, is outside the security fencing of the compound, and includes the administrative offices of the Facility Warden, Assistant Wardens, Secretary to the Warden, Captain, Classification Supervisor, and Inspector from the OIG, and offices for several Support Staff Members.

Dormitory's A - D are single story building's with dormitory style beds, each housing inmates with security level 5 / medium, minimum, or community custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory's E and F are two-story buildings with two-man cells, each housing inmates with security level 5 / close, medium, minimum, or community custody level. These inmates are assigned jobs within the facility compound and do not leave the facility unless it is for an outside appointment, court appearance or transfer to another facility.

Dormitory G is a two-story building with segregation cells and housing inmates with security level 5 / custody level close, medium, minimum, or community custody level. This building houses inmates placed on Administrative Management, Protective Management, or Disciplinary Management.

The Classification, Medical, and Mental Health building is a single story building with administrative offices on one side for Classification and Program Staff. The other half of the building is designated for Medical and Mental Health staff offices, exam rooms, six-bed infirmary, three suicide observation cells, a fully equipped emergency room, and a dental room for exams / procedures.

Vocational building is a single story building and houses the facilities plumbing and masonry programs. Educational building is a single story building and houses multiple classrooms and the inmate library / media center. Programs building is a single story building which has multiple classrooms for drug and therapy programs.

Facility Chapel is a single story building which has designated meeting place for religious activities.

Institutional Barber Shop is a one-story building, which is equipped with barber chairs, tools, and barber necessities and is staffed by qualified, trained hairstylists' inmates.

Food Service and Cafeteria building is a single story building; adequately equipped with cooking equipment and seating for food service.

Baker C. I. reported 201 cameras installed and operational. Of the total, 180 are located in the interior of the buildings and 21 on the exterior. The interior cameras are located in the facility lobby, throughout the facility hallways, multiple cameras in dormitory areas, program and educational areas, and intake and transfer. Exterior cameras are installed in all the exterior walkways and entrances and along the outside perimeter.

There are two security staff shifts. Dayshift hours are 0700 - 1900 hours and nightshift hours are 1900 - 0700 hours. Civilian support staff hours are 0800 - 1700 hours. At the time of the audit, the facility has

369 staff employed at the facility who have contact with inmates.

Medical and Mental Health Staff are contracted with Centurion Health Services. Contract medical shift hours are the same as the facility security staff. The facility provides various mental health services and programs. The Food Service Department and the inmate canteen service is contracted with Trinity Food Services, Inc.

The PAQ indicated there are 134 contractors and 325 volunteers. Examples of volunteer services provided at the facility include Chaplain, Alcoholics Anonymous, Compass 100, Inside Out Dads, Marriage, Music/Band, Operation New Hope-Ready for Work, Adult Basic Education, General Education Development, Substance Abuse Programs, Carpentry/Building Construction, Electricity, Masonry, Plumbing, PRIDE Culinary Arts, pre-release and reentry programs, and various worship services and religious programs.

AUDIT FINDINGS

Summary of Audit Findings:

The OAS will automatically calculate the number of standards exceeded, number of standards met, and the number of standards not met based on the auditor's compliance determinations. If relevant, the auditor should provide the list of standards exceeded and/or the list of standards not met (e.g. Standards Exceeded: 115.xx, 115.xx..., Standards Not Met: 115.yy, 115.yy). Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.

Number of standards exceeded:	6
Number of standards met:	39
Number of standards not met:	0

Standards Exceeded: 115.11; 115.16; 115.41; 115.53; 115.64; 115.88

Standards Met: 115.12; 115.13; 115.14; 115.15; 115.17; 115.18; 115.21; 115.22; 115.31; 115.32; 115.33; 115.34; 115.35; 115.42; 115.43; 115.51; 115.52; 115.54; 115.61; 115.62; 115.63; 115.65; 115.66; 115.67; 115.68; 115.71; 115.72; 115.73; 115.76; 115.77; 115.78; 115.81; 115.82; 115.83; 115.86; 115.87; 115.89.

Standards Not Met: 0

Standards

Auditor Overall Determination Definitions

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

Auditor Discussion Instructions

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

Auditor Overall Determination: Exceeds Standard	
Auditor Discussion	
	Documents:
	Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, Construction, Detection, Construction,
	Response Florida Department of Corrections Bureau of Security Organization Chart
	Interviews conducted with:
	PREA Coordinator
	PREA Compliance Manager
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, Response</i> states the policy of FLDOC is to establish zero-tolerance standards for sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in institutions and community corrections while protecting the rights of inmates and offenders, regardless of gender or sexual preference. This will be accomplished through accountability of perpetrator and the punishment of those institutional and community correctional officials who fail to prevent, detect, and respond to sexual abuse, sexual battery, and sexual harassment crimes for incarcerated inmates and those offenders under departmental jurisdiction.
:	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, Response</i> states the FDOC will establish and provide implementation of standards for the detection, prevention, elimination, and punishment of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This will be accomplished by increasing the availability of data, information, and training on the incidence of sexual abuse, sexual battery and sexual harassment, consequently improving the management and administration of correctional facilities.
: : :	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, Response</i> states the FDOC will establish guidelines for proper and immediate reporting of such incidents as well as providing appropriate safeguards for victims, the management of evidence, and actions to be taken from reporting an allegation to substantiation of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment.
;	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, Response</i> clearly defines prohibited behaviors regarding sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. In addition, any inmate, employee, volunteer, or contractor who commits a sexual battery may be criminally prosecuted pursuant to chapter

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the Office of Institutions, specifically through the PREA Coordinator and Compliance Managers, is responsible for the administration of the PREA compliance program.

794, Florida Statute.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the PREA Coordinator will be responsible for the coordination of activities related to the PREA compliance program through

- Implementation of terms and conditions of contracts with service providers;
- Development of effective strategies to ensure successful compliance, including policies, procedures, protocols, training, and dissemination of information related to the compliance with federal laws;
- Review of standards to suggest to the United States Department of Justice any revisions, additions, or deletions which may be required;
- Review of all audits, survey results, and incident reports on issues that may affect the compliance process and taking a proactive approach to corrective measures;
- Advising executive, managerial, and supervisory staff within the Department on issues related to the compliance process;
- Planning, directing, and coordinating all activities related to the compliance program including administrative, financial, and operational issues;
- Serve as a liaison between the Department and the USDOJ;
- Coordinating as appropriate with Department program areas to ensure adherence to the compliance standards;
- Maintaining records of all compliance activities;
- Providing training to staff covering all phases of the compliance process, including new compliance procedures and new or revised standards;
- Representing the Department in PREA compliance audits, hearings, PREA committee meetings, and conferences;
- Conducting pre-audit inspection of facilities to ensure preparedness for scheduled compliance audits
- Acting as a liaison between field staff and executive staff on compliance issues;
- Enforcing the performance of PREA compliance contract terms and conditions;
- Assisting in the revision of the Department policies and procedures to ensure compliance with PREA standards;
- Conducting annual staffing reviews for each institution;

During the pre-on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator who verified she has sufficient time and authority in her position to accomplish PREA responsibilities for the agency. The PREA Director oversees fifty-seven PREA Compliance Managers, to include seven PREA Compliance Managers assigned to private facilities. The PREA Coordinator reports directly to the FDOC Deputy Director of Institutional Operations. A review of the FDOC organizational chart provided evidence that the agency has designated an upper-level position as the PREA Coordinator.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the Compliance Manager will coordinate the compliance program at the facility under the advice of the PREA Coordinator and shall

• Ensure that his/her institution is prepared for PREA audits, including gathering all

documentation necessary to demonstrate compliance with the standards and ensuring that all files are completed at least six weeks prior to the scheduled audit date;

- Along with the Facility Warden, designate the compliance teams that will be responsible for evaluating the institution's operation against the assigned standards, determining compliance with both the standard and Department policy, compiling related documentation, preparing plans of action, and recommending additions, deletions, and revisions to existing policies and procedures;
- Prepare and maintain records of all compliance activities within his/her respective institution, including folders, standards compliance checklists, supporting documentation, self-evaluation reports, audit reports, corrective action plans, monitoring reports, and correspondence related to the compliance program;
- Respond in a timely manner to any request(s) for information from the USDOJ submitted through the PREA Coordinator;
- Coordinate transportation, office space, facility tours, interviews, and information needed by the mock audit team or the visiting DOJ auditing team for the audit;
- Ensure the institution puts forth its best effort to maintain compliance during the threeyear period between audits;
- Conduct annual PREA self-audits during years where the facility does not receive a mock (pre-audit) or certified DOJ audit.

During the on-site phase of the audit, the Auditor interviewed the PREA Compliance Manager and verified he has sufficient time and authority in his position to accomplish the PREA responsibilities for Baker Correctional Institution. Evidence shows that the Florida Department of Corrections has designated a facility PREA Compliance Manager for Baker Correctional Institution as verified through a review of the FDOC organizational chart and through interviews with the PREA Compliance Manager and the Facility Warden.

During the on-site phase of the audit, the Auditor interviewed the Facility Warden and confirmed the responsibilities of the PREA Compliance Managers assigned to Baker Correctional Institution and verified he is provided sufficient time and authority in his position to accomplish these responsibilities.

Upon review of the policy and the agency organizational chart and upon completion of interviews conducted with the PREA Coordinator, PREA Compliance Manager, and Facility Warden during the on-site visit, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 205.002, <i>Contract Management</i> Florida Department of Corrections Contract #C2959 with Bridges of America – Jacksonville Bridge, Inc. Florida Department of Corrections Contract #C2798 with the Transition House, Inc.
	Interviews conducted with: Agency Contract Administrator
	Florida Department of Corrections Procedure 205.002, <i>Contract Management</i> states all new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include the following language to ensure compliance with 28 C.F.R. Part 115 "The contractor/vendor(s) will comply with the national standards to prevent, detect, and respond to prison rape under the Prison Rape Elimination Act (PREA), Federal Rule 28 C.F.R. Part 115. The contractor/vendor(s) will also comply with all Department policies and procedures that relate to PREA."
	The Auditor reviewed contracts between the Florida Department of Corrections and Bridges of America-The Jacksonville Bridge (contract #C2959) and the Transition House (contract #C2798) both contracts contained the PREA obligation for the facilities to adopt and comply with the PREA Standards.
	During the pre-on-site phase of the audit, the Auditor conducted an interview with the Agency Contract Administrator regarding how contracts are monitored to determine if the contractor complies with the PREA requirements of the contract. The Agency Contract Administrator explained that all Florida Department of Corrections contracts include verbiage related to the vendor's obligation to comply with the PREA Standards prior to entering into agreement with the agency. If the entity is not PREA compliant, the contract will not be executed. Additionally, these contracts are monitored by Assistant Wardens who serve as the facility PREA Compliance Managers, conduct weekly visits, and inspections to the contracted facility to ensure the compliance of the PREA standards is maintained.
	The Agency Contract Administrator informed the Auditor the Florida Department of Corrections currently has 74 contracts for the confinement of inmates. The seven Department of Management Services (DMS) Contract facilities submit completed audit reports to the FDOC PREA Coordinator. These reports are then posted on the FDOC public page along with FDOC facility PREA reports.

Upon review of the policy and contracts provided and upon completion of the interview with the Agency Contract Administrator, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 602.030, <i>Security Staff Utilization</i> Florida Department of Corrections Post Order #3 – <i>Shift Supervisor</i> Florida Department of Corrections Baker C.I. Staffing Plan Report Florida Department of Corrections Baker C.I. Deviations from Staffing Plan Florida Department of Corrections Incident Reports documenting deviations Facility Blueprint Facility Housing Logs (all shifts) Facility Staff Roster / Schedule Inmate Activity Schedules
	Interviews conducted with: Warden or Designee PREA Coordinator PREA Compliance Manager Intermediate or Higher Level Facility Staff
	On-site Review Observations: Daily operational functions Staff interaction with inmates Inmate movement Supervisory staff conducting rounds
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states in conjunction with each institution, the Office of Institutions will develop a particularized staffing plan for each institution that provides adequate staffing levels, and where applicable, video monitoring, to protect inmates against sexual abuse, sexual battery, staff sexual misconduct and sexual harassment. This plan shall be reviewed at least once per year to assess, determine, and document whether adjustments are necessary, both by the Warden of the institution and by the PREA Coordinator.
	Florida Department of Corrections Procedure 602.030, <i>Security Staff Utilization</i> states the agency shall establish guidelines for appropriate and efficient use of security staff to ensure the agency meets its mission of protecting the public and providing a safe and humane environment for staff and offenders.
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Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states to meet staffing requirements, the Bureau of Security Operations shall develop a post chart for each institution, annex, or other facility. A post chart is an actual listing by title of all security posts

that are necessary to operate an institution, including the relief positions. *The Florida Department of Corrections utilizes the term post chart when referring to a staffing plan.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states security staffing level guidelines are designated to assist supervisors in the daily staffing of their shifts by establishing priorities for post staffing which will assist in ensuring continued security and safety of staff, visitors, and inmates. Staffing Level Guidelines are developed by the Bureau of Security Operations and approved by the Deputy Security of Institutions. The Guidelines are used to determine the staffing levels of each security post. Security staffing levels are designated as Level II, and Level III posts.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states Level I posts are critical for the daily operation of a shift. Operating at Level I may include limiting certain activities such as recreation or work squads. The Duty Warden must grant his/her approval to eliminate or delay any of these daily activities. To staff these posts, supervisors should first utilize staff from Level III posts and then from Level II posts. Under no circumstances will a shift begin below Level I staffing or be allowed to go below this level except in emergencies. Shift Supervisors will respond appropriately to ensure Level I staffing by utilization of the Extended Day Roster in accordance with FDOC Procedure 208.007, Extended Workdays for Correctional Officers.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states Level II posts are essential to the daily normal operation of a facility. Operating at Level II allows all activities and programs to be marginally staffed. Level III posts are necessary for long-term "normal" operation. Level III posts will generally be utilized to fill any Level I or Level II posts as needed prior to using the Extended Day Roster. Administrative shift positions listed as Level II or Level III or Level III may be used to meet the Level I needs on the day and night shifts before use of the Extended Day Roster.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states facilities shall utilize the Roster Management System (RMS) to document and account for all security personnel and which post staff members are assigned. Shift Supervisors will ensure that each RMS daily security roster is completed, reviewed, and electronically approved before the end of their shifts. The RMS daily security roster will be reviewed by the Chief of Security the next business day. All deviations from the post chart are documented in an incident report accordingly.

During the pre-on-site phase of the audit, the Auditor reviewed documentation of the deviations from the staffing plan that occurred in the 12 months prior to the on-site visit. During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the deviations from the staffing plan. The Facility Warden confirmed that all instances of non-compliance with the staffing plan are documented in the Roster Management System (RMS). If a Level I post is vacant, the non-compliance is also documented via an incident report and Supervisory staff is responsible for following procedures to ensure adequate staffing for the facility.

Florida Department of Corrections Procedure 602.030, *Security Staff Utilization* states a quarterly review will be completed for each security roster beginning with the Warden.

Information to be reviewed will be long-term loans, extended special assignments, securitystaffing levels, and gender specific assignments.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Baker Correctional Institutional Staffing Plan Report. Upon review of the Baker C.I. 2019 Staffing Plan Report, the facility, when reviewing staffing requirements and the appropriate numbers of assigned staff, took into consideration the following requirements:

- Generally accepted detention and correctional practices;
- Any judicial findings of inadequacy;
- Any inadequacy from internal or external oversight bodies;
- Any findings of inadequacy from Federal investigative agencies;
- All the components of the facility's physical layout (including blind spots);
- Composition of inmate population;
- Number of and placement of supervisory staff;
- Institution programs specific to each shift;
- All applicable State or local laws;
- Prevalence of substantiated and unsubstantiated incidents of sexual abuse;
- Any other relevant factors.

The Baker C.I. 2019 Staffing Plan Report was extremely detailed and specific in each of the above categories. The report also included the review of analyses conducted in 2015 by the National Institute of Corrections (NIC) and by the Florida Legislature's Office of Program Policy Analysis and Government Accountability (OPPAGA). Additionally, in January 2016 the Department contracted with the Association of State Correctional Administrators (ASCA) to conduct a comprehensive staffing analysis. In the NIC and OPPAGA reviews, the Department was found to have inadequate staffing. The staffing plan was adequate, however the deployment of staff to fulfill the needs of the staffing plan were found to be deficient. Since the completion of this analysis, the Department is working to modify the current relief factor and piloting programs to test the transition from two twelve hour shifts to three eight-hour shifts. In addition, the Department continuously reviews all recommendations submitted by these organizations in an effort to improve staffing at Baker C.I.

The average daily number of inmates on which the facility-staffing plan was predicated on was 1,848 Security Level 5 / Custody Level Close, Medium, Minimum and Community and Security Level 3 / Custody Level Medium, Minimum, and Community custody inmates. The most common reasons for deviation from the staffing plan in the last 12 months include staff medical emergency, FMLA, unscheduled sick leave, Emergency Medical Services life threatening transport of an inmate, and unscheduled events.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding Baker C.I. staffing plan. The Facility Warden discussed how the Bureau of Security Operations develops a post chart for Baker C.I. that documents the required daily staffing levels. Additionally, when developing a post chart, several items are taken into consideration such as internal reviews, components of the physical plant, composition of the inmate population, the prevalence of substantiated and unsubstantiated allegations of sexual abuse, inmate-on-inmate assaults, and uses of force. The Facility Warden also explained that video monitoring is also taken into consideration. Baker C.I. has 201 video cameras installed throughout the facility that are reviewed on a regular basis. The Facility Warden confirmed that she conducts a quarterly and annually staffing review, which is documented in the *Roster Management System (RMS)*. To ensure compliance with the staffing plan, Facility Warden and the Majors conducts rounds on the compound for visual verification of staff assignments throughout the compound.

During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the PREA Coordinator; both confirmed the process of developing a staffing plan previously described by the Facility Warden. The PREA Coordinator also confirmed that an assessment of the facility-staffing plan is conducted annually and she is consulted regarding any adjustments to the staffing plan.

During the on-site phase, the auditor reviewed the average daily number of inmates' report, staff shift rosters, facility blueprint, and daily inmate activity schedules to verify adequate staff coverage in comparison to inmate population, inmate movement, and facility size and layout.

Florida Department of Corrections Post Order #3 – *Shift Supervisor* states shift supervisors must conduct daily-unannounced rounds and security inspections of all inmate housing and activity areas. All security posts will be visited and these inspections documented daily on the DC6-207 Control Room Log, as well as the DC6-209 Housing Unit Log, or DC6-228 Inspection of Special Housing Record maintained in each area. The unannounced rounds shall be conducted on all shifts and staff shall not alert other staff members that a round is being conducted.

The Auditor reviewed housing logs of supervisor unannounced rounds and verified the unannounced rounds are being conducted and documented in accordance to the facility Post Order and the PREA Standard. The sample of housing logs reviewed covered several days and were from every shift. In the samples reviewed, the Auditor did not find any consistent patterns or inadequacies.

During the on-site phase of the audit, the Auditor conducted supervisory level staff interviews and inquired how unannounced rounds are completed without staff knowledge. Supervisory level staff indicated this is completed by observing staff movement, monitoring radio transmissions, alternating movement patterns or being unpredictable with times or walking pattern, and listening to staff conversations while conducting rounds throughout the facility.

During the on-site phase of the audit, the Auditor toured the facility and observed the daily operational functions, staff interacting with inmates, general inmate movement, inmates out at recreation, inmates participating in programs, inmates completing job assignments, and supervisory staff conducting rounds. These observations provided additional verification of policy and of standard compliance.

Upon review of the policies and documentation provided and upon completion of interviews conducted with the Facility Warden, PREA Coordinator, PREA Compliance Manager, and Intermediate or Upper-level Supervisory Staff during the on-site visit, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 601.220, <i>Youthful Offenders</i>
	Interviews conducted with: Facility Warden PREA Compliance Manager
	Florida Department of Corrections Procedure 601.220, <i>Youthful Offenders</i> defines a youthful offender as any person who is sentenced as such by the court or classified as such by the department pursuant to Section 958.11(4), F.S.
	Baker Correctional Institution does not house youthful inmates. This was verified during interviews with the Facility Warden, PREA Compliance Manager, and Classification Staff.
	Upon review of the policy and upon completion of the interviews with facility staff, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

Limits to cross-gender viewing and searches
Auditor Overall Determination: Meets Standard
Auditor Discussion
Documents:
Florida Department of Corrections Procedure 602.018, Contraband & Searches of Inmates
Florida Department of Corrections Procedure 602.036, Gender Specific Security Positions,
Shifts, Posts & Assignments
Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, &
Response Florida Department of Corrections General Post Order 01
Florida Department of Corrections Baker CI Housing Unit Log
Florida Department of Corrections PREA Training Curriculum / Records
Staff Roster
Staff Schedules
Interviews conducted with:
Facility Warden
PREA Compliance Manager
Random sample of Inmates
Transgender/Intersex Inmates
On-site Review Observations:
Daily operational functions
Staff interaction with inmates
Inmate movement
Florida Department of Corrections Procedure 602.036, Gender Specific Security Positions,
Shifts, Posts, & Assignments states strip searches of inmates will be conducted only by those
in the Correctional Officer class of the same sex as the inmate, except in emergency
circumstances as determined by the Shift Supervisor. All strip searches of inmates conducted
by staff of the opposite gender shall require the staff conducting the search to submit an
Incident Report DC6-210, explaining the justification for the search exception.
Documentation provided by the facility indicated there were no cross-gender strip searches o
cross-gender visual body cavity searches conducted during the last 12 months. During the or
site phase of the audit, the Auditor conducted an interview with the Facility Warden and the PREA Compliance Manager and verified that no cross-gender strip searches or cross-gende
visual body cavity searches were conducted.
Elorida Department of Corrections Procedure 602 018 Contraband & Searches of Inmates

Florida Department of Corrections Procedure 602.018, *Contraband & Searches* of Inmates states unclothed searches of inmates will be conducted by staff of the same sex, except in an emergency as determined by the Shift Supervisor. The clothing and the inmate's body will be carefully inspected to determine if contraband is being concealed.

During the pre-on-site phase of the audit, the Auditor reviewed the provided documentation to include shift schedules, shift rosters, and daily inmate activity schedule. During the on-site phase of the audit, the Auditor compared the information reviewed with her observations made during the facility tour and noted the number of male staff members is more than adequate and covers all shifts.

During the on-site phase of the audit, the Auditor observed the facility operations throughout the day, to include continuous inmate movement throughout the facility, continuous physical interactions between staff and inmates, and inmates performing job assignments throughout the facility and within the compound grounds. The Auditor also observed opposite gender announcements being conducted throughout the facility tour.

In addition, the Auditor noticed there is a number of female staff members assigned to the facility who serve in the same capacity as their male counterparts, however since a male staff member is also present on every shift, female staff members are prohibited from conducting cross-gender pat-down searches of male inmates.

Florida Department of Corrections Procedure 602.036, *Gender Specific Security Positions, Shifts, Posts, & Assignments* states inmates will not be supervised by officer of the opposite gender while inmates are showering or in the toilet areas unless appropriate privacy screening is provided to obscure from view the breasts of female inmates and the genitalia and buttocks of both male and female inmates. Inmates will be required to cover themselves appropriately in accordance with local rules and requirements when not in the shower or not utilizing toilets and while in route to and from these areas.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* and the Florida Department of Corrections General Post Order 01 states staff of the opposite gender will announce at the beginning of each shift that they will be present in the housing unit at any time during the course of the shift. This announcement will be documented on the DC6-209 Housing Unit Log.

During the on-site phase of the audit, the Auditor conducted interviews with a random sampling of inmates. Fifty-eight random sample of inmate interviews were completed and fifty-seven of the fifty-eight inmates confirmed they have privacy while showering, changing clothes, or using the bathroom facilities. Additionally, fifty-six of the fifty-eight random sample of inmates interviewed, confirmed staff of the opposite gender announce her presence prior to entering the housing unit.

During the on-site phase of the audit, the Auditor conducted a review of several samples of housing logs and observed entries indicating opposite gender entering housing dormitory with notification to inmates being announced prior to opposite gender entry. The sample of housing

logs reviewed covered several days throughout the month and were from all shifts. The Auditor also observed the announcement of an opposite gender entering a housing dormitory throughout the on-site tour of the facility, which provided additional documentation and the facility's compliance with this standard.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states staff will not search or physically examine a potential gender dysphoria inmate, transgender inmate or intersex inmate for the sole purpose of determining the inmate's genital status. It the genital status is unknown it can be determined through conversation with the inmate, by reviewing medical documentation or if necessary, through a broader medical examination conducted in private by a medical practitioner.

During the pre-on-site phase of the audit, the Auditor reviewed documentation provided by the facility showed the facility has had zero searches of a transgender or intersex for the sole purpose of determining the inmate's genital status.

During the on-site phase of the audit, the Auditor requested an inmate roster for transgender or intersex inmates to conduct targeted interviews. At the time of the on-site phase of the audit, the facility reported two transgender inmates in custody. The Auditor conducted separate interviews with two transgender inmates and inquired if there was any reason to believe either one was strip-searched for the sole purpose of determining genital status; both transgender inmates responded no and both indicated that staff members communicated extremely well during the intake process.

Florida Department of Corrections Procedure 602.018, *Contraband & Searches of Inmates* states all staff members shall receive training on how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates/offenders in a professional and respectful manner consistent with security correctional environments.

During the on-site phase of the audit, the Auditor reviewed the training records and training curriculum provided to staff members who may have contact with inmates, how to perform cross-gender pat-down searches and searches of transgender and intersex inmates. Training records indicated staff members receive training on the agency's PREA policies and how to perform cross-gender pat-down searches annually. The training curriculum outlined the agency's policy on cross-gender pat-down searches and searches of transgender and intersex inmates, policy prohibiting search of inmates for the sole purpose of determining the inmate's genital status, defining exigent circumstances, and conducting searches in a professional and respectful manner.

Upon review of staff training records and training curriculum, observations during the on-site visit, and information obtained during random staff interviews conducted during the on-site phase, Baker C. I. demonstrated facility-wide practices that are consistent with policy and with

the requirements of the PREA standard.

15.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 604.101, <i>Americans with Disabilities Act</i> Florida Department of Corrections Staff Translator List Florida Department of Corrections Contract with Language Line Services Florida Department of Corrections Inmate Handbook (multiple languages) PREA / Sexual Awareness Brochures (multiple languages)
	Interviews conducted with: Facility Warden Random sample of Staff Inmates with Disabilities or LEP
	On-site Review Observations: PREA informational signage posted in multiple languages
	Florida Department of Corrections Procedure 604.101, <i>Americans with Disabilities Act</i> states the Department is required to authorize and/or provide accommodation(s) to inmates with documented disabilities to ensure accessibility for services, programs, and activities. When reviewing an inmate's request for an accommodation, decisions are based on the specific inmate's needs, capabilities, as well as specific criteria for the program or activity. The Americans with Disabilities Act requires the Department to make decisions on a case-by-case basis with facts, not suppositions.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in FDOC Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDOC translator list, language line services.
	During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager regarding how the facility takes appropriate steps to ensure that all inmates have an equal opportunity to participate in the facility's efforts to prevent, detect, and respond to sexual abuse and sexual barassment. The PREA Compliance Manager detailed

inmates have an equal opportunity to participate in the facility's efforts to prevent, detect, and respond to sexual abuse and sexual harassment. The PREA Compliance Manager detailed the efforts made by the facility to ensure impaired inmates are provided opportunities and benefits equal to those of unimpaired inmates. Inmates with either disabilities or LEP inmates

are provided with alternatives to accommodate participation in the PREA program such as videos and brochures tailored to their primary language.

Additionally, every effort is made to provide all training in a format that will be easily understood by inmates who have a physical or developmental impairment or who have limited English proficiency. The Florida Department of Corrections maintains a list of translators for every institution and this list is utilized for assisting with translation; the Baker Correctional Institution also has a contract with the Language Line Services and this can be utilized at any time when needed.

PREA training for inmates is provided in a video format that is also closed-captioned to accommodate the hearing impaired. If an inmate is identified with a developmental impairment, training is provided through the video with additional instruction if the inmate indicates he has questions.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates shall not be used as interpreters or readers except in exigent circumstances. Baker Correctional Institution utilizes staff as translators or initiates the use of the Language Line for translation services.

During the pre-on-site phase of the audit, the Auditor reviewed the existing contract between the Florida Department of Corrections and the Language Line Services, Inc. The contract outlines the translation services provided for each FDOC facility, rate of service, and the contract start and ending dates.

During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections staff translator list. The Staff Translator list, which includes 546 members, provides the staff member's name, contact number, language translation ability, and facility assignment. The various language translation abilities of FDOC staff include Arabic, Armenian, Chinese, Creole, Danish, Filipino, French, German, Gujarati, Hindi, Italian, Kurdish, Laos, Latin, Native American, Patwa, Portuguese, Punjabi, Romanian, Russian, Spanish, Swedish, Tagalog, Thai, Ukrainian, Urdu, and American Sign Language.

The Auditor was also able to confirm compliance with Florida Department of Corrections Procedure 602.053 during the on-site visit when staff demonstrated the process utilized when communicating with an inmate who is LEP, deaf, or disabled. Staff provided a through demonstration of providing all the required PREA information to include the zero tolerance policy, how to report an incident of sexual abuse or sexual harassment, counseling services, and programs available.

During the on-site phase of the audit, the Auditor conducted twenty interviews with a random

sample of staff. Each staff member confirmed the agency policy prohibiting the use of an inmate to provide translation services; all staff members acknowledged the use of either the language line or contacting another staff member to translate.

During the on-site visit, the Auditor interviewed four targeted inmates with disabilities, LEP, or hearing impaired. Each inmate acknowledged receiving PREC information during the intake / transfer process. Each inmate described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility. Additionally, inmates acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations throughout the compound. These PREA bulletins are posted in multiple languages, located near the phones banks inside the dormitory's, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display phone numbers and addresses for the victim advocate services, Tips hotline, and Women's Center of Jacksonville.

Upon review of the policies, inmate handbook, and upon completion of the targeted interviews with inmates, and the informal interviews with facility staff, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

Hiring and promotion decisions
Auditor Overall Determination: Meets Standard
Auditor Discussion
Documents: Florida Department of Corrections Procedure 208.049, <i>Background Investigation, & Appointment of Certified Officers</i> Florida State Statute 408.809, <i>Background Screening</i>
Interviews conducted with: Administrative / Human Resources Staff
On-site Review Observations: Personnel files
Florida Department of Corrections Procedure 208.049, <i>Background Investigation & Appointment of Certified Officers</i> states the agency shall not hire or promote anyone who has engaged in sexual abuse in a prion, jail, lockup, community confinement, juvenile facility, or other institution. The agency shall not hire or promote anyone 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 has been civilly or administratively adjudicated to have engaged in such activity.
Florida State Statute 408.809, <i>Background Screening</i> establishes responsibilities, policies, and procedures governing background investigations. All FDOC employees, interns, contractors, visitors, vendors, and volunteers requesting employment and/or entry into any FDOC institution will have a criminal records background investigation completed.
Florida State Statute 408.809, <i>Background Screening</i> establish the responsibilities for conducting and ensuring criminal records background investigations are completed on all eligible FDOC candidates is the responsibility of the Office of Human Resources (OHR) and the Office of Human Resources Centralized Recruitment Team located in the Florida Department of Corrections Central Office. The OHR and the Department's Recruitment Team also ensure a criminal records background check is completed on all current FDOC and contract employees at least once every five years.
The Florida Department of Corrections OHR utilizes the Live Scan fingerprinting program. Live scan fingerprinting refers to both the technique and the technology used to capture fingerprints and palm prints electronically. An individual's fingerprints are captured in a digitized format and then transmitted to a state repository and/or the Federal Bureau of Investigations (FBI). Live scan results can be verified and returned to the source within a

matter of hours. Live scan fingerprints are based on the fingerprint image data contained in

the submission and are unique to the individual. Responses to a fingerprint based inquiry are based on positive identification. Fingerprints provide for a biometric search of the Criminal History Database (CHRI). If an employee from the Florida Department of Corrections has any contact with any law enforcement agency, the Live Scan program notifies the FDOC Emergency Action Center (EAC).

During the on-site phase of the audit, the Auditor conducted an interview with the agency's Administrative (Human Resources) Director who confirmed the agency conducts the required criminal background checks prior to hiring a new employee, employees who are considered for promotions, or enlisting the services of a contractor or volunteer and at least once every five years. The HR Director confirmed the FDOC requirement imposed upon all employees to disclose any previous misconduct and the agency's requirement to provide information regarding a former employee upon request of another institution or agency. In addition to using Live Scan, the HR Director also confirmed the agency utilizes the Comprehensive Case Information System (CCIS), Florida Crime Information Center (FCIC), and the National Crime Information Center (NCIC) when conducting background investigations.

Baker Correctional Institution reported, in the 12 months prior to the audit, eighty-six criminal background checks were performed of persons hired or promoted who may have contact with inmates. During the on-site visit, the Auditor reviewed twenty personnel files of new hires, employees with tenure, employees recently promoted, and those with specialized training. Each file contained the required documentation to include thorough background investigations, which were completed as required and in accordance to Florida Department of Corrections Procedure 208.049 and Florida State Statute 408.809.

Upon review of the policies and review of personnel files and upon completion of the interview conducted with the Human Resources Staff, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

B	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Baker Correctional Institution Security Camera Schematic Report
	Interviews conducted with: Agency Head Facility Warden
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the facility will use video monitoring systems and other cost-effective and appropriate technology to supplement its sexual abuse prevention, detection, and response efforts. Annually, the facility will assess the feasibility of and need for new or additional monitoring technology and/or equipment.
	During the on-site tour of the facility, the Auditor observed convex mirrors, security cameras, and video monitoring equipment in all housing areas, food service, laundry, in common areas, and outside throughout the grounds of the compound. Baker Correctional Institution has not undergone any modifications or expansions to the facility since the last audit.
	During the on-site phase of the audit, the Auditor conducted a phone interview with the Agency Head and discussed if the agency considers how modifications or expansions to a facility effects the ability to protect inmates from sexual abuse. The Agency Head explained how facility modification has always been focused on providing safety to both staff and inmates. Modifications or expansions that are not in the best interest of the facility or department are not given consideration.
	The Agency Head also explained how video cameras at the facility are installed in all housing units, common areas, food service, and laundry. Recently, the Department has focused on resources in adding and upgrading the current video monitoring technology, with the ultimate goal of having all areas of the facility under surveillance.
	During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden. During the interview, the Facility Warden confirmed that prior to designing or acquiring any new facility or when planning any substantial expansion or modification, of existing facilities, the facility shall consider the effect of the design, acquisition, expansion, or modification might have upon the facility's ability to protect inmates from sexual abuse. The

modification might have upon the facility's ability to protect inmates from sexual abuse. The

Facility Warden also confirmed that prior to the installation of the additional cameras the facility shall considered how the addition of such technology would enhance the agency's ability to protect inmates from sexual abuse.

The Facility Warden also informed the Auditor, both video and audio surveillance is regularly reviewed to ensure compliance with requirements for security checks and proper implementation of all security and safety procedures. Baker Correctional Institution has also added additional video and audio surveillance devices for the specific purpose of improving the ability to prevent and respond to sexual abuse incidents.

Upon review of the policy and the security camera location report, and upon completion of the interviews conducted with the Agency Head and the Facility Warden, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.21	Evidence protocol and forensic medical examinations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections contract with Panhandle Forensic Nurse Specialist, Inc. Florida Department of Corrections contract with Women's Center of Jacksonville, Inc. Florida Department of Corrections contract with Gulf Coast Children's Advocacy Center, Inc. SANEs / SAFEs Uniform Evidence Protocol Florida Department of Corrections Sexual Abuse Awareness Brochure
	Interviews conducted with: Random sample of Staff SANE/SAFE Staff PREA Compliance Manager Inmates who reported a sexual abuse
	On-site Review Observations: Sexual Abuse / Harassment Reporting Procedures poster (throughout each dormitory) Inmate phones located in each dormitory
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states whenever sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism occurs, the Emergency Action Center (EAC) shall be notified without unnecessary delay. The OIC or the Incident Commander shall ensure that any sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism is reported via a Management Information Notification System (MINS) after notification to EAC.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the Office of the Inspector General shall be the primary investigative unit of all sexual battery allegations and sexual misconduct allegations occurring on Department property.
	During the post-on-site phase of the audit, the Auditor established that inspectors assigned to the Office of the Inspector General's office follow the United States Department of Justice, <i>A National Protocol for Sexual Assault Medical Forensic Examinations</i> a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative procooding and criminal prococutions.

proceeding and criminal prosecutions.

During the on-site phase of the audit, the Auditor conducted an interview with an inspector assigned to the Office of the Attorney General's office who confirmed the responsibilities of an investigator, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations* states an inmate victim of a sexual battery or sexual misconduct where physical evidence may be present shall ensure the victim obtains medical treatment, a forensic examination, and advocacy and crisis-intervention services. The forensic examination shall be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs).

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct shall receive timely, unimpeded access to emergency treatment and crisis intervention services. Treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states that a victim's advocate will be made available to victims of sexual abuse to accompany them through the forensic exam process and shall provide the victim with access to outside victim advocates for emotional support services related to sexual abuse. The facility shall enable reasonable communication between inmates and the organizations providing such services in as confidential manner as possible. The evaluation and treatment of such victims shall include follow-up services, treatment plans, and when necessary, referrals for continued care following their transfer to other facilities or upon release from custody.

During the pre-on-site phase of the audit, the Auditor reviewed provided documentation, which included the SANEs/SAFEs evidence protocol, contracts between FDOC and the Panhandle Forensic Nurse Specialist, the FDOC and the Women's Center of Jacksonville, Inc. and FDOC and the Gulf Coast Children's Advocacy Center, Inc. Each FDOC contract uses clear and concise language, provides the agency's responsibilities, the contractor's responsibilities, and the reporting and documentation requirements for each. Additionally, the three contracts describe in detail, the expectations, and responsibilities of each contractor including performance measures and financial consequences if the required service is not met.

The Panhandle Forensic Nurse Specialist, Inc. is a non-profit agency consisting of seven certified Sexual Assault Nurse Examiners and one certified Sexual Assault Forensic Examiner. The Auditor conducted an interview with the certified SAFE Doctor, she explained to the Auditor the procedure of a forensic medical examination, to include following the Department

of Justice (DOJ) National Protocol for Sexual Assault Medical Forensic Examinations Adults. The SAFE Doctor explained when they receive a notification for services request from the facility, either herself or a SANE Nurse will immediately respond to the facility to conduct the forensic medical examination. Either herself or one of her staff members are available 24/7. The SAFE Doctor verified that no forensic medical examinations have been conducted for Baker Correctional Institution for the past 12 months.

The Women's Center of Jacksonville, Inc. is a non-profit rape crisis center that provides advocacy services for inmate victims of sexual assault. Advocacy services include providing a 24/7 toll-free rape crisis hotline staffed by certified victim advocates, provide a mailing address for inmate victims to send correspondence, provide a certified victim advocate for advocacy accompaniment during pre-scheduled investigatory interviews, and provide follow-up services and crisis intervention to inmate victims of sexual assault.

During the on-site phase of the audit, the Auditor conducted an interview with a certified rape crisis counselor and she confirmed the existing contract agreement with the facility. She provided a very detailed description of the advocacy services provided to the inmates at Baker C.I. to include the staffing of the rape crisis hotline 24 hours a day, 7 days a week.

The Gulf Coast Children's Advocacy Center, Inc. is a non-profit rape crisis center that provides advocacy services for victims of sexual assault. The Gulf Coast Children's Advocacy Center is the outside reporting entity for the inmates at Baker Correctional Institute to report sexual abuse and sexual harassment. Inmates may report to the Gulf Coast Children's Advocacy Center by phone or in writing; the phone number and the mailing address is posted in every inmate dormitory next to the inmate phones. During the on-site phase of the audit, the Auditor conducted a tour of the facility and tested at least one phone in every dormitory to ensure availability and functionality; all phones tested were confirmed to be working properly.

During the on-site phase of the audit, the Auditor interviewed a random sample of staff regarding his/her role as a First Responder to an allegation of sexual abuse. The staff members provided specific details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify medical and mental health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

Baker Correctional Institution reported no forensic medical exams conducted during the past 12 months. During the on-site phase of the audit, the Auditor conducted interviews with the PREA Compliance Manager and the Facility Warden and both confirmed this information is correct. As previously stated above, the Auditor also confirmed this information during the interview with the certified SANE Doctor.

During the 12 months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse allegations and the Auditor was provided with facility documentation showing three of the inmates had been released from the custody of the Florida Department of Corrections and the fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse or sexual misconduct allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Upon review of the policies, contracts with outside entities, the SANEs/SAFEs Uniform Evidence Protocol, and observations made during the facility tour, and upon completion of interviews conducted prior to and during the on-site visit, the Baker C. I. demonstrated facilitywide practices that are consistent with policy and the requirements of the PREA standard.

115.22	Policies to ensure referrals of allegations for investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> Office of the Inspector General Investigator Training, Credentials Investigative Case files (7) – Sexual abuse, sexual misconduct, and sexual harassment Florida Department of Corrections Agency Website
	Interviews conducted with: Agency Head Investigative Staff
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states that any knowledge of, or receives information, written or verbal regarding sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor, the Chief of Security, the Warden, or the Office of the Inspector General. The notified authority will take immediate steps to evaluate the inmate's concern / allegation and will ensure proper medical treatment and mental health treatment are obtained. An investigation will be initiated in accordance with FDOC Procedure 108.003, Investigative Process and FDOC Procedure 108.015, Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations.
	During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding how the agency ensures that an administrative or criminal investigation is completed for allegations of sexual abuse or harassment. The Agency Head explained how the Office of the Inspector General oversees and coordinates the process for all criminal investigations involving inmates or staff members and for allegations of sexual harassment committed by staff are addressed in an administrative investigation, which is also overseen by the Office of the Inspector General. Any allegation of sexual harassment committed by an inmate is addressed as a disciplinary investigation at the facility level.
	The Auditor also requested to the Agency Head to describe how an administrative or criminal investigation is completed for allegations of sexual harassment. The Agency Head explained that allegations of repeated sexual harassment by staff members on inmates would be handled with an administrative investigation. The process would entail interviewing the complainant/victim inmate, interview any witnesses, identify and evaluate any evidence, and

interview the subject staff member. The Agency Head explained once the process is

completed a summary report is submitted to management for review of findings. Additionally,

any sustained finding is then reviewed by the appropriate disciplinary authority to impose appropriate disciplinary action in consultation with the Legal Department. Allegations of inmate-on-inmate sexual harassment are addressed as a disciplinary investigation governed under the rules of prohibited conduct by the Office of Institutions.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations* states the agency has designated Inspectors assigned to the Office of the Inspector General (OIG), whose activities are supervised and coordinated by the Inspector General for the purpose of conducting criminal and administrative investigations and who may engage in other activities as authorized by law.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, and Sexual Misconduct Investigations* states the Office of the Inspector General shall, except pursuant to the terms of any valid protocol with any other law enforcement agency, be the primary investigative unit of all sexual battery and sexual misconduct allegations occurring on Department property.

During the on-site phase of the audit, the Auditor conducted an interview with an Inspector assigned to the Office of the Attorney General's office who confirmed the responsibilities of an inspector, reviewed the process of an investigation, and confirmed the use of a uniform evidence protocol for the collection of physical evidence. The Inspector confirmed attending and successfully completing the specialized training curriculum developed by The Moss Group, Inc.

The Inspector also confirmed agency policy requiring all allegations of sexual abuse or sexual harassment must be referred to the Office of the Inspector General and Inspectors have the legal authority to conduct administrative and criminal investigations pursuant to FSS 944.31. The Inspector explained once the investigation process has concluded with a case finding, the case must be submitted to the Office of the Inspector General for review and a final determination. At the time of the on-site phase of the audit, the Auditor noted the number of cases for Baker C.I. still pending and awaiting closing by the Office of the Inspector General was five.

Florida Department of Corrections publishes agency policy regarding the referral of allegations of sexual abuse or sexual harassment for criminal investigation on the agency website http://www.dc.state.fl.us/PREA/index.html

According to the information provided in the PAQ, during the past 12 months, Baker Correctional Institution reported nine allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually seven. During the on-site phase of the audit, the Auditor met with the PREA Compliance Manager and the staff member tasked with entering the information into the PAQ to clarify the discrepancy. After discussion, it was determined the additional two cases were outside the parameters of the 12 months preceding the audit and were counted inadvertently; therefore, for the purpose of this report, the total number of allegations of sexual abuse and sexual harassment are seven.

The Auditor reviewed one administrative sexual harassment investigation and six criminal sexual abuse or sexual misconduct investigations. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the two closed cases; of the seven cases, five are pending closing reports / reviews from the Office of the Inspector General.

The Auditor found each case, to include pending cases, contained all the appropriate documentation, and determined that each incident was investigated promptly, thoroughly, and objectively by a qualified Inspector from the Office of the Inspector General who has received training and education and has the authority to conduct such investigations.

Upon review of the policies, documentation, and case files previously discussed, and upon completion of the interviews conducted during the on-site visit, the Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.31	Employee training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Staff PREA Training Curriculum Florida Department of Corrections Baker C. I. Training Roster / Staff Signatures
	Interviews conducted with: Random sample of Staff
	On-site Review Observations: Personnel Training Records
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states all staff shall be thoroughly trained and informed regarding the Departments zero-tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment at least every two years. In addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners shall complete specialized training. The Auditor reviewed the general PREA training curriculum, which included the following:
	 Agency's zero tolerance for sexual abuse and sexual harassment How employees fulfill their responsibilities under agency sexual abuse and sexual harassment; prevention, detection, reporting, and response policies and procedures; Inmates' rights to be free from sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment; The right of inmates & staff to be free from retaliation for reporting sexual abuse, sexual battery, staff sexual misconduct, or harassment; Dynamics of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings; Common reactions of sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in confinement settings; How to detect and respond to signs of threatened & actual sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment; How to avoid inappropriate relationships with inmates and offenders; Communicating effectively & professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; How to comply with relevant laws related to mandatory reporting of sexual abuse;
	During the pre-on-site phase of the audit, the Auditor reviewed training curriculum and documentation of staff signatures verifying training comprehension and attendance. The training curriculum outlined the staff member's responsibilities in preventing, detecting, and

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response to inmate sexual abuse and sexual harassment. The curriculum also provided staff with communicating effectively and professionally with inmates, understanding that inmates have the right to be free from sexual abuse and sexual harassment.

The Florida Department of Corrections PREA training curriculum provided to the Auditor, titled PREA Lesson Plan Gender Specific, includes an inmate's right to be free from sexual abuse and sexual harassment, including the right to dress, shower, and use toilet facilities out of view of staff of the opposite sex. The training also included the appropriate method to introduce/announce "opposite gender" correctional officers and supervision staff into an all-male or all-female housing unit and how to conduct cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner consistent with security correctional environments. The training curriculum was extremely detailed with discussions of the required PREA standards, instruction videos from the National PREA Resource Center, and group discussion scenarios.

During the on-site phase of the audit, the Auditor reviewed additional training records that also verified receipt of the required PREA training, to include certificates of specialized training. During the on-site phase of the audit, the Auditor reviewed additional training records that also verified receipt of the required PREA training, to include certificates of specialized training.

During the on-site phase of the audit, the Auditor conducted twenty random staff interviews. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. All staff members acknowledged receiving the training every year during his/her In-service training.

Upon review of the policies and training documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the files reviewed during the on-site visit, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Volunteer & Contractor Training Curriculum Florida Department of Corrections Volunteer & Contractor Training Roster with Signatures
	Interviews conducted with: Volunteer or Contractor who have contact with Inmates
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the agency shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities in regards to this and related policies as it relates to the prevention, detection, and response to inmate sexual abuse allegations. Training shall be conducted via as it relates to the via the Staff Development and Training lesson plan Prison Rape Elimination Act Training for Interns, Volunteers, and Contractors Read and Sign, form NI1-127. This training shall be administered to all contractors and volunteers every three years. In addition, the PREA Brochure for Interns, Volunteers, and Contractors, form NI1-125 will be distributed annually to all contractors and volunteers.
i P S	During the pre-on-site phase, the Auditor reviewed training documentation to include training curriculum and attendance roster for contract and volunteer staff. Additional documentation included signatures from each contract staff and volunteer staff confirming understanding of policies and training received. The volunteer and contractor training was tailored based on the services they provide and the level of contact they have with inmates and included the agency's zero-tolerance policy regarding sexual abuse and sexual harassment along with how o report such incidents.
(During the on-site visit, the Auditor conducted interviews with volunteers and contract staff; each staff member confirmed and acknowledge understanding of the agency's zero tolerance policy and PREA standards and reporting responsibilities.
d	Ipon review of the policy and documentation and after completion of interviews conducted uring the on-site visit, Baker C.I. demonstrated facility-wide practices that are consistent with olicy and the requirements of the PREA standard.

115.00	
115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i>
	Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> Florida Department of Corrections Inmate Orientation Handbook (multiple languages) Florida Department of Corrections Acknowledgement of Receipt of PREA Orientation (FDOC Form DC6-134C)
	PREA / Sexual Awareness Brochures (multiple languages)
	Interviews conducted with: PREA Compliance Manager Intake Staff Random Sample of Inmates Targeted Inmates (Limited English Proficient, Deaf, or Disabled)
	On-site Review Observations: Inmate files – Comprehensive PREA Education documentation PREA Informational Signage posted throughout facility PREA Informational video
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff. This orientation will be conducted in accordance with FDOC Procedure 601.210, Inmate Orientation.
	Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> states within 24 hours of arriving to a Florida Department of Corrections Institution, all inmates will receive an initial orientation to include PREA and the Departments zero tolerance policy. The PREA orientation shall include
	 Information on PREA and the Department's zero tolerance standard relating to sexual assault; Viewing the orientation video, PREA – What You Need To Know; A realistic presentation how to avoid sexual violence while incarcerated;
	 Information on how to prevent and reduce the risk of sexual violence; Explanation of appropriate methods of self-protection and intervention; Information on how to report sexual assault to staff, including the Office of Inspector General; Information on available sexual assault counseling and treatment; and

• Information on available sexual assault counseling and treatment; and

• Instructions for the process for requesting sexual assault counseling and treatment.

Florida Department of Corrections Procedure 601.210, *Inmate Orientation* states upon completion of the orientation, each inmate will sign the form Acknowledgment of Receipt of Orientation on the Prison Rape Elimination Act (PREA) of 2003, form DC6-134C. The original form will be placed in the inmate's institutional file and receipt of the orientation will be reflected in the inmate record.

During the pre-on-site phase of the audit, the Auditor reviewed the comprehensive PREA educational video, provided in multiple languages, that is given to all FDOC inmates within 24 hours of arriving to a permanent facility. The facility utilizes the PREA educational video titled *PREA: What You Need to Know* produced by Just Detention International and the PREA Resource Center. During the on-site phase of the audit, the Auditor also reviewed multiple comprehensive documentation forms (FDOC Form DC6-134C) with inmate signatures and acknowledgment of understanding. The facility maintains documentation of inmate participation with the original form placed in the inmate's institutional file and receipt of the orientation will be noted in the inmate (electronic) record.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment in accordance with the resources outlined in FDOC Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDOC translator list, language line services.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and discussed the inmate comprehensive PREA orientation and documentation process. The PREA Compliance Manager provided specific details on the process of educating inmates including the initial orientation upon intake into the facility, the comprehensive orientation video, and the continued educational process by using PREA informational pamphlets, sexual assault prevention brochures, and the signage posted throughout the facility.

During the on-site visit, the Auditor interviewed four targeted inmates with disabilities, LEP, or hearing impaired. Each inmate acknowledged receiving PREC information during the intake / transfer process. Each inmate described receiving the comprehensive PREA orientation within the first day or two after arriving to the facility. Additionally, inmates acknowledged the information was provided to them in an accessible format specific to their individual needs.

During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations

throughout the compound. These PREA bulletins are posted in multiple languages, located near the phones banks inside the dormitory's, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display phone numbers and addresses for the victim advocate services, Tips hotline, and Women's Center of Jacksonville.

During the on-site phase of the audit, the Auditor conducted a tour of the Intake and Transfer section of the facility. During the tour, the Auditor observed a staff member providing a new intake (inmate) with the initial PREA education information. The inmate acknowledged understanding of the information verbally and with his signature. The Auditor inquired to Intake Staff how do they ensure current inmates as well as those transferred from other facilities have been educated on the agency's zero-tolerance policy on sexual abuse or sexual harassment. The Intake Staff informed the Auditor that even if an inmate has already received the orientation in a previous incarnation, all inmates entering the facility receive the PREA comprehensive orientation upon arrival to the facility.

During the on-site phase of the audit, the Auditor conducted 58 interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the *National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates.* The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmate from every housing unit and of various diversities were interviewed. Every inmate interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates also acknowledged the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

Inmates also referred to utilizing the multiple PREA informational bulletins, pamphlets, and brochures, which are posted throughout the facility, as a source of information. A majority of the inmates interviewed, referred to consulting with the inmate handbook or speaking directly with an officer or the PREA Compliance Manager as the most direct method to report or inquire about PREA information.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site tour, Baker C.I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.34	Specialized training: Investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Specialized Training Curriculum Training Certificates
	Interviews conducted with: Investigative Staff
	On-site Review Observations: Training files
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states in addition to the general PREA training, investigators, medical health care practitioners, and mental health care practitioners who work regularly with inmates shall complete specialized training.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states in addition to the general training provided to all employees pursuant to 23 CFR 115.31, the Department shall ensure that Inspectors have received training in conducting of such investigations in confinement settings. Specialized training shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for prosecution referral.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the Department shall maintain documentation that Inspectors have completed the required specialized training in conducting sexual abuse investigations. Training documentation shall be maintained by the Bureau of Professional Development and Training.
	During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the National PREA Resource Center,

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Specialized Training: Investigating Sexual Abuse in Confinement Settings and training

certificates of completion verifying investigative staff that conduct sexual abuse investigations

attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an Inspector assigned to the Office of the Attorney General's office who confirmed his attendance and successful completion of the required specialized training curriculum from the National PREA Resource Center developed by The Moss Group, Inc., Specialized Training: Investigating Sexual Abuse in Correctional Settings.

The Inspector clearly articulated the comprehensive training he had received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted during the on-site visit, in addition to the observations made throughout the on-site visit, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Health Services Bulletin #15.03.36 <i>Sexual Battery Medical</i>
	Action Florida Department of Corrections Medical & Mental Health Training Curriculum Florida Department of Corrections Training Certificates (Medical / Mental Health Staff)
	Interviews conducted with: Medical / Mental Health Staff
	On-site Review Observations: Medical Staff Training Records
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states all volunteers and contracted staff shall receive training on the Department's zero-tolerance standard for sexual abuse, sexual assault, sexual battery, sexual harassment, and staff sexual misconduct within institutional and community supervision environments.
	Florida Department of Corrections Health Services Bulletin #15.03.36 <i>Sexual Battery Medical Action</i> states all medical and mental health care practitioners who work regularly in Florida Department of Corrections facilities, including contracted staff, will be trained in how to detect and assess signs of sexual abuse and sexual harassment. All medical and mental health care practitioners will also be trained on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment.
	All medical and mental health care practitioners will also receive specialized training on recognizing the special medical and mental health needs of all inmates and factors to consider in an inmates' risk of sexual victimization. The agency shall document training of all medical staff to denote employee understanding of material and verified through employee signature.
	During the pre-on-site phase of the audit, the Auditor reviewed training records of all medical staff currently assigned to the facility; training records included the training curriculum and certificates of completion (with signatures). The training curriculum included the required

elements of the Department policy and of the PREA standard. During the on-site phase, the Auditor conducted interviews with medical & mental health staff and confirmed receipt of specialized training on how to preserve physical evidence of sexual abuse, how to respond effectively and professionally to victims of sexual abuse and sexual harassment, and how to report allegations of sexual abuse and sexual harassment. Medical and Mental Health Staff also confirmed receiving the Department's general PREA training which included the zero tolerance to sexual abuse and sexual harassment.

Upon review of the policy and documentation listed above and previously discussed, and after completion of interviews conducted, in addition to the observations made during the on-site visit file review, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.41	Screening for risk of victimization and abusiveness
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> Florida Department of Corrections IBAS IRMS Assessments
	Interviews conducted with: Staff Responsible for Risk Screening Random sample of Inmates PREA Coordinator
	On-site Review Observations: Demonstration of Inmate Behavior Assessment Scale / Inmate Risk Management System Inmate records of initial assessment & reassessment
	Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> states during the reception process, all inmates will be subject to screening within 24 hours of arrival for potential mental and physical vulnerabilities that would jeopardize an inmate's safety.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each time an inmate arrives at an institution, Health Services Staff will screen the inmate upon arrival as soon as possible, and within 24 hours. The screening will assess the inmate's sexual orientation, to include whether the inmate identifies as LGBTI. The screening will also assess if the inmate has a mental, physical, or developmental disorder that requires particularized medical or mental health care.
	Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> and Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states within 72 hours of intake, a Classification Officer will screen all inmates to determine if an inmate is at risk of future victimization of sexual abuse, sexual battery, or is at risk of committing sexual abuse or sexual battery. Characteristics such as the inmate's age, criminal record, and prior identified history of sexual victimization or predation will be utilized to make this determination.

Florida Department of Corrections Procedure 602.053, Prison Rape: Prevention, Detection, &

Response states if an inmate is identified as a potential victim or abuser (perpetrator) housing, bed, and work assignments will be appropriately assigned based on known information and established protocol. Within 30 days from the initial intake screening, the institution will reassess the inmate's risk of victimization or abusiveness if additional information is received by the institution. Additionally, an inmate's risk level shall be reassessed when warranted due to a referral, request, and incident of sexual abuse or receipt of any additional information that bears on the inmate's risk of sexual victimization or abusiveness.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates will not be disciplined for refusing to answer, or for not disclosing complete information in response to the questions asked during the risk screening.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states if the results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.

During the pre-on-site phase of the audit, the Auditor reviewed eighteen PREA Risk Factors Checklist screening forms completed during this audit period. Each form was filled out completely and in accordance to the agency policy.

The Florida Department of Corrections utilizes the *Offender Based Information System (OBIS)*, an electronic offender database system, to organize and store security, program, and other inmate information such as commitment, day-to-day activities, offenses, cases, movement between facilities, and other historical data.

Within the OBIS, the Department utilizes the *Inmate Risk Management System (IRMS)* and *Inmate Behavior Assessment Scale (IBAS)* to determine an inmate's risk screening and needs assessment.

During the pre-on-site phase of the audit, the Auditor reviewed the *IBAS Factors & Score Profile Comparison Report* (one hundred seventy-two pages). The report provides a summary of each inmate's custody level, risk screening factors, and score, personal demographics (age, weight, and height), tentative release date, time in prison, housing assignment, and predator or aggression risk factors.

In accordance with Florida Department of Corrections Procedure 601.209, *Reception Process* – *Initial Classification* the inmate classification system is comprised of two primary operational components, the State Classification Office and the Institutional Classification Team. The State Classification Office refers to the office or office staff at the central office level that is

responsible for the review of inmate classification decisions. The Institutional Classification Team (ICT) refers to the team consisting of the Warden, Assistant Warden, Classification Supervisor, Chief of Security, and other members as necessary or when appointed. The ICT is responsible for making work, program, housing, and inmate status decisions at a facility and for making other classification recommendations to the State Classification Office.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification Supervisor regarding her responsibility to conduct screenings for risk of victimization and abusiveness. The Classification Officer provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor also demonstrated the interview process (inmate volunteer), by utilizing the *Inmate Risk Management System (IRMS)* and *Inmate Behavior Assessment Scale (IBAS)* to determine the inmate's risk screening, and needs assessment. The Offender Based Information System auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the *Inmate Risk Management System*. The *Inmate Behavior Assessment Scale* is a series of questions, which include

- Sexual orientation and/or gender identity;
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life;
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life;
- If the inmate is familiar with the prison environment;
- Whether the inmate has been approached or pressured by other inmates for sexual favors;
- Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses. At the conclusion of the interview process, a *Sexual Risk Indicator score (SRI)* is generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to medical and mental health staff. The program will automatically generate the next appointment (within 30 days) for each inmate.

The Auditor inquired to the Classification Officer what actions are taken against inmates who refuse to cooperate or answer the questions in the risk screening process; she quickly responded that inmates are not required to provide answers, if this occurs, herself or another Classification Officer will conduct a follow-up interview. The Classification Officer confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk

screening process.

The Classification Officer confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Inmates are also assigned to a Classification Team (assignment is on a rotation basis) upon arrival to the facility. Inmates meet regularly with a team representative to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

During the on-site phase of the audit, the Auditor reviewed twenty-eight inmate records. These records were selected based upon the inmate sexual abuse investigations, length at facility, and inmates that disclosed sexual orientation as bisexual or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy. In the 12 months prior to the audit, the facility reported there were no inmates who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer.

During the on-site visit, the Auditor conducted 58 interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the *National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates.* The Auditor requested an up-to-date inmate roster (in alphabetical order) from every housing unit and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing unit and of various diversities were interviewed. Responses from the interview questions varied only slightly with each inmate, with fifty-two of the inmates having an immediate response and only six inmates having difficulty recalling the specific questions asked during their initial risk assessment interview.

The Auditor noted while conducting the inmate interviews, a majority of the inmates referred to his "classification team" and the availability to meet with a team representative to discuss any issues or concerns regarding with job or housing assignments, or program opportunities. Several inmates indicated a high level of trust when speaking to a team representative, and a majority also choosing "report to my Classification Team" as their method to report issues of sexual abuse or sexual harassment. Upon completion of the random and targeted inmate interviews, it was apparent to the Auditor, the facility's Classification Officers (and Team members) have a significant and positive role in the daily lives of the inmates incarnated at Baker C. I.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states the facility shall implement appropriate controls on the dissemination within the facility of responses to the questions asked pursuant to risk screenings to ensure privacy

of sensitive information that may be used for exploitation by staff or other inmates. During the on-site phase of the audit, the Auditor inquired to the Classification Officer how Baker C. I. protects such sensitive information. The Classification Officer stated the access to such information is strictly limited to Classification staff, and Medical and Mental Health.

During the on-site phase of the audit, the Auditor inquired to the PREA Coordinator how the facility protects sensitive information, in particular an inmate's risk assessment. The PREA Coordinator explained how the risk assessments are maintained electronically and only Classification staff has access to the risk assessments.

Upon review of the policies, on-site file review, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.42	Use of screening information
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Housing Integrated Assessment & Placement Report
	Interviews conducted with: PREA Compliance Manager Staff Responsible for Risk Screening Transgender / Intersex Inmates PREA Coordinator
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states if an inmate is identified as a potential victim or abuser (perpetrator) housing, bed, and work assignments will be appropriately assigned based on known information and established protocol. Within 30 days from the initial intake screening, the institution will reassess the inmate's risk of victimization or abusiveness if additional information is received by the institution.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states housing for transgender and intersex inmates will be determined on a case-by-case basis. The inmate's safety as well as the safety and the security of the institutional compound will be taken into consideration when making the housing determination.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states transgender and intersex inmates will be assessed biannually by Classification. An interview will be conducted as well as a review of their housing, program and work assignments to determine if there are any changes or threats to the inmate's safety.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states transgender and intersex inmates shall be given the opportunity to shower separately from other inmates.
	During the pre-on-site phase of the audit, the Auditor reviewed the <i>IBAS Factors & Score</i> <i>Profile Comparison Report</i> (one hundred seventy-two pages). The report provides a summary of each inmate's custody level, risk screening factors, and score, personal demographics (age, weight, and height), tentative release date, time in prison, housing assignment, and predator or aggression risk factors.
	During the on-site phase of the audit, the Auditor conducted an interview with a Classification

abusiveness. The Classification Officer provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor explained how the facility utilizes the *Inmate Risk Management System (IRMS)* and *Inmate Behavior Assessment Scale (IBAS)* to determine the inmate's risk screening, and needs assessment. The *Offender Based Information System* auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the *Inmate Risk Management System*. The *Inmate Behavior Assessment Scale* is a series of questions, which include

- Sexual orientation and/or gender identity;
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life;
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life;
- If the inmate is familiar with the prison environment;
- Whether the inmate has been approached or pressured by other inmates for sexual favors;
- Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses.

At the conclusion of the interview process, a Sexual Risk Indicator score (SRI) is generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to medical and mental health staff. The program will automatically generate the next appointment (within 30 days) for each inmate.

The Classification Officer explained how the facility uses the information obtained from the risk screening assessment interviews to determine housing assignment for each inmate, which is done strictly on a case-by-case basis. She further explained a transgender or intersex inmate's own views on safety is given consideration during this process and if placed in protective custody, such placement is done at the request of the inmate or solely based on the inmate's classification level.

During the on-site visit phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager on how the facility uses information obtained from the risk screening assessment interview to keep inmates from being sexually victimized or being sexually abusive. The PREA Compliance Manager described the risk screening process and explained how depending upon the responses given by the inmate is used to assist in the initial classification and with determining the risk level of vulnerability. Inmates perceived to be vulnerable or predatory will be housed and given work / program assignments consistent with custody level and medical status. Inmates at a risk of high victimization are involuntarily segregated, only if an assessment of all other available alternatives has been made and it is determined that no other alternative means of separation from likely abusers exist.

The Auditor also inquired to the PREA Compliance Manager how the facility determine housing and program assignments for transgender or intersex inmates. The PREA Compliance Manager explained that housing for a transgender or intersex inmate is determined on a case-by-case basis. The inmate's safety as well as the safety and the security of the institutional compound will be taken into consideration when making the housing determination.

During the on-site visit, the Auditor conducted six interviews with targeted inmates. All inmate interviews were conducted with the guidance of the National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate roster for transgender and intersex inmates to conducted targeted inmate interviews.

The Auditor conducted six interviews with inmates who identify as either bisexual or transgender. Each inmate was questioned whether they were placed in a housing area only for bisexual or transgender inmates. Each inmate acknowledged being housed in a general population housing area for all inmates of the same level of classification. Each inmate explained the classification levels are based on criminal history. The inmates who identified as transgender were questioned if they were allowed to shower without other inmates and each acknowledged yes.

Upon review of the policies and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

Protective Custody	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, o</i> <i>Response</i> Florida Administrative Code 33-602.220, <i>Administrative Confinement</i>
Interviews conducted with: Facility Warden Staff who supervise Inmates in Segregated Housing Inmates in Segregated Housing (for risk for sexual victimization / who all sexual abuse)	Facility Warden Staff who supervise Inmates in Segregated Housing Inmates in Segregated Housing (for risk for sexual victimization / who allege to have suffered
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, a</i> <i>Response</i> states inmates at high risk of victimization will not be involuntarily segregated unle an assessment of all other available alternatives has been made and it is determined that there are no available alternative means of separation from likely abusers.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, Response</i> states inmates perceived to be vulnerable would be housed and given work/program assignments consistent with custody level and medical status.
C C E	Florida Administrative Code 33-602.220, <i>Administrative Confinement</i> states if it is necessary ontinue the inmate's confinement beyond this first extension, written authorization must be btained from the State Classification Office for a 30-day extension. The State Classification Office shall have the authority to authorize one additional one additional 30-day extension. Examples of circumstances for placing an inmate in administrative confinement for this reasonable.
	 Pending an evaluation for placement in close management Special review against other inmates, disciplinary, program change or management transfer Pending an investigation into allegations that the inmate is in fear of a staff member Any other reason when the facts indicate that the inmate must be removed from the general inmate population for the safety of any inmate or group of inmates or for the security of the institution.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates at high risk of victimization. The Facility Warden explained the

Inmate Behavior Assessment Scale (IBAS), which assists in determining risk factors, also helps in choosing appropriate and safe housing assignments for inmates identified as being at risk. Inmates who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible and the inmate will be released from segregation as soon as it can be determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmates placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an inmate has restrictions placed on him it would be a result of their behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.

During the 12 months prior to the audit, the facility reported two inmates, who reported sexual abuse, being assigned to involuntary segregating housing for longer than 30 days. According to documents provided by the facility and reviewed by the Auditor, both inmates were being placed into Administrative Confinement pending a Disciplinary Report at the time of the PREA allegation. At the time of the on-site audit, the Auditor was not able to interview either inmate; either they had completed their sentence or had been transferred to another facility. Additionally, the documentation reviewed by the Auditor contained multiple data entry reviews conducted by the PREA Compliance Manager documenting the basis for continuing such restrictions and the justifications for extending the assignment in segregated housing.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.51	Inmate reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> Florida Department of Corrections Employee Handbook Memorandum of Understanding with Women's Center of Jacksonville, Inc. Memorandum of Understanding with Gulf Coast Children's Advocacy Center, Inc. Florida Department of Corrections Inmate Handbook Florida Department of Corrections Sexual Abuse Awareness Brochure (English/Spanish) Florida Department of Corrections PREA Informational Poster (English/Spanish)
	Interviews conducted with: PREA Compliance Manager Random sample of Staff Random sample of Inmates On-site Review Observations: PREA informational signage Victim Support Services Hotline TIPS Hotline
	Florida Department of Corrections Procedure 601.210, <i>Inmate Orientation</i> states each institution will ensure that the inmate orientation process shall advise inmates to report immediately any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment. The PREA orientation shall also include how to report incidents or suspicion of sexual abuse or sexual harassment.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states inmates with recognized disabilities and Limited English Proficiency (LEP) shall be advised of the Department's zero tolerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. Staff shall utilize the resources outlined and in accordance with the Americans with Disabilities Act for Inmates, Procedure 604.101 and other Department resources as appropriate. Resources include closed captioning (deaf/hard of hearing), large print material (impaired vision), and reading of materials to inmate by staff (blind/limited mental capacity). Additional resources include the FDOC translator list and language line services.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states inmates have multiple methods for reporting incidents of sexual abuse,

sexual battery, staff sexual misconduct, and sexual harassment. The methods inmates can report include:

- verbally to any staff member, volunteer, or contractor
- by calling the TIPS line
- calling an outside entity (Gulf Coast Advocacy Center)
- file an Inmate Request
- file an informal or formal grievance
- have a family member or friend fill out the online Citizen's Complaint form
- write or email the Office of the Inspector General
- write or email the PREA Coordinator

During the on-site phase of the audit, the Auditor reviewed the contract between the Florida Department of Corrections and Gulf Coast Children's Advocacy Center, Inc. and the contract between the Florida Department of Corrections and Women's Center of Jacksonville, Inc.

The Gulf Coast Children's Advocacy Center provides inmates incarcerated at Baker C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Gulf Coast Children's Advocacy Center include providing mailing addresses and phone numbers of victim advocates and in-prison visits during forensic exams and investigatory interviews, if requested. The Gulf Coast Children's Advocacy Center also provides a toll-free outside reporting hotline for services, support, and is designated as the outside reporting hotline for Baker C. I. inmates.

The Women's Center of Jacksonville provides inmates incarcerated at Baker C. I. with advocacy services for victims of sexual violence and commensurate with services available to sexual violence victims in the community at large. The services include providing a 24/7 toll-free rape crisis hotline staffed by certified victim advocates, providing mailing address for inmate victims to send correspondence and respond to such within seven business days, and providing a certified victim advocate for advocacy accompaniment during pre-scheduled investigatory interviews.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Gulf Coast Children's Advocacy Center. The victim advocate confirmed the Gulf Coast Children's Advocacy Center provides the services, as stated in the contract, to the inmates incarcerated at Baker C. I.

During the on-site phase of the audit, the Auditor conducted an interview with a victim advocate from the Women's Center of Jacksonville who confirmed the services provided and provided the Auditor with a detailed process of the services provided (questions, responses, directions) if an inmate were to place a crisis hotline call.

During the on-site phase of the audit, the Auditor conducted 58 interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the *National*

PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates. The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing dormitory and of various diversities were interviewed. Inmates were asked how they would report an incident of sexual abuse or sexual harassment if it happened to them or another inmate. A majority of the responses indicated using the PREA hotline as their preferred method of reporting, while the remaining inmate responses indicated telling a staff member or a family member. All of the inmates listed more than two methods of reporting when the Auditor posed the initial question, confirming inmates are educated in the multiple reporting avenues available. Inmates were also questioned if they could submit a report anonymously or have a third party report the incident. All fifty-eight inmates interviewed acknowledge "yes" to filing a report without providing a name (anonymously) and having another inmate report for them or a family member (third party reporting).

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states all reports of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment received by a staff member shall be documented immediately and shall be investigated thoroughly and accordance to agency policy.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states facility staff may report sexual abuse and sexual harassment of inmates anonymously to the Inspector General TIPS line.

During the on-site phase of the audit, the Auditor-conducted interviews with a random sample of staff and asked each staff member how an inmate can privately report sexual abuse and sexual harassment or retaliation by other inmates or staff for previously reporting sexual abuse and sexual harassment.

Each staff member interviewed was able to articulate the various methods an inmate may privately report an allegation of sexual abuse or sexual harassment (TIPS hotline, third party reporting, PREA hotline). Staff members also explained that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

The Auditor inquired to each staff member how he/she would report an allegation of sexual abuse or sexual harassment of inmates privately. Staff responses were evenly divided to either calling the Office of the Inspector General (TIPS hotline) or tell his/her immediate supervisor. Staff members expressed confidence in reporting either to the OIG or privately to his/her supervisor and no one reported fear of retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the PREA

Compliance Manager to verify reporting methods for sexual abuse or sexual harassment allegations that are available for inmates and staff. The PREA Compliance Manager confirmed the multiple methods of reporting available for inmates and staff, these reports can be made either verbally, in writing, by a third party and may be done so in private or anonymously and all reports, no matter the method used to report, are confidential and handled promptly and professionally. The PREA Compliance Manager confirmed that the Gulf Coast Children's Advocacy Center is the designated outside entity for inmate reporting.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories, various work assignments, and while touring the programs, educational, and workshop buildings. The Auditor conducted informal interviews with inmates regarding the use of the PREA hotline and all confirmed it is accessible 24 hours a day, 7 days a week and is considered confidential. Throughout the facility tour, the Auditor conducted multiple test calls of all three hotlines available for inmates to reporting. All three hotlines, are secured, confidential lines and have designated speed dial numbers, *8466 – Gulf Coast Children's Advocacy Center, *8477 – TIPS Line (OIG), and *8499 – Women's Center of Jacksonville. All three hotlines were found to be in working order throughout the testing process.

Also throughout the facility tour, the Auditor observed PREA informational signage posted in all housing dormitories, inmate educational and program buildings, in the religious programs / services building, in the Visitor Park, and inmate work areas (laundry, barbershop, etc.). The PREA informational signage was posted in multiple languages.

Upon review of the policies, contracts, employee handbook, FDOC inmate handbook, and PREA informational brochures and signs and upon completion of interviews conducted, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.52	Exhaustion of administrative remedies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Administrative Code Rule 33-103.005, <i>Informal Grievance</i> Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, &</i> <i>Response</i> Florida Department of Corrections Inmate Handbook
	Interviews conducted with: Inmates who reported a Sexual Abuse
	Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states inmates shall utilize the informal grievance process prior to initiating a formal grievance. Inmates may skip this step and initiate the process at the formal institutional level for issues pertaining to grievances regarding allegations of sexual abuse. Inmates filing grievances alleging sexual abuse shall not be instructed to file the grievances to the individual(s) who are the subject(s) of the complaint. Additionally grievances of this nature shall not be referred to the subject(s) of the complaint.
	Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states there is no time limit on when an inmate or a third party may initiate a grievance regarding allegations of sexual abuse.
	Florida Administrative Code Rule 33-103.006, <i>Formal Grievance</i> states upon receipt of an emergency grievance the reviewing authority shall take the following action as soon as possible, but no later than two calendar days following receipt: review complaint and contact staff for additional information if necessary, if an emergency is found to exist, initiate action to alleviate condition giving rise to the emergency, provide a formal response to the inmate within 15 calendar days. If an emergency is not found to exist, a response will be provided to the inmate indicating that the complaint is "not an emergency" with instructions to resubmit at the proper level, signed and dated by the responding employee and returned to the inmate within 72 hours of receipt.
	During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Inmate Handbook and confirmed the handbook contains information about the grievance process to include explanation of the two types of grievance, informal and formal. The handbook informs inmates that additional and more detailed grievance information is

Administrative Code.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states the Department shall claim an extension of time to respond, of up to 70 days, if the normal time-period for response is insufficient to make an appropriate decision due to the need for additional investigation. The inmate shall be notified in writing of the extension and a date by which a decision will be made.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states if an inmate or third party is filing a grievance involving sexual abuse, it shall be clearly stated in the first line of the grievance that it is a grievance related to sexual abuse. Also on Form DC1-303, the third party filer shall check the box next to Third Party Grievance Alleging Sexual Abuse. If this statement is not included in the grievance and if the third party box is not checked, the grievance shall be responded to. This will not be a reason to return the grievance without action to the filer.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states when third parties initiate a sexual abuse grievance, the inmate will be notified by institutional staff. A staff member shall interview the inmate within 2 business days of receipt of the third party grievance alleging sexual abuse. During this interview the inmate shall elect to allow the grievance to proceed or request that the grievance be stopped by completing the top half of Form DC6-236, Inmate Request, stating he elects for the grievance to proceed or stopped. The institution shall document the inmate's desire to either allow or refuse the grievance to proceed under the response section of Form DC6-236. A copy of the request will be placed in the inmate's file.

Florida Administrative Code Rule 33-103.006, *Formal Grievance* states an inmate may file an emergency grievance if they believe they are subject to a substantial risk of imminent sexual abuse. When receiving an emergency grievance from an inmate expressing belief they are subject to a substantial risk of imminent sexual abuse the institution must take immediate corrective action. Staff handling this grievance shall provide an immediate response within 48 hours and shall issue a final decision within 5 calendar days from the receipt of the grievance. The final decision will document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse and the action taken in response to the emergency grievance.

Florida Department of Corrections Procedure 602.053, *Prison Rape: Prevention, Detection, & Response* states when it is determined that an inmate has filed a PREA report in bad faith, i.e., knowingly filed a false report, that inmate shall be subject to discipline.

During the twelve months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse or sexual misconduct. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse or sexual misconduct allegations, however, the Auditor was provided with facility documentation showing

three of the inmates had been released from the custody of the Florida Department of Corrections. The fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse or sexual misconduct allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Upon review of policies and of the Florida Department of Corrections Inmate Handbook, Baker C.I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Memorandum of Understanding with Women's Center of Jacksonville, Inc. Memorandum of Understanding with Gulf Coast Children's Advocacy Center, Inc. Florida Department of Corrections PREA Informational Poster (English / Spanish) Florida Department of Corrections Sexual Abuse Awareness Brochure (English / Spanish) Florida Department of Corrections Inmate Orientation Handbook (English / Spanish)
	Interviews conducted with: Random sample of Inmates Inmates who reported a Sexual Abuse
	On-site Review Observations: PREA informational signage Sexual Abuse Awareness Brochure
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis. Additionally, the victim will be offered support services by means of means of a mailing address and/or telephone numbers to local community support groups.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any inmate who alleges sexual abuse or sexual battery will be advised of his/her right to crisis intervention services, forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interviews.
	During the pre-on-site phase of the audit, the Auditor reviewed the Florida Department of Corrections Inmate Orientation Handbook. The FDOC Inmate Handbook provides information regarding victim advocacy services for inmates and all information provided will be kept confidential, except information that requires mandatory reporting.
	During the on-site phase of the audit, the Auditor reviewed the contract between the Florida Department of Corrections and Gulf Coast Children's Advocacy Center, Inc. and the contract

between the Florida Department of Corrections and Women's Center of Jacksonville, Inc.

The Gulf Coast Children's Advocacy Center provides inmates incarcerated at Baker C. I. with advocacy services for victims of sexual abuse or sexual violence. The services provided by the Gulf Coast Children's Advocacy Center include providing mailing addresses and phone numbers of victim advocates and in-prison visits during forensic exams and investigatory interviews, if requested. The Gulf Coast Children's Advocacy Center also provides a toll-free outside reporting hotline for services, support, and is designated as the outside reporting hotline for Baker C. I. inmates.

The Women's Center of Jacksonville provides inmates incarcerated at Baker C. I. with advocacy services for victims of sexual violence and commensurate with services available to sexual violence victims in the community at large. The services include providing a 24/7 toll-free rape crisis hotline staffed by certified victim advocates, providing mailing address for inmate victims to send correspondence and respond to such within seven business days, and providing a certified victim advocate for advocacy accompaniment during pre-scheduled investigatory interviews.

During the on-site phase of the audit, the Auditor conducted 58 interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the *National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates.* The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmates from every housing dormitory and of various diversities were interviewed. Inmates were asked if needed, there are services available outside of the facility for dealing with sexual abuse. All fifty-eight inmates stated there are services available as they were explained to them during the comprehensive PREA orientation. Approximately three-quarters of the random selection could provide details of the types of services offered, however, the remaining inmates were unable to provide the Auditor with specifics on the services available. The Auditor reviewed these answers and discovered these inmates had been incarcerated for an extended amount of time and it would be difficult to recall information received during the initial orientation. Each inmate that did not know the specifics of the services offered, informed the Auditor if they needed such services they could refer to the PREA informational signs (posted in every housing dormitory) or ask a Staff Member. All fifty-eight inmates acknowledged being provided mailing address and telephone numbers to victim advocacy services and that such calls are toll-free.

During the on-site phase of the audit, the Auditor conducted a facility tour. During the tour of the facility, the Auditor conducted informal interviews with inmates in the housing dormitories, various work assignments, and while touring the programs, educational, and workshop buildings. Throughout the tour, the Auditor noted PREA informational posters and Sexual Abuse Awareness Brochures displayed in all of the above areas / buildings.

During the twelve months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse allegations, however, the Auditor was provided with facility documentation showing three of the inmates had been released from the custody of the Florida Department of Corrections. The fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse or sexual misconduct allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Upon review of the policies and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Inmate Orientation Handbook (multiple languages) Florida Department of Corrections Website http://www.dc.state.fl.us/PREA/index.html PREA Informational Poster (English / Spanish)
	Interviews conducted with: Random sample of Inmates
	On-site Review Observations: PREA informational signage
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states each institution will ensure that the inmate orientation process will encourage inmates to immediately report any concern or fear of possible sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to correctional staff.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmates may report incidents of sexual abuse, sexual battery, or staff misconduct by having a family member, friend, or other member of the public submit a third-party grievance.
	During the on-site phase of the audit, the Auditor conducted a tour of the facility and observed PREA informational bulletins posted in every housing area as well as various locations throughout the compound. These PREA bulletins are posted in multiple languages, located near the phones banks inside the dormitory's, as well as several posted in common areas (educational and vocational buildings) throughout the compound. The bulletins display reporting instructions to include telling a family member or friend can file a third-party grievance via the agency's online complaint form on the agency website.
	During the on-site phase of the audit, the Auditor conducted 58 interviews with a random sample of inmates. All inmate interviews were conducted with the guidance of the <i>National PREA Resource Center, PREA Compliance Audit Instrument - Interview Guide for Inmates.</i> The Auditor requested an up-to-date inmate facility roster (in alphabetical order) from every housing dormitory and selected every tenth inmate from the inmate rosters provided.

Inmate from every housing dormitory and of various diversities were interviewed. Every inmate interviewed recalled receiving both the initial PREA orientation and the comprehensive (video) orientation. All inmates also acknowledged the zero tolerance policy on sexual abuse sexual harassment and the various ways to report such incidents.

When questioned about third party reporting, all inmates acknowledged how to submit a third party report (ask a family member or friend to submit a report or call the PREA hotline); in addition, several of the inmates referred to the PREA bulletins posted throughout the facility as it contains the directions on how to submit a third party report.

During the pre-on-site phase of the audit, the Auditor visited the agency's website and confirmed the availability for the public to submit a report of sexual abuse or sexual harassment on behalf of an inmate. The report may also be submitted anonymously.

Upon review of the policies and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

1	Staff and agency reporting duties
	Auditor Overall Determination: Meets Standard
,	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, o</i> <i>Response</i> Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, &</i> <i>Sexual Misconduct</i>
	Interviews conducted with: Random sample of Staff Medical / Mental Health Staff Facility Warden
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, a Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to:
	 Taking all reports concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment seriously; Initiating immediate reporting of alleged sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment to the Office of the Inspector General; Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment; Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an incident of sexual abuse sexual harassment, or retaliation.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states staff will not reveal any information related to the sexual abuse or sexual harassment allegation to anyone other than to the extent necessary to make treatment, investigation and other security and management decisions.
	Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, &
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Sexual Misconduct states whenever sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism occurs, the Emergency Action Center (EAC) shall be notified without unnecessary delay. The OIC or the Incident Commander shall ensure that any sexual abuse, sexual battery, sexual harassment, sexual misconduct, or voyeurism is reported via *Management Information Notes System (MINS)* after notification to EAC.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, & Sexual Misconduct* states the Office of the Inspector General shall, except pursuant to the terms of any valid Memorandum of Understanding (MOU) or protocol with any other law enforcement agency, be the primary investigative unit of all sexual battery and sexual misconduct allegations occurring on Department property.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff members. Each staff member interviewed articulated the agency's zero tolerance policy on sexual abuse and sexual harassment, their role and responsibilities regarding sexual abuse and sexual harassment prevention, detection, reporting, and response, how to communicate effectively and professionally with inmates, and an inmates right to be free from sexual abuse and sexual harassment. Staff members also acknowledged that reports concerning sexual abuse or sexual harassment, whether reported verbally or in writing, are considered confidential and must be documented immediately.

During the on-site phase of the audit, the Auditor conducted interviews with Medical and Mental Health Staff regarding responsibilities to disclose to inmates the confidentiality limitations and reporting incidents of sexual abuse or sexual harassment. Both articulated in detail step-by-step process when reporting incidents of sexual abuse or sexual harassment as well as expressed the requirement to report such incidents immediately. Both Medical and Mental Health Staff members acknowledged disclosing the confidentiality limitation prior to the initiation of services with any inmate. The Auditor inquired if any inmates had reported an incident of sexual abuse or harassment during the past 12 months to them and both indicated they had not received such reports.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired to her how Baker C. I. responds when an allegation of sexual abuse or sexual harassment is make by someone under the age of 18 or someone who is considered vulnerable adult under state law. The Facility Warden explained that Baker C. I. does not house inmates under the age of 18 nor inmates who are considered vulnerable adults.

The Auditor inquired to the Facility Warden are allegations of sexual abuse and sexual harassment, to include third party and anonymous sources, reported to designated facility investigators. The Facility Warden indicated all allegations of sexual abuse and sexual harassment, no matter the origin of reporting, are reported directly to the Office of the Inspector General via the *Management Information Note System (MINS)*.

Upon review of the policies and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i>
	Interviews conducted with: Agency Head Facility Warden Random sample of Staff
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized. Security / safety concerns will be immediately addressed by the Shift Supervisor and s/he will take the necessary steps to ensure the security / safety of the inmate.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any staff member will notify the Shift Supervisor if s/he observes an inmate acting in what appears to be a sexually threatening or coercive manner, or if the staff member has reason to believe that an inmate poses a risk of being sexually victimized.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes, but not limited to:
	 Taking all reports concerning sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment seriously; Initiating immediate reporting of alleged sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment to the Office of the Inspector General; Promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment; Promptly reporting any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that many have contributed to an incident of sexual abuse, sexual harassment, or retaliation.

During the on-site phase of the audit, the Auditor conducted interviews with a random sample of staff and inquired about his/her actions if they received information that an inmate was in imminent risk of sexual abuse. Each staff member articulated the agency's response protocol to receiving such information and all staff members interviewed stated either "ensuring the inmate's safety is our first priority" or "remove the inmate (victim) from the area to ensure he/she is safe". Staff indicated that once the inmate who was at risk is secured, they would immediately notify their Supervisor.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Facility Warden informed the Auditor that once a staff member receives information that an inmate may be at risk for sexual abuse or sexual harassment, that inmate is immediately removed from the area. The inmate victim's housing preference is considered, however the decision on his ultimate placement is driven by the need for protection from possible abuse and/or retaliation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding what action is taken upon learning an inmate is subject to a substantial risk of imminent sexual abuse. The Agency Head stated if an inmate is at risk of imminent sexual abuse the first thing staff will be responsible for separating the victim from the potential abuser. The potential victim will be given the opportunity to speak with a staff member regarding the situation as well as Medical and Mental Health. If necessary, a housing change or facility transfer may be required for that inmate. The inmate may also request to be reviewed for placement in Protective Management (PM), which would require the inmate to be placed in Administrative Confinement until the PM investigation is complete.

Upon review of the policy, observations made during the on-site facility tour, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirement of the PREA standard.

115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Documentation of Notification to other Facilities Investigative Tracking Sheet
	Interviews conducted with: Agency Head Facility Warden
	On-site Review Observations: Investigative Case files
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states if staff at a receiving institution receives information that sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment occurred at another institution, the receiving institutions Warden shall notify the sending institutions Warden within 72 hours of receiving the allegation. The notification shall be documented on a DC6-210.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the receiving institution, where the allegation is reported will be responsible for contacting Emergency Action Center (EAC), completing a DC6-210, and entering the appropriate information into <i>Management Information Notes System (MINS)</i> for appropriate handling.
	During the on-site phase of the audit, the Auditor reviewed investigative case files with documentation of notifications (emails) that were sent from facility to facility. In the twelve months prior to the audit, Baker C. I. reported receiving one allegation of sexual abuse that occurred at another facility.
	The agency has an electronic notification process, when an allegation is reported to the EAC, the EAC assigns a PREA case number, and an electronic notification is automatically sent to the Office of the Inspector General for case assignment and investigation.
	The documentation contained the date the allegation was reported, confirmation that Baker C. I. reported the allegation to the Emergency Action Center and entered the information into the Management Information Notes System (MINS). The facility to facility patification was cent

Management Information Notes System (MINS). The facility-to-facility notification was sent

within 72 hours.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and asked what the process is when your facility receives an allegation from another facility or agency that an incident of sexual abuse or sexual harassment occurred at the facility. The Facility Warden explained the facility, which houses the alleged victim, handles protective measures, and notifies the Office of the Inspector General, if necessary, and the Emergency Action Center. If the time of the alleged occurrence were recent, Baker C. I. would secure the crime scene until the OIG could collect evidence. If the alleged perpetrator were still housed at Baker C. I., he would be placed in Administrative Confinement as a PREA perpetrator until Institutional Classification Team (ICT) could review the need to maintain him in confinement.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired if another agency or facility refers allegations of sexual abuse or sexual harassment that occurred within one of your facilities, is there a designated point of contact. The Agency Head explained that the point of contact for all Department related incidents is either the facility where the incident occurred or the Office of the Inspector General. Staff members receiving an allegation will in turn contact the Department's Emergency Action Center (EAC). If an outside agency advises that an inmate reported being sexually victimized at a prior Departmental facility, it is the receiving staff member's responsibility to notify the EAC of the incident. The EAC will provide that staff member with an incident number and a PREA case number. The PREA case number will be utilized to create a record of the incident in the *Management Information Notes System (MINS)*. Once a record is created in MINS, the information is automatically routed to the Office of the Inspector General for review. The Warden at the facility were the inmate reported will also be responsible for notifying the Warden at the facility the incident occurred within 72 hours of receiving the allegation.

Upon review of the policy, documentation, and investigative files, and upon completion of the interviews conducted, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

	or Overall Determination: Exceeds Standard
Audito	or Discussion
<i>Respo</i> Florida	a Department of Corrections Procedure 602.053, Prison Rape – Prevention, Detection,
Securit Rando	ews conducted with: ty Staff / Non-Security Staff First Responders m sample of Staff es who reported a sexual abuse
<i>Respo</i> zero-to	a Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & nse</i> states all staff shall be thoroughly trained and informed regarding the Departments plerance policy on sexual abuse, sexual battery, staff sexual misconduct, and sexual sment at least every two years.
Respo	a Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, nse</i> states upon learning of an inmate sexual abuse or sexual battery allegation or ht, the first security staff member to respond to the report shall be required to:
• ;	Separate the alleged victim and abuser;
•	Preserve and protect any potential crime scene until appropriate steps can be taken to
• (•	

details of their responsibilities as a First Responder. These responsibilities include separating the victim and abuser, preserving, and protecting the crime scene, requesting that the alleged

victim not take any actions that could destroy physical evidence, ensuring the alleged abuser does not take any actions, which would destroy physical evidence, and to immediately notify medical and mental health. In addition, each staff member acknowledged the importance of the agency's response protocol to a sexual abuse allegation as well as his or her role as a First Responder.

According to the information entered into the PAQ, the facility reporting during the 12 months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse allegations and the Auditor was provided with facility documentation showing three of the inmates had been released from the custody of the Florida Department of Corrections. The fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Upon review of the policy, documentation, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds of the PREA standard.

5	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Baker Correctional Institution PREA Coordinated Response Plan
	Interviews conducted with: Facility Warden
	Florida Department of Corrections Baker Correctional Institution PREA Coordinated Response Plan outlines the facility's written plan to coordinate actions taken in response to an incident of sexual abuse. Any employee who has knowledge of or receives information, written or verbal (first hand or third party) regarding the fear of, coercion into, or actual sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment will immediately notify the Shift Supervisor or the Chief of Security, who will then take immediate steps to evaluate the inmate's concern/allegation.
	The authority notified will ensure proper medical treatment (if applicable) and the safety of the inmate by means provided in Rule 33-602.22, F.A.C., <i>Administrative Confinement</i> , if applicable.
	Upon learning of an allegation that an inmate was sexually abuse or sexually battered, the first security staff member to respond to the report shall be required to:
	 Separate the alleged victim and abuser; Ensure all victims and other injured persons are provided appropriate First Aid & Emergency Medical Services, as appropriate; Preserve & protect any crime scene until appropriate steps can be taken to collect any evidence; If the abuse occurred within a time period that still allows for the collection of physical evidence, 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, drinking, or eating; If the First Responder is not a security staff member, request that the alleged victim not take any action that could destroy physical evidence, and then notify security staff; Any inmate who alleges sexual battery shall be given a copy of Form N11-120 and advised of her/his right to access crisis intervention services, to have a forensic examination, and to have a victim advocate present during the forensic examination and/or the investigative interview if s/he chooses. This offer will be documented in an

The Shift Supervisor or the Chief of Security shall ensure that the inmate victim, and if applicable the inmate perpetrator, are escorted to medical. The Shift Supervisor or the Chief of Security will determine the timeline of the alleged incident. If the incident occurred more than forty-eight hours prior to the reporting of the incident, the Office of the Inspector General will be notified to determine if physical evidence exists for examination before activating the Sexual Abuse Response Team (SART).

The Shift Supervisor or the Chief of Security shall ensure that the names of all persons responding to the crime scene are recorded and provided to the responding Inspector. S/He shall also ensure that all inmates who witnessed any sexual battery or sexual misconduct are segregated and their information is listed on an incident report (DC6-210).

The Shift Supervisor or the Chief of Security shall ensure:

- 1. Any weapon or evidence suspected of being involved in a sexual battery or sexual misconduct is preserved;
- 2. That a Chain of Custody form (DC1-801) is created and maintained;
- 3. The evidence is provided to the responding Inspector or other Law Enforcement personnel as soon as possible and with minimal handling to preserve any latent or forensic evidence.

The Shift Supervisor will ensure that a DC6-210 and a *Management Information Notes System (MINS)* report are processed and submitted. The Inspector shall respond to the scene and immediately contact the Shift Supervisor or the Chief of Security. S/He will conduct any necessary preliminary interviews of the victim, if applicable, and witnesses, as appropriate.

If the SART Team is activated the Shift Supervisor or the Chief of Security and/or the Inspector will ensure that no attempt is made by Medical Staff to clean or treat the inmate unless the injuries are such that not treating them would cause deterioration of the inmate's medical condition. Staff from the Office of the Inspector General will collect evidence as appropriate; the Panhandle Nurse Forensic Specialist's SART will collect the clothing the inmate was wearing at the time of the sexual battery if the inmate is still wearing them.

Following the forensic medical examination (or after the inmate is escorted to medical for those instances where SART Team is not activated), Medical Staff shall ensure that the *Alleged Sexual Battery Protocol* (DC4-683M) is completed. Medical Staff shall complete the Consent and Authorization for Use and Disclosure Inspection and Release of Confidential Information (DC4-711B) and have the inmate sign the form.

The victim and perpetrator (if known) will be tested for the below diseases and provided access to sexually transmitted infection prophylaxis. Repeat testing shall be done for all diseases that may have been transmitted at intervals of four week, three months, and one

year.

- HIV
- Hepatitis B and C
- Gonorrhea
- Syphilis
- Chlamydia

Medical Staff shall ensure that the inmate victim(s) and/or inmate perpetrator(s) are referred for mental health services if appropriate. Mental Health Staff shall ensure that inmate victim(s) and/or perpetrator(s) receive the appropriate services.

During the pre-on-site phase of the audit, the Auditor reviewed the above PREA Coordinated Response Plan. The plan is very detailed, provides systematic instructions, and outlines the roles and responsibilities for all staff responding to an incident of sexual abuse.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired as to the implementation of the PREA Coordinated Response to Sexual Abuse. The Facility Warden provided a detailed description of the response plan and each staff member's responsibility when responding to an allegation of sexual abuse or sexual harassment.

Upon review of the FDOC *Baker Correctional Institution PREA Coordinated Response Plan* and upon completion of the on-site interview with the Facility Warden, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

Ī	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Agreement State of Florida and the Florida Police Benevolent Association, <i>Security Services</i> <i>Bargaining Unit</i>
	Interviews conducted with: Agency Head
	Florida Department of Corrections has a collective bargaining agreement with the Florida Police Benevolent Association (PBA). The PBA is the representative for the purposes of collective bargaining with respect to wages, hours, and terms and conditions of employment for all employees included in the Security Services Bargaining Unit.
,	The Security Services Bargaining Unit includes all employees, non-professional, and professional, certified under Florida Statute Chapter 943, whose primary duties involve the direct care, custody, and control of persons confined in or supervised by the Department's Office of Community Corrections, Probation, and Parole Services.
 	During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head regarding collective bargaining agreements the agency has entered into or renewed since August 20, 2012. The Agency Head confirmed to the Auditor, the Florida Department o Corrections has a collective bargaining agreement with the Police Benevolence Association PBA) since December 2016, which represents Correctional Officer and Probation Officer sta Prior to the PBA, the Department had an agreement with the Teamsters Local 2011.
e i	Additionally, the Agency Head explained that the Department is authorized to dismiss or suspend a permanent status career service employee for any cause noted in Chapter 110.27 of the Florida Administrative Code. Such cause includes poor performance, negligence, nsubordination, inefficiency, or inability to perform assigned duties, violation of law or agency rules, conduct unbecoming a public employee, misconduct, habitual drug use and any conviction of any crime.
a t	The Agency Head also explained that the Department does not have permanent post assignments nor does it allow posts to be "bid" out. Staff members are assigned to posts pric to the commencement of the shift by their shift supervisor. Staff members can be relocated to numerous posts, including posts that do not allow for contact with inmates. Because the

Department is so large, staff and inmates may be relocated to alleviate any problems.

Upon review of the documentation provided and upon completion of the interviews with the Agency Head, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i>
	Interviews conducted with: Designated Member Charged with Monitoring Retaliation Inmates in Segregated Housing (for risk of SV/who allege to have suffered SA) Inmates who reported a Sexual Abuse Facility Warden Agency Head
	On-site Review Observations: Investigative Case files
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all staff, volunteers, and contractors will ensure that they foster an environment within their facility that precludes sexual abuse, sexual battery, staff sexual misconduct, and sexual harassment. This includes promptly reporting any allegation involving retaliation against alleged victims or identified reporters of sexual abuse, sexual battery, staff sexual sexual misconduct, or sexual harassment.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmates and/or staff who report sexual abuse will be monitored for retaliation for at least 90 days, with at least three contact status checks to occur within the 90-day monitoring period at the 30, 60, and 90-day marks from the date of the allegation.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate conduct, including a review of disciplinary reports, treatment by other staff and inmates, and changes in housing, program assignments, work assignments, and demeanor will be reviewed along with the period status checks. The facility shall respond appropriately to protect any other individual who cooperates with an investigation and expresses a fear of retaliation.
	During the on-site phase of the audit, the Auditor conducted an interview with the Facility Staff Member designated with monitoring retaliation. The Staff Member acknowledged she was the primary staff member designated with monitoring retaliation; however, there is one other staff member and the PREA Compliance Manager who can monitor retaliation if either one of them 102

were unavailable for an extended period.

The Staff Member articulated that in an effort to prevent retaliation against inmates and staff who report sexual abuse or harassment or those who cooperate with an investigation, she would monitor those individuals for at least 90 days. The Staff Member reviews disciplinary reports, inmate housing or transfers, and negative performance reviews of staff members. If she had a concern that potential retaliation might occur beyond the 90 days, she would continue to monitor conduct and treatment until the issue or threat is resolved.

During the on-site phase of the audit, the Auditor reviewed the investigative files. Each file contained forms showing the retaliation monitoring interviews that were conducted with inmates who previously alleged sexual abuse or sexual harassment. Each form provided a detailed explanation of the interview, statements from the inmate, and comments from the Staff Member. The monitoring interviews were conducted at the 30, 60, and 90 day review dates.

During the twelve months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse allegations, however, the Auditor was provided with facility documentation showing three of the inmates had been released from the custody of the Florida Department of Corrections. The fourth inmate was transferred to another correctional facility and unavailable for an interview. (There were six sexual abuse allegations reported, however one inmate reported three separate allegations.) Due to the unavailability of these inmates, the Auditor was unable to interview any inmates who had reported an allegation of sexual abuse.

Additionally, during the twelve months prior to the audit, the agency reported no allegations of retaliation were reported nor where there any inmates placed in segregated housing due to risk of sexual victimization. Therefore, inmates in this interview category were not interviewed.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired on the different measures taken to protect inmates and staff from retaliation for reporting allegations of sexual abuse or sexual harassment. The Facility Warden confirmed the facility would take all necessary steps to protect any person who reports a sexual abuse / harassment incident from retaliation. The Facility Warden explained that housing changes or transfers of inmates, disciplinary action against staff members – including possible dismissal – or other means of removal of those who retaliate against someone who reports an allegation.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency protects inmates or staff from retaliation for sexual abuse or sexual harassment allegations. The Agency Head explained that facilities deploy numerous measures including housing, program, and work assignments changes. If warranted, an inmate may be transferred to another Department facility in order to protect him/her from retaliation. All inmates who report sexual abuse are monitored for retaliation for at least 90 days. Staff members are required to monitor the inmate with periodic status checks every 30 days to ensure they are not experiencing any additional problems. Inmates are also provided information for the local rape crisis center for emotional support services.

The Agency Head also explained that staff members might be afforded the ability to change posts or facilities to protect them from retaliation. They are also monitored for retaliation for at least 90 days following a report of sexual abuse or sexual harassment.

The Auditor inquired to the Agency Head if an individual cooperates with an investigation expresses a fear of retaliation, what measures does the agency take to protect that individual against retaliation. The Agency Head explained the same process previously described is utilized. If the individual is an inmate, s/he may be afforded a housing change or transfer to another Department facility. That inmate will also be subject to the 90-day monitoring. If the individual is a staff member, they may be provided the opportunity to change posts or institutions and will be subject to the 90-day monitoring.

Upon review of the policy, investigative files, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Miscellaneous Log Report (2)
	Interviews conducted with: Facility Warden Staff who supervise inmates in Segregated Housing Inmates in Segregated Housing (for risk of SV/who allege to have suffered SA)
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmates perceived to be vulnerable will be housed and given work/program assignments consistent with custody level and medical status. Inmates at high risk of victimization or who have alleged sexual abuse, will not be segregated involuntarily unless an assessment of all other available alternatives has been made and it is determined that there are not available alternative means of separation from likely abusers.
	During the on-site phase of the audit, the Auditor conducted an interview with a Facility Staff Member who supervises inmates in segregated housing. The Auditor inquired to the Facility Staff Member if an inmate who is placed in segregated housing for protection from sexual abuse or after having alleged sexual abuse, what restrictions are placed on the inmate. The Facility Staff Member articulated that inmates placed in Protective Management (placed in segregated housing for protection) do not have restrictions and retain the same privileges as inmates in general population housing, to include participating in programs, education, and work opportunities. The Facility Staff Member explained if an inmate has restrictions placed on him it would be a result of their behavior or actions, and such action (being placed on restrictions) would require documentation explaining what has been restricted, duration of restriction, and reasons for initiating the restriction.
	During the 12 months prior to the audit, the facility reported two inmates, who reported sexual abuse, being assigned to involuntary segregating housing for longer than 30 days. The Auditor reviewed the <i>Miscellaneous Log Report</i> provided by the facility which provided detail that the inmates were in the process of being placed into Administrative Confinement pending a Disciplinary Report at the time each reported a PREA allegation. Additionally, the documentation reviewed by the Auditor contained multiple data entry reviews conducted by the PREA Compliance Manager documenting the basis for continuing such restrictions and the justifications for extending the assignment in segregated housing. At the time of the on-site audit, the Auditor was not able to interview either inmate; either they had completed their 105

sentence or had been transferred to another facility.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden regarding inmates who alleged sexual abuse. Inmates who have made an allegation of sexual abuse and have stated that they are in fear for their safety will be placed in segregated housing, either voluntarily or involuntarily, on a temporary basis until a review can be conducted to verify the extent of the danger. The incident is reviewed as soon as possible and the inmate will be released from segregation as soon as it can be determined that the inmate is no longer in imminent danger, or as soon as alternative means of separation from an alleged abuser can be arranged.

Upon review of the policy and documentation provided and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i>
	Interviews conducted with: Investigative Staff
	On-site Review Observations: Training files
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states any knowledge suspicion or information regarding sexual abuse or sexual harassment shall be reported immediately. All allegations of sexual abuse or sexual harassment will be investigated promptly, thoroughly, and objectively including third party and anonymous reports.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states Inspectors shall receive specialized training and shall include techniques for interviewing sexual abuse victims, appropriate application of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for prosecution referral.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> the department shall maintain documentation that Inspectors have completed the required specialized training in conducting sexual abuse investigations. Training documentation shall be maintained by the Bureau of Professional Development and Training.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.

Sexual Misconduct Investigations any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a parallel administrative investigation.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations* in all instances of investigating sexual battery, sexual misconduct, sexual abuse, or sexual harassment, the case Inspector shall not make a request of the victim to submit to a voice stress analysis or polygraph examination. Additionally, the creditability of an alleged victim, suspect, or witness shall be assessed on an individual basis and shall not be determined by the person's status as an inmate or staff member.

Florida Department of Corrections Procedure 108.015, *Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations* the agency shall retain all administrative and criminal investigative reports, pursuant to a sexual battery investigation, as long as the alleged suspect is incarcerated, supervised, or employed by the agency plus five years.

During the pre-on-site audit phase, the Auditor reviewed training documentation, which included the specialized training curriculum from the *National PREA Resource Center, Specialized Training: Investigating Sexual Abuse in Confinement Settings* and training certificates of completion verifying investigative staff that conduct sexual abuse investigations attended and completed the required specialized training.

During the on-site phase of the audit, the Auditor reviewed personnel files to verify training certificates were retained and on record. The Auditor also interviewed an Inspector assigned to the Office of the Attorney General's office who confirmed his attendance and successful completion of the required specialized training curriculum from the National PREA Resource Center developed by The Moss Group, Inc., *Specialized Training: Investigating Sexual Abuse in Correctional Settings*.

The Inspector clearly articulated the comprehensive training he had received which included investigating sexual harassment allegations, investigating sexual abuse allegations, understanding the impact of victim trauma, techniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of Miranda and Garrity and the importance of each, and criteria required for administrative action and prosecution referrals.

The Inspector also confirmed agency policy requiring all allegations of sexual abuse or sexual harassment must be referred to the Office of the Inspector General and Inspectors have the legal authority to conduct administrative and criminal investigations pursuant to FSS 944.31. The Inspector explained once the investigation process has concluded with a case finding, the case must be submitted to the Office of the Inspector General for review and a final

determination.

According to the information provided in the PAQ, during the past 12 months, Baker Correctional Institution reported nine allegations of sexual abuse and sexual harassment. After receiving additional information requested by the Auditor, the information in the PAQ is incorrect and the total of cases for the 12 months preceding the audit is actually seven. After discussion, it was determined the additional two cases were outside the parameters of the 12 months preceding the audit and were counted inadvertently; therefore, for the purpose of this report, the total number of allegations of sexual abuse and sexual harassment are seven; one allegation of sexual harassment and six allegations of sexual abuse.

The sexual harassment allegation was inmate-on-inmate was closed by the Office of the Inspector General as unsubstantiated. The six sexual abuse allegations, included five inmate-on-inmate, and one staff-on-inmate; one of the five inmate-on-inmate cases was closed by the Office of the Inspector General as unsubstantiated. At the time of the on-site phase of the audit, the remaining five sexual abuse investigations were pending a final disposition with the Office of the Inspector General.

The Auditor reviewed one administrative sexual harassment investigation and six criminal sexual abuse or sexual misconduct investigations. All of these cases were selected and reviewed based upon the outcome and the Auditor's requirement to review all of the required steps and processes to verify compliance with multiple PREA Standards. Upon completion of reviewing all case files, the Auditor determined that the facility (to include but not limited to Inspectors, Staff First Responders, Medical and Mental Health, PREA Compliance Manger, Supervisory Staff, etc.) followed the required steps and processes for all reported allegations. The Auditor reviewed the five sexual abuse investigations (pending) and found they also met the above criteria, with the only exception of a final disposition from the OIG.

Each administrative and criminal investigative case reviewed by the Auditor, contained all documented reports for that specific incident, an inmate body chart, inmate notifications, a description of the physical and testimonial evidence, the reasoning behind credibility assessments and the investigative facts and findings. Additionally, each completed report included an assessment as to whether staff actions or a failure to act on the part of staff contributed to the abuse. The Auditor reviewed each case thoroughly and systematically to ensure each case contained all of the correct procedures, completed documentation, and that all processes were completed as required, to include the report findings for the two closed cases.

Upon review of the policies, investigative case files, and documentation listed above, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 108.015, Sexual Battery, Sexual Harassment, Sexual Misconduct Investigations
	nterviews conducted with: nvestigative Staff
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, Sexual Misconduct Investigations</i> states during investigation into any PREA allegations, Inspectors shall include an effort to determine whether staff actions or failure to act contributed to the abuse and report any violations of rules or procedures.
3	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, Sexual Misconduct Investigations</i> any criminal investigation involving PREA allegations by a staff member that has policy, procedure, or rule violations that were not covered in the criminal case or where probable cause exists but no prosecution of the case, shall require a barallel administrative investigation.
a c r t c a r e	During the on-site phase of the audit, the Auditor conducted an interview an Inspector assigned to the Office of the Attorney General's office. The Inspector provided the Auditor wi a complete overview of the investigative process to include verifying specialized training credentials. The Inspector articulated the investigative process beginning with initial notification, investigation of the allegation, understanding the impact of victim trauma, rechniques for interviewing sexual abuse victims, preservation of crime scene and evidence collection, proper use of <i>Miranda</i> and Garrity, and criteria required for administrative action and prosecution referrals. The Auditor inquired to the Inspector what standard of evidence is required to substantiate allegations of sexual abuse or sexual harassment. The Inspector explained that the agency should impose no standard higher than a preponderance of the evidence.
C	Jpon review of the policy and upon completion of the interview with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of t PREA standard.

15.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections PREA Administrative and Criminal Investigate Case Final Notifications
	Interviews conducted with: Investigative Staff Facility Warden
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states at the conclusion of any sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism investigation, the Inspector shall make appropriate notifications and follow-up notifications.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the case Inspector shall notice any PREA victim inmate if an allegation against a staff member for sexual abuse, sexual battery, sexual misconduct, sexual harassment, or voyeurism (administrative or criminal) is exonerated, sustained, partially sustained, not sustained, unfounded, closed by arrest, exceptionally cleared or placed in open-active status.
	Florida Department of Corrections Procedure 108.015, <i>Sexual Battery, Sexual Harassment, & Sexual Misconduct Investigations</i> states the case Inspector or designee shall notice any victim inmate when the department learns the alleged abuser has been indicted on a charge related to sexual abuse or when the alleged abuser was convicted on a charge related to sexual abuse.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states unless the allegation is unfounded, following an inmate's allegation that a staff member has committed sexual abuse against him/her, the Warden or designee, shall inform the inmate whenever the staff member is no longer assigned to the facility or no longer employed with the Department.

According to the information provided in the PAQ (§115.73(a)-2), during the past 12 months, Baker Correctional Institution reported three criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. After receiving additional information requested by the Auditor, and after further discussion with the PREA Compliance Manager and the Staff Member tasked with entering the information into the PAQ, the reported number (3) is incorrect and the total cases that were completed during the audit period is two. The additional case was outside the parameters of the 12 months preceding the audit and was counted inadvertently.

During the on-site phase of the audit, the Auditor reviewed Administrative and Criminal Investigative Case files from the 12 months prior to the audit. The two investigative case files that were closed with a final disposition contained an inmate notification form documenting the outcome of the case (substantiated, unsubstantiated, or unfounded) with the signature of the inmate documented on the notification.

During the on-site phase of the audit, the Auditor conducted an interview with the Inspector and inquired about the agency's notification procedures, to an alleged victim of sexual abuse, when the case is closed and whether the allegation has a final determination of substantiated, unsubstantiated, or unfounded. The Investigator confirmed such notifications are completed by the case Inspector and is documented in the case file.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and inquired regarding how the facility notifies an inmate who makes an allegation of sexual abuse when the case is closed and a determination as to either substantiated, unsubstantiated, or unfounded. The Facility Warden confirmed that the Office of the Inspector General notifies the inmate of an outcome in all investigations completed by the OIG. For inmate-on-inmate sexual harassment, Security Staff completes the notifications and obtains a signed DC6-2080 form to document the notification.

Upon review of the policies, investigative case files, and upon completion of the interviews with staff, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

Disciplinary sanctions for staff
Auditor Overall Determination: Meets Standard
Auditor Discussion
Documents: Florida Administrative Code Rule 33-208.003, <i>Range of Disciplinary Actions</i> Florida Administrative Code Rule 60L-36.005, <i>Conduct of Employees- Disciplinary Standards</i> Florida Department of Corrections Procedure 208.039, <i>Employee Counseling & Discipline</i>
Interviews conducted with: Administrative (Human Resources) Staff
Florida Department of Corrections Procedure 208.039, <i>Employee Counseling & Discipline</i> states employees who fail to uphold the Department's policy on an anti-harassment work environment to include sexual harassment, whether the employee committed, failed to report, or to have falsely reported any form of harassment in the workplace is subject to termination.
Florida Administrative Code Rule 60L-36.005, <i>Conduct of Employees- Disciplinary Standards</i> states employees shall abide by the law and applicable rules and policies and procedures, including those of the employing agency and the rules of the State Personnel System. All employees are subject to Part III of Chapter 112, Florida Statutes, and governing standard of conduct, which agencies shall make available to employees. An agency may determine that an employee has violated the law even if the violation has not resulted in arrest or conviction. Employees shall abide by both the criminal law, for example drug laws, and the civil law, for example, laws prohibiting sexual harassment and employment discrimination.
Florida Department of Corrections notifies the Criminal Justice Services Training Center through the Florida Department of Law Enforcement when criminal violations of sexual abuse or sexual harassment are committed by staff. Policy requires notifications to be made within 45 days after the violation.
The facility reported there have been no staff violations or terminations of the agency's sexual assault, sexual abuse, sexual harassment or sexual misconduct polices during the 12 months prior to the audit.
During the on-site phase of the audit, the Auditor conducted an interview with Administrative / HR Staff Member who confirmed that Baker C. I. has not had any staff members violate or terminated for violating the agency's policy against sexual assault, sexual abuse, sexual harassment, or sexual misconduct during the past 12 months.

	Corrective action for contractors and volunteers
	Auditor Overall Determination: Meets Standard
1	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> Florida Department of Corrections Procedure 205.002, <i>Contract Management</i>
	nterviews conducted with: acility Warden
F C E	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, a</i> <i>Response</i> states the institution shall ensure that all contractors and volunteers who have contact with inmates are trained on their responsibilities as it related policies via the Staff Development and Training lesson plan <i>Prison Rape Elimination Act Training for Interns,</i> <i>Jolunteers, and Contractors</i> .
5	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states contractors or volunteers that engage in sexual abuse, sexual battery, or sexual harassment and found guilty will be disciplined up to and including termination of contract and/or prohibition from working or volunteering for the Department.
b a n F C F	Florida Department of Corrections Procedure 205.002, <i>Contract Management</i> states ackground check clearances for contract/subcontract staff prior to employment (FCIC/NCIC) and shall receive clearance prior to entering an institution or facility. Documentation may be maintained electronically or hard copy. All new and renewed contracts will be identified as PREA covered contracts when appropriate. These contracts will include language to ensure ompliance with 28 C.F.R. Part 115. Any contractor failing to comply with the Department's PREA policies and procedures and/or Federal Rule 28 C.F. R. Part 115 is termination for ause.
t	The facility reported there have been no contractor or volunteer violations or terminations of the agency's sexual assault, sexual abuse, sexual harassment or sexual misconduct polices during the 12 months prior to the audit.
V h tl	During the on-site phase of the audit, the Auditor conducted an interview with the Facility Varden regarding any violation of the facility's sexual assault, sexual abuse, sexual parassment, or sexual misconduct by a contractor or volunteer. The Facility Warden explaine that the incident would be reported to the Office of the Inspector General, which would conduct an investigation. If the investigation shows the activity was criminal, then the incident 116

will be reported to law enforcement. The Facility Warden also explained the incident would be reported to any relevant licensing entities and the contractor or volunteer would be prohibited from any further contact at Baker C.I. or any facility within our agency.

115.78	Disciplinary sanctions for inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Administrative Code Rule 33-601.301, <i>Inmate Discipline</i> Florida Administrative Code Rule 33-601.800, <i>Close Management</i> Florida Administrative Code Rule 33-601.314, <i>Rules of Prohibited Conduct</i>
	Interviews conducted with: Facility Warden Medical / Mental Health Staff
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate(s) who have been found guilty of sexual abuse, sexual battery, or sexual harassment, through the course of either internal or external hearings will be processed in accordance with <i>Disciplinary Confinement</i> , Rule 33-602.222, F.A.C., unless otherwise ordered through judicial or administrative process.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states all inmates who have been found guilty of sexual abuse, sexual battery, or sexual harassment will be referred for Close Management review and/or issued a Disciplinary Report. All Case Management and Disciplinary Report reviews will take into consideration whether the mental disabilities or mental illness contributed to the abuser or perpetrator's behavior.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states when it is determined that an inmate has filed a PREA report in bad faith, knowingly filed a false report, that inmate shall be subject to discipline.
	Florida Department of Corrections Inmate Handbook states there is no such thing as legal consensual sex in prison. Department of Corrections policy and law prohibit sexual behavior between inmates. Those who commit sexual assault/battery or sexual harassment face legal action. If necessary, the Department will seek outside criminal charges.
	During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the facility's policy on disciplinary sanctions for an inmate after an

administrative or criminal finding that the inmate engaged in inmate-on-inmate sexual abuse.

disciplinary sanctions, which would be conducted in accordance to the formal disciplinary process.

During the on-site phase of the audit, the Auditor conducted an interview with Medical and Mental Health Staff and discussed the victim advocate services available to inmates and counseling services available for abusers. The Medical and Mental Health Staff explained the services provided at the facility and through the local county crisis center and include one-onone counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

Upon review of the policy, Florida Department of Corrections Inmate Handbook, and upon completion of staff interviews, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements of the PREA standard.

115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Procedure 601.209, <i>Reception Process – Initial Classification</i> Florida Department of Corrections IBAS IRMS Assessments
	Interviews conducted with: Inmates who disclose Sexual Victimization at Risk Screening Staff responsible for Risk Screening
	On-site Review Observations: Demonstration of Inmate Behavior Assessment Scale / Inmate Risk Management System Inmate records of initial assessment & reassessment
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states if results of the screening process indicate that an inmate has experienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the inmate will be offered a follow-up meeting with a mental health practitioner within 14 days of the screening.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states any information relating to sexual victimization or abuse that occurred in an institutional setting shall be strictly limited to medical and mental health practitioners, and other staff as necessary, to inform treatment plans and security and management decisions. This also includes housing, bed, work, education, and program assignments, or as otherwise required by Federal, state, or local law.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape: Prevention, Detection, & Response</i> states the facility shall implement appropriate controls on the dissemination within the facility of responses to the questions asked pursuant to risk screenings to ensure privacy of sensitive information that may be used for exploitation by staff or other inmates.
	In accordance with Florida Department of Corrections Procedure 601.209, <i>Reception Process</i> – <i>Initial Classification</i> the inmate classification system is comprised of two primary operational

Initial Classification the inmate classification system is comprised of two primary operational components, the State Classification Office and the Institutional Classification Team. The State Classification Office refers to the office or office staff at the central office level that is

responsible for the review of inmate classification decisions. The Institutional Classification Team (ICT) refers to the team consisting of the Warden, Assistant Warden, Classification Supervisor, Chief of Security, and other members as necessary or when appointed. The ICT is responsible for making work, program, housing, and inmate status decisions at a facility and for making other classification recommendations to the State Classification Office.

During the on-site phase of the audit, the Auditor conducted an interview with a Classification Officer regarding her responsibility to conduct screenings for risk of victimization and abusiveness. The Classification Officer provided the Auditor with a complete overview of the inmate classification process and the inmate risk screening process to include how all inmates are screened within 72 hours (or less) of their arrival to the facility.

The Classification Supervisor also demonstrated the interview process (inmate volunteer), by utilizing the *Inmate Risk Management System (IRMS)* and *Inmate Behavior Assessment Scale (IBAS)* to determine the inmate's risk screening, and needs assessment. The *Offender Based Information System* auto populates each inmate's personal demographics (age, weight, height, etc.) and any assessments previously made by a medical or mental health staff member (mental, physical, or developmental disabilities) into the *Inmate Risk Management System*. The *Inmate Behavior Assessment Scale* is a series of questions, which include

- Sexual orientation and/or gender identity;
- Whether the inmate experienced prior sexual abuse while incarcerated or at any time during his life;
- Whether the inmate committed sexual abuse against another person while incarcerated or at any time during his life;
- If the inmate is familiar with the prison environment;
- Whether the inmate has been approached or pressured by other inmates for sexual favors;
- Inmate's own perception of vulnerability.

The assessment also requires that the Classification Officer must confirm if the inmate has any prior incarcerations and criminal history to include prior convictions for sex offenses. At the conclusion of the interview process, a *Sexual Risk Indicator score (SRI)* is generated from the responses entered into the system. The SRI score assists Classification staff with determining housing assignments, additional risk, or assessment needs for the inmate, and dependent upon the answer provided by the inmate, the program will automatically generate an immediate referral to Medical and Mental Health Staff, specifically when an inmate discloses prior sexual victimization or has perpetrated sexual abuse. In addition automatic notifications to Medical and Mental Health Staff, the program will automatically generate the next appointment (within 30 days) for each inmate.

The Classification Officer confirmed that inmates are not disciplined for refusing to cooperate or answer the questions in the risk screening process. The Auditor inquired to the

Classification Officer how Baker C. I. protects such sensitive information. The Classification Officer stated the access to such information is strictly limited to Classification Staff, and Medical and Mental Health.

The Classification Officer confirmed all interviews are conducted privately and the interviews include the classification and risk assessment process, program opportunities, qualifications for job assignments, and educational opportunities. Inmates are also assigned to a Classification Team (assignment is on a rotation basis) upon arrival to the facility. Inmates meet regularly with a team representative to review custody classification status, programs assignments / requirements, job assignments, and to discuss any concerns or issues.

During the on-site phase of the audit, the Auditor reviewed twenty-eight inmate records. These records were selected based upon the inmate sexual abuse investigations, length at facility, and inmates that disclosed sexual orientation as bisexual or transgender. Each file contained the initial risk screening form as well as the 30-day reassessment form; all were filled out completely and in accordance to the facility's policy.

In the 12 months prior to the audit, the facility reported there were no inmates who disclosed prior sexual victimization during the risk screening process; the Auditor confirmed this during the interview with the Classification Officer.

115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i>
	Interviews conducted with: Medical / Mental Health Staff Inmates who reported a Sexual Abuse Security Staff / Non-Security Staff First Responders
	On-site Review Observations: Secondary Medical Records
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states treatment services shall be provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigations arising out of the incident.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states medical and mental health evaluation and treatment shall be offered to all inmates who have been sexually victimized in any Department or contracted facility and will be consistent with the community level of care. The evaluation and treatment of such victims shall include as appropriate, follow-up services, and when necessary, referrals for continued care following a transfer to, or placement in, another facility, or a release from custody.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states inmate victims of sexual abuse, sexual battery, or staff sexual misconduct while incarcerated will be offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis in accordance with professionally accepted standards of care, where medically appropriate.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states a mental health evaluation will be offered to any identified inmate-on-inmate abusers within 60 days of learning of such abuse history and, as appropriate, the abuser will be offered treatment.

During the on-site phase of the audit, the Auditor reviewed secondary medical records of

inmates who reported an allegation of sexual abuse. These records include Office of Health Services Alleged Sexual Battery Protocol (multiple pages with body chart) and Mental Health Screening Evaluation. The forms have specific requirements to complete and/or make notations as to why the question or process was not completed. All protocols are completed by LPNs and must be reviewed and cosigned by an RN or Clinician.

During the on-site phase of the audit, the Auditor conducted an interview with the Medical and Mental Health Staff at the facility. Medical Staff confirmed that inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. The Medical and Mental Health Staff explained the services provided at the facility and through the local county crisis center and include one-on-one counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the twelve months prior to the audit, Baker Correctional Institute reported six allegations of sexual abuse or sexual misconduct. During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse or sexual misconduct allegations, however, the Auditor was provided with facility documentation showing the inmates either completed their sentence and released from custody or were transferred to another facility. Therefore, the Auditor was unable to interview inmates who reported allegations of sexual abuse.

Auditor Discussion Documents: Florida Department of Corrections Procedure 602.053, Prison Rape – Prevention, Detection, of Response Florida Department of Corrections Health Services Bulletin 15.03.36, Post Sexual Battery Medical Action
Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Gesponse</i> Florida Department of Corrections Health Services Bulletin 15.03.36, <i>Post Sexual Battery</i> <i>Medical Action</i> Interviews conducted with: Medical / Mental Health Staff
Iedical / Mental Health Staff
Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states if an SRI assessment or medical assessment indicate that an inmate has xperienced prior sexual victimization, or has previously perpetrated sexual abuse, whether it ccurred in an institutional setting or in the community, the inmate shall be offered a follow-up neeting with a mental health practitioner within 14 days of the screening.
Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states treatment services shall be provided to the victim without financial cost and egardless of whether the victim names the abuser or cooperates with any investigations rising out of the incident.
Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states medical and mental health evaluation and treatment shall be offered to all mmates who have been sexually victimized in any Department or contracted facility and will be onsistent with the community level of care. The evaluation and treatment of such victims shanclude as appropriate, follow-up services, and when necessary, referrals for continued care belowing a transfer to, or placement in, another facility, or a release from custody.
florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, Response</i> states a mental health evaluation will be offered to any identified inmate-on-inmate busers within 60 days of learning of such abuse history and, as appropriate, the abuser will e offered treatment.

During the on-site phase of the audit, the Auditor conducted an interview with the Medical and Mental Health Staff at the facility. Medical Staff confirmed that inmate victims are provided immediate access to medical treatment as well as crisis intervention, therapy, and counseling services. The Medical and Mental Health Staff explained the services provided at the facility and through the local county crisis center and include one-on-one counseling and support groups. These services are offered for victims of sexual abuse or sexual harassment as well as offenders of sexual abuse.

During the on-site phase of the audit, the Auditor requested interviews with the inmates who reported sexual abuse or sexual misconduct allegations, however, the Auditor was provided with facility documentation showing the inmates either completed their sentence and released from custody or were transferred to another facility. Therefore, the Auditor was unable to interview inmates who reported allegations of sexual abuse.

115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Sexual Abuse Incident Review Report
	Interviews conducted with: Facility Warden Incident Review Team
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the institution shall conduct a sexual abuse incident review within 30 days of the conclusion of the investigation by completing the Sexual Abuse Incident Review/Facility Investigation Summary DC6-2076. This review team shall consist of the Assistant Warden, Chief of Security, and Classification Supervisor.
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the review team will also obtain input via reports from line supervisors, investigators, and medical or mental health practitioners. The Sexual Abuse Incident Review Committee shall meet to assess the adequacy of staffing levels in the area where the incident happened, consider whether the incident/allegation was motivated by race, ethnicity, LGBTI identification, gang affiliation, or other group dynamics at the institution.
	The committee shall also examine the area the incident allegedly occurred to assess whether physical barriers or obstructions in the area may have enabled abuse, assess whether monitoring technology should be deployed or augmented to supplement supervision by staff and on a monthly basis, prepare a report with recommendations for improvements and submit to the PREA Coordinator.
	During the pre-on-site phase of the audit, the Auditor reviewed Sexual Abuse Incident Review/Facility Investigation Summary provided by the facility. The reports contained the required elements of the PREA standard to include:
	 Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; Consider whether the incident or allegation was motivated by race, ethnicity, gender identity; LGBTI identification, status, or perceived status or gang affiliation; or was motivated as etherwise, equand by other group dynamics.

motivated or otherwise caused by other group dynamics;

- Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse;
- Assess the adequacy of the staffing levels in that area during different shifts;
- Assess whether monitoring technology would be deployed or augmented to supplement supervision by staff; and
- Prepare a report of its finding including, but not necessarily limited to, determinations made pursuant to the above considerations and any recommendations for improvement.

The reviews were completed in its entirety, within the required time limits, and signed by the Chief of Security, Facility Warden, and the PREA Compliance Manager (Assistant Warden of Programs).

According to the information provided in the PAQ (§115.86(a)-2), during the past 12 months, Baker Correctional Institution reported three criminal and/or administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months. After receiving additional information requested by the Auditor, and after further discussion with the PREA Compliance Manager and the Staff Member tasked with entering the information into the PAQ, the reported number (3) is incorrect and the total cases that were completed during the audit period is two. The additional case was outside the parameters of the 12 months preceding the audit and was counted inadvertently.

During the on-site phase of the audit, the Auditor conducted an interview with an Incident Review Team member and inquired if the Sexual Abuse Incident Review (SAIR) Team considers whether an incident or allegation was motivated by race, ethnicity, or gender identity and if the SAIR Team examines the area in the facility were the incident allegedly occurred. The Incident Review Team member confirmed the SAIR Team does consider whether the incident was motivated by race, ethnicity, or gender identity, and gang affiliation. The SAIR Team also tours the area where the alleged incident occurred as well as consider if additional monitoring technology should be deployed or augmented to supplement supervision by staff. The Incident Review Team member explained how touring the area in conjunction with reviewing monitoring technology provides the team with the best possible representation of an incident and assists the SAIR Team in determining if changes or additions to monitoring technology is warranted.

During the on-site phase of the audit, the Auditor conducted an interview with the Facility Warden and discussed the Sexual Abuse Incident Review (SAIR) process. The Facility Warden explained the SAIR Team includes the PREA Compliance Manager (Assistant Warden of Programs), Chief of Security, at least one Classification Supervisor, and the Facility Warden. The SAIR Team always seeks input from Inspectors, Line Staff, and Medical and Mental Health personnel. The Facility Warden articulated the process of the incident review, including listing the elements required per the PREA standard. The Facility Warden explained how the SAIR Team uses the information obtain from the review to determine if changes need to be made to the physical plant, surveillance systems, policy and procedure or any other change that would improve the safety of the inmate population and prevent sexual abuse.

115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Survey of Sexual Victimization Summary Reports to DOJ
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training.
	During the pre-on-site phase of the audit, the Auditor reviewed seven years of Survey of Sexual Violence Reports, five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html
	Upon review of the policy, Annual Reports, and SSV Reports, Baker C. I. demonstrated facility- wide practices that are consistent with policy and the requirements of the PREA standard.

115.88	Data review for corrective action
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> Florida Department of Corrections Baker C.I. 2018 PREA Facility Corrective Action Plan
	Interviews conducted with: PREA Compliance Manager PREA Coordinator Agency Head
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states the PREA Coordinator will be responsible for the compilation and reporting of data related to PREA incidents, including the data necessary to complete the PREA survey administered by the Federal Bureau of Justice Statistics. The data will also be utilized to improve the effectiveness of the Department's efforts toward sexual abuse prevention, detection, and response policies, practices, and training.
	During the pre-on-site phase of the audit, the Auditor reviewed five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html
	During the on-site phase of the audit, the Auditor conducted an interview with the PREA Compliance Manager and inquired if the agency reviews data collected and aggregated pursuant to §115.87. The PREA Compliance Manager explained how the agency collects data in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies. The PREA Compliance Manager confirmed he is responsible for compiling institution specific PREA data and preparing the Annual Corrective Action Plan for Baker C. I.
	During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action.

The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

During the on-site phase of the audit, the Auditor conducted an interview with the Agency Head and inquired how the agency uses incident-based sexual abuse data to assess and improve sexual abuse prevention, detection, and response polices, practices, and training. The Agency Head explained that sexual abuse data is collected annually and utilized to complete the Survey of Sexual Victimization. The data is collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The Auditor inquired as to who is responsible for approving annual reports written pursuant to §115.88. The Agency Head confirmed, as the Secretary of the Department of Corrections, he is responsible for reviewing and approving the annual PREA report.

Upon review of the policy, Annual Reports, and upon completion of staff interviews, Baker C. I. demonstrated facility-wide practices that are consistent with policy and the requirements that complies with and exceeds the PREA standard.

115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Documents: Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i>
	Interviews conducted with: PREA Coordinator
	Florida Department of Corrections Procedure 602.053, <i>Prison Rape – Prevention, Detection, & Response</i> states no employee, volunteer, or contractor may knowingly disclose any information pursuant a sexual abuse, sexual battery, staff sexual misconduct, or sexual harassment to any person other except as permitted by law. The release of any information identifying any PREA or other sexual battery or sexual abuse victims in the custody of the Department shall not be printed, published, or broadcasted unless a court determines that such information is no longer confidential.

Florida Department of Corrections Procedure 602.053, *Prison Rape – Prevention, Detection, & Response* states case or investigation records including any criminal or administrative investigation, medical evaluations and treatments, recommendations of post-release treatment, and counseling associated with allegations of sexual abuse or sexual battery shall be retained by the agency for ten years.

During the pre-on-site phase of the audit, the Auditor reviewed seven years of Survey of Sexual Violence Reports, five years of Annual Reports, which contained sexual abuse data collected with a standardized instrument. The standardized instrument used contained a set of definitions and data collected from incident reports, investigative files, and sexual abuse incident reviews. The Florida Department of Corrections publishes the reports on the agency website http://www.dc.state.fl.us/PREA/index.html

During the on-site phase of the audit, the Auditor conducted an interview with the PREA Coordinator regarding how data is collected pursuant to PREA Standard §115.87. The PREA Coordinator acknowledged that the data collected is securely retained at the state level and the agency takes corrective action on an ongoing basis based on the collected data. The PREA Coordinator confirmed the preparation of an Annual Report, which contains data collected from all facilities that house Department inmates; it is then reviewed by the PREA Coordinator who then completes a report of the findings and any potential corrective action. The PREA Coordinator confirmed the agency redacts sensitive information and all public data information.

115.401	Frequency and scope of audits
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Florida Department of Corrections, Baker Correctional Institution had its first PREA Audit conducted on April 25 – 27, 2017; the first year of the second three-year auditing cycle. This audit was the facility's second audit and was conducted on March 3 - 6, 2020; the first year of the third three-year auditing cycle.
	The Auditor was provided access to and observed all areas of the facility and outside compound. The Auditor was permitted to request and receive copies of any relevant documents.
	The Auditor was permitted to conduct private interviews with inmates and staff. The Auditor verified the posting of the audit notifications including posting of the audit in all housing dormitory's and common areas accessible and visible for inmates and staff. The Auditor verified through inmate and staff interviews that inmates and staff were permitted to send confidential correspondence to the Auditor in the same manner as if they were communicating with legal counsel.

115.403	Audit contents and findings
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Florida Department of Corrections publishes all facilities within the Departments PREA Audit Reports on the agency website. The reports are grouped according to the audit cycle year. Baker Correctional Institution has published the prior year PREA Audit Reports on the agency website. The Auditor reviewed the prior PREA Audit Report (April 2017) for Baker Correctional Institution.

115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes

115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes

115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes

115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	yes

115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for	yes

video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards?	
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes

115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes

115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes

115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na

115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes

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

115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross- gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	na

115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes

115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes

115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross- gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

115.16 (a)	Inmates with disabilities and inmates who are limited English proficient		
	Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all	yes	

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

115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes

115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes

115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes

115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes

115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes

115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes

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

115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes

115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes

115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.18 (b)	Upgrades to facilities and technologies	
	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	na

115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes

115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes
	Has the agency documented its efforts to provide SAFEs or SANEs?	yes

115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	yes
	Has the agency documented its efforts to secure services from rape crisis centers?	yes

115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes

115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	na

115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	na

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

115.22 (b)	Policies to ensure referrals of allegations for investigations	
	Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior?	yes
	Has the agency published such policy on its website or, if it does not have one, made the policy available through other means?	yes
	Does the agency document all such referrals?	yes

115.22 (c)	Policies to ensure referrals of allegations for investigations	
	If a separate entity is responsible for conducting criminal investigations, does the policy describe the responsibilities of both the agency and the investigating entity? (N/A if the agency/facility is responsible for criminal investigations. See 115.21(a).)	na

115.31 (a)	Employee training	
	Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures?	yes
	Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment	yes
	Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment?	yes
	Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement?	yes
	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes

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

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

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

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

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

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

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

115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes

115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes
	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes

115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes

115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes

115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes

115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes

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

115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	na

115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes

115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes

115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes

115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes

115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective screening instrument?	yes

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

115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes

115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes

115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes

115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs $(d)(1)$, $(d)(7)$, $(d)(8)$, or $(d)(9)$ of this section?	yes

115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?	yes

115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes

115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes

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

115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes

115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes

115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes

115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent degree, legal settlement, or legal judgement.)	yes

115.43 (a)	Protective Custody	
	Does the facility always refrain from placing inmates at high risk for sexual victimization in involuntary segregated housing unless an assessment of all available alternatives has been made, and a determination has been made that there is no available alternative means of separation from likely abusers?	yes
	If a facility cannot conduct such an assessment immediately, does the facility hold the inmate in involuntary segregated housing for less than 24 hours while completing the assessment?	yes

115.43 (b)	Protective Custody	
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible?	yes
	Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible?	yes
	If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na
	If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility never restricts access to programs, privileges, education, or work opportunities.)	na

115.43 (c)	Protective Custody	
	Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged?	yes
	Does such an assignment not ordinarily exceed a period of 30 days?	yes

115.43 (d)	Protective Custody	
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility's concern for the inmate's safety?	yes
	If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged?	yes

115.43 (e)	Protective Custody	
	In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS?	yes

115.51 (a)	Inmate reporting	
	Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment?	yes
	Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents?	yes

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

115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes

115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes

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

115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes

115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes

115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes

115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes

115.52 (f)	Exhaustion of administrative remedies	
	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.).	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes

115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes

115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility never has persons detained solely for civil immigration purposes.)	yes
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes

115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes

115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes

115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes

115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation?	yes

115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes

115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes

115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes

115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes

115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes

115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes

115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes

115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes

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

115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes

115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse?	yes

115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes

115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes

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

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

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

115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes

115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes

115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes

115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes

115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes

115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes

115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes

115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes
	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes

115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes

115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes

115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes

115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes

115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	na

115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes

115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	na

115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility?	yes

115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes

115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes

115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes

115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes

115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies(unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes

115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes

115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes

115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on- inmate sexual abuse, or following a criminal finding of guilt for inmate- on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes

115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes

115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes

115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes

115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes

115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation?	yes

115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes

115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes

115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes

115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes

115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes

115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	yes

115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes

115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes

115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes

115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes

115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes

115.83 (c)	5.83 (c) Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes

115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	na

115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes

115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes

115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	yes

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes

115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes

115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes

115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes

115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

115.87 (a)	Data collection	
	Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions?	yes

115.87 (b)	Data collection	
	Does the agency aggregate the incident-based sexual abuse data at least annually?	yes

115.87 (c)	Data collection	
	Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice?	yes

115.87 (d)	Data collection	
	Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews?	yes

115.87 (e)	Data collection	
	Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.)	yes

115.87 (f)	Data collection	
	Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.)	yes

115.88 (a)	115.88 (a) Data review for corrective action	
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis?	yes
	Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole?	yes

115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes

115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes

115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes

115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes

115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes

115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes

115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes

115.401 (a)	Frequency and scope of audits	
	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes

115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	yes
	If this is the second year of the current audit cycle, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited during the first year of the current audit cycle? (N/A if this is not the second year of the current audit cycle.)	no
	If this is the third year of the current audit cycle, did the agency ensure that at least two-thirds of each facility type operated by the agency, or by a private organization on behalf of the agency, were audited during the first two years of the current audit cycle? (N/A if this is not the third year of the current audit cycle.)	no

115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes

115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes

115.401 (m)	Frequency and scope of audits		
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes	

115.401 (n)	Frequency and scope of audits		
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes	

115.403 (f)	Audit contents and findings	
	The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. The review period is for prior audits completed during the past three years PRECEDING THIS AUDIT. The pendency of any agency appeal pursuant to 28 C.F.R. § 115.405 does not excuse noncompliance with this provision. (N/A if there have been no Final Audit Reports issued in the past three years, or, in the case of single facility agencies, there has never been a Final Audit Report issued.)	yes