

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS

NATIONAL
PREA
RESOURCE
CENTER



BJA
Bureau of Justice Assistance
U.S. Department of Justice

[Following information to be populated automatically from pre-audit questionnaire]

Name of facility:

Bexar County Adult
Detention Center

Physical address:

200 N. Comal

San Antonio, Texas 78207

Date report submitted:

December 18, 2014

Auditor Information

Address:

864 Great Egret Circle SW

Unit 2B

Sunset Beach, N.C. 28468

Email:

stephen.huffman@aol.com

Telephone number:

614-940-4696

Date of facility visit:

December 5-7, 2014

Facility Information

Facility mailing address:

(if different from above)

Telephone number:

210-335-6219

The facility is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> County	Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input checked="" type="checkbox"/> Jail	Prison	
Name of PREA Compliance Manager: Henry Reyes, Deputy Chief			Title:
Email address: henry.reyes@bexar.org			Telephone number: 210-335-5263
Agency Information			
Name of agency: Bexar County Sheriff's Office			
Governing authority or parent agency: (if applicable) Bexar County Commissioners			
Physical address: 200 N. Comal San Antonio, Texas 78207			
Mailing address: (if different from above)			
Telephone number: 210-335-6219			
Agency Chief Executive Officer			
Name: Susan Pamerleau		Title:	Sheriff
Email address: sheriffpamerleau@bexar.org		Telephone number:	210-335-6027
Agency-Wide PREA Coordinator			
Name: Monica Lugo		Title:	PREA Coordinator
Email address: mlugo@bexar.org		Telephone number:	210-335-5208

AUDIT FINDINGS

NARRATIVE:

The site visit for PREA audit of the Bexar County Adult Detention Center, San Antonio, Texas was conducted on December 5-7, 2014. During the three days the auditor toured the facility and conducted formal interviews. Sixty-nine random male and female inmates from all the housing units, including one transgender, one limited English speaking inmate, one deaf inmate, and one inmate intellectually limited, one female inmate who disclosed sexual victimization during intake, and four youthful inmates were interviewed. Fourteen specialized staff and thirty random staff including, Detention Officers from all shifts were questioned about PREA training, how to report, to whom to report, filing reports, available interventions, conducting interviews, evidence collection, follow up and monitoring retaliation.

An entrance meeting was held December 5, 2014 with the following personnel: Sheriff Susan Pamerleau; Manuel Longoria, Chief Deputy; Raul Banasco, Jail Administrator; Henry Reyes, Deputy Chief / Assistant Jail Administrator; Louis Quinones, Assistant Jail Administrator; Debra Nicholas, Chief Administrative Officer; Monica Lugo, PREA Coordinator; Ottis Hutchinson, Chief Financial Officer; James Keith, Chief Communications Officer; Joe Hamilton, Deputy Chief, Patrol Division; Michael Dickey, Deputy Chief, Training; Tammy Burr, Deputy Chief, Judicial Services and George Saidler; Deputy Chief, Criminal Investigation Division. Following the entrance meeting interviews were conducted with specialized staff and I toured the facility. There are currently 4151 inmates assigned to the main detention facility and annex. The facility houses both male and female including under the age of 18 youth inmates. In the past twelve months, there were 29 sexual assault / harassment allegation cases reported. Four of the allegations are still under investigation. Three cases were determined to be substantiated and three staff was disciplined. One staff person resigned after engaging in sex with an inmate. The staff person was not prosecuted due to lack of evidence. One staff person was disciplined for kissing an inmate and giving the inmate his telephone number. The third staff person was disciplined for inappropriate language during a shakedown process. The remaining allegations were determined to be unfounded or unsubstantiated. Eleven of the reporting inmates were still housed at the jail and I tried to interview the inmates. Three inmates refused and the other eight were interviewed. Interviewed inmates believed the staff responded timely and separated the inmates before investigating the incident. Four of the cases were still under investigation and the inmates do not know the outcome of the investigation at the time of the audit. I received a letter

from one of the inmates who had reported an allegation and interviewed the inmate. The investigation of the allegation was not complete at the time of the audit. The inmate was satisfied with the response of the staff and is awaiting the outcome of the investigation.

The jail has a contract with the Aramark Corporation for food service and commissary services and staff has received PREA training. Aramark personnel were interviewed and they were knowledgeable of PREA first responder standard. The jail also has a contract with the GEO Group Corporation, dated July 2, 2013 for additional housing of inmates when needed. Training records indicated GEO staff had received PREA training and the contracted company is periodically monitored for PREA compliance. Monitor reports were reviewed by the auditor.

Ms. Deana Buriel of the San Antonio Rape Crisis Center was contacted prior to the audit. Ms. Buriel stated the crisis center had an excellent relationship with the jail. She also stated the jail has a good PREA culture and responds appropriately when sexual abuse / harassment incidents occur. The crisis center has received telephone calls from inmates at the jail indicating they are aware of how to contact the crisis center. Ms. Buriel was aware of the PREA posters and the crisis center telephone number and address that are made available to the inmates.

DESCRIPTION OF FACILITY CHARACTERISTICS:

The Bexar County Adult Detention Center is the 16th largest jail in the nation, with a capacity of 4563 inmates. The jurisdiction area is 1257 square miles. There were 61,142 inmates admitted to the jail the past 12 months with an average length of stay of 42 days. The main detention facility capacity is 2830 and the annex houses 1733 inmates. The main detention center facility is a multi-floor facility built of brick and mortar housing low to high risk male inmates. The main detention center consists of 2,448 single / double cells, 192 multiple occupancy cells, 20 segregated cells, 140 work release dormitory beds and 30 infirmary cells. The annex is a single story facility also built of brick and mortar housing low-medium risk male and female inmates. The annex consists of 1656 dormitory beds, 51 single cell beds, and 26 infirmary beds. The recreation areas are attached to the units located on each floor. There is 24 hour medical care provided by the facility. The facility also has a (MOU) memorandum of understanding with the local University Health System / Methodist Specialty and Transplant Hospital. The jail has a total of 673 cameras with a retention time of 30-45 days. The camera monitors are monitored by the main control center officers on all three shifts.

While the inmates are housed in the jail, they may take advantage of numerous educational programs, including parenting, money management and drug and alcohol

addiction among others. For those who have demonstrated responsibility and not have committed violent crimes, the jail also operates a work release program that allows inmates to be released during the day to work jobs in the community, serve their sentences from their homes by wearing a GPS tracking device on their ankles or serve their sentences on the weekends. The jail has passed the Texas Commission on Jail Standards the past three years and in 2013 passed without any discrepancies.

The Vision Statement of the Bexar Adult Detention Center states it envisions a fully staffed modern system consisting of a multi-complex 4563 bed facility compliant with Federal and State mandates; provides innovative programs to incarcerated men and women, a safe and secure environment for staff, the incarcerated, volunteers and continuous assessment of the operational process to maintain effectiveness and fiscal responsibility and accountability.

The Mission Statement of the Bexar Adult Detention Center states to deliver detention services and conduct operations to maintain the proper well-being of incarcerated men and women, provide safe environment to the staff, inmates and public within the facility, and remain fiscally responsible and accountable to the citizens of Bexar County.

The jail's core values consist of Integrity, Service, Excellence, Courage and Commitment.

The auditor found the staff and inmates to be very aware of PREA. The staff was very knowledgeable about their responsibilities to ensure a safe facility. They were aware of reporting responsibilities, preservation of evidence, as well as dealing with victims of sexual assault and/or harassment. All the staff has had extensive training on how to identify signs of sexual assault and or harassment.

SUMMARY OF AUDIT FINDINGS:

An exit meeting was held December 7, 2014 with the following personnel: Sheriff Susan Pamerleau; Manuel Longoria, Chief Deputy; Raul Banasco, Jail Administrator; Henry Reyes, Deputy Chief / Assistant Jail Administrator; Debra Nicholas, Chief Administrative Officer and Monica Lugo, PREA Coordinator.

Number of standards exceeded: 0

Number of standards met: 39

Number of standards not met: 0

§115.11 - Zero tolerance of sexual abuse and sexual harassment; PREA

coordinator

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

The Bexar County Adult Detention Center has written policy 1400.03-I thru IV- pages 1-10 mandating a zero tolerance toward all forms of sexual abuse and harassment. The policy outlines the agency's approach to preventing, detecting and responding to such conduct. The agency employs an upper level staff person as the PREA Coordinator who reports directly to the Jail Administrator and a PREA Compliance Manager who is a Chief Deputy who reports to the Deputy Chief of Custody Detention Services.

§115.12 - Contracting with other entities for the confinement of inmates

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

The agency has a contract with GEO Group Corporation dated July 2, 2013 for additional inmate housing when needed. The contract requires the Geo Group to be in full compliance of PREA standards. Training records indicated Geo staff has received PREA training. The agency does periodic monitoring inspections ensuring PREA standard compliance. At the time of the audit there were no inmates being housed by the GEO Group.

§115.13 – Supervision and Monitoring

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

Sheriff Pamerleau's review of the agency staffing plan indicates the agency has adequate resources to meet the needs of the jail. The PREA Coordinator reviewed and approved the staffing plan on May 16, 2014. The review included facility physical layout, an assessment of the video monitoring system, telephone access, radio access, composition of the inmate population, and staffing levels. The facility never operates below the mandatory staffing level. Policy 900.07-F1-page 1 and 1400.03-E1-page 6 support this standard. Documentation of unannounced rounds that cover all shifts was reviewed.

§115.14 – Youthful Inmates

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

There were inmates under the age of 18 years of age housed during the audit. The male and female inmates were interviewed and the inmates verified they never have physical contact with adult inmates. Inspection of the housing unit verified the youthful inmates did not have sight and sound of adult inmates. There is direct supervision at all times with the youthful inmates. Policy 1800.01-I3-page 3-5 supports this standard.

Not Applicable- No one under 18 years of age at this facility

§115.15 – Limits to Cross-Gender Viewing and Searches

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

The facility requires all staff of the opposite gender to announce their presence when entering the inmate housing unit. This was documented during interviews with staff and inmates and during the inspection of the housing units. Policy 900.08-02-I-page 1, 900.08-03-G-page 2 and 900.08-01-E2-page 2 cover all elements for this standard. Staff interviews and training records indicated staff has been trained on procedures on how to conduct cross-gender searches and pat-down searches only in exigent circumstances. All searches are required to be documented.

§115.16 – Inmates with Disabilities and Inmates who are Limited English Proficient

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

The agency policy 1300.07-I-page 1 and 1400.03-IV-B3-page 3 covers all elements of this standard ensuring inmates with disabilities; including those who are deaf, hard of hearing, blind, intellectual difficulties, have equal opportunities to participate in or benefit from all aspects of the agency's efforts to prevent, detect and respond to sexual abuse / harassment. Interviews with inmates who were deaf, intellectually limited, non-English speaking and physically handicapped were interviewed and all stated they had no issues that may compromise their safety. The agency has interpreters on contract when services are needed.

§115.17 – Hiring and Promotion Decisions

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

Based on interviews with human resource staff and Sheriff Pamerleau all components of this standard are being met. New employees, contractors and volunteer's background checks are completed before being approved for performing duties in the facility. The agency is in the process of completing background checks for all employees and will be completed in the next two years. Policy 100.03-H-page 2 meets all the requirements of this standard. The Sheriff's Civil Service Rules allows for staff discipline if found guilty of any involvement in a sexual abuse / harassment incident. Policy 1400.03-O5-page 10 covers requirement of the agency providing employee information to a requesting agency on an employee's involvement in a sexual abuse / harassment incident who is seeking employment at the requesting agency.

§115.18 – Upgrades to Facilities and Technology

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

The agency continues to improve the safe and secure conditions of the jail. There have been additional cameras and mirrors installed the past 12 months. The annual evaluation was completed on February 10, 2014. There have been no major renovations completed at the jail the past 12 months.

§115.21 – Evidence Protocol and Forensic Medical Examinations

- Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 1400.03-G1-4-page 7 and agency PREA Plan covers all elements of this standard that includes protocol for investigating and gathering evidence for sexual abuse / harassment incidents. Protocol for handling youthful inmates is also covered. The agency has an MOU with the San Antonio Rape Crisis Center and the University Health System / Methodist Specialty and Transplant Hospital. This auditor spoke with Ms. Deana Buriel of the Rape Crisis Center in advance of the audit. She indicated the jail provides emergency services and support through the free telephone call services that the inmates are allowed to make. The telephone number is posted in all inmate housing units. She stated she believed the facility provides appropriate PREA services.

§115.22 – Policies to Ensure Referrals of Allegations for Investigations

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 1400.03-2E-page 5 and 1400.03-J4-page 8 covers all elements of this standard ensuring all sexual abuse / harassment allegations are investigated by one of the agency's 10 investigators. All criminal investigations are handled by the Criminal Investigation Unit of the Sheriff's Office. Investigations are initiated immediately upon referral.

§115.31 – Employee Training

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Interviews with human resource staff, random line staff, supervisory staff and review of training files and Training Acknowledgement Form, all employees have received PREA training on all components of this standard. Refresher course will be provided every two years. Policy 1400.03-C-page 10 covers all elements of this standard.

§115.32– Volunteer and Contractor Training

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Policy 2100.07-B2-page 2 and 100.03-H2-page 2 covers all elements of this standard. Auditor interviewed volunteers and contractor employees who verified they had PREA training. Training Acknowledgement Forms were reviewed that are signed by all staff receiving PREA training.

§115.33 – Inmate Education

Exceeds Standard (substantially exceeds requirement of standard)

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

Does Not Meet Standard (requires corrective action)

Inmates receive PREA information during the intake process in English and Spanish. There is zero tolerance posters strategically posted throughout the facility and in all housing units near the telephones. Policy 1400.03-IV-B1-6-page 3 covers the elements of the standard.

§115.34 – Specialized Training: Investigations

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

The facility has ten investigators to conduct sexual abuse / harassment allegations. The Moss Group conducted investigative training on August 28-30, 2013. Policy 1400.03-3-page 10 covers training elements of this standard. Interviews with investigators and review of certificates of completion verified the training was completed.

§115.35 – Specialized training: Medical and mental health care

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

Policy 1400.03-3-page 10 covers all elements of the standard. The agency has an MOU with the University Health System / Methodist Specialty and Transplant Hospital. Agency medical and mental health staff received PREA training from the Moss Group on August 28-30, 2014 ensuring staff are trained in detection, preservation of evidence and reporting of sexual abuse / harassment incidents. Forensic examinations are completed at the hospital.

§115.41 – Screening for Risk of Victimization and Abusiveness

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

Policy 1400.03-B&C-pages 2&3 and 1800.01-01-8a-page 2 cover all elements of the standard. Interviews with medical, mental health and intake staff verified there is a system for collecting information, providing a continued re-assessment and follow-up services ensuring proper screening of inmates. Inmates are

assessed within 72 hours of arrival to the jail. All inmates receive a re-assessment every 30 days or as needed due to referral or incident.

Inmates are not disciplined for refusing to answer or disclose information of being gay, bisexual, transgender, lesbian or intersex. Also they are not disciplined for refusing to answer questions or disclose information if the inmate has physical or mental difficulties.

§115.42 – Use of Screening Information

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

Policy 1800.01-03-C-pages 3&4 and risk instrument address how information is used to ensure the safety of the inmates when assigning them in housing and programs. Transgender inmate and intersex inmate's own views are given serious consideration during housing and program placement. Transgender and intersex inmates are allowed to shower separately. This was documented during staff and inmate interviews.

§115.43 – Protective Custody

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

The agency has a segregated housing unit in both the main detention facility and the annex. Policy 1000.04-B1&2-page 1 covers all elements of the standard. Based on staff interviews inmates are very seldom placed in segregation for safety purposes. Alternative housing is first option for placement. There is a special housing unit available for inmates if the inmate prefers a special housing assignment.

§115.51 – Inmate Reporting

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

Policy 1400.03-D1-pages 4&5 cover all elements of the standard. Inmates receive verbal instruction and a brochure in English or Spanish on reporting procedures. There are posters posted throughout the facility on reporting procedures to the San Antonio Rape Crisis Center. The facility has a web-site (PREA@bexar.org) that can be used for reporting purposes and is made available to both inmates and staff. Interviews with staff and inmates indicated they are educated on reporting procedures. All sexual abuse / harassment reports are reported and investigated immediately after being reported in writing, verbally or anonymously and from third parties.

§115.52 – Exhaustion of Administrative Remedies

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

Policy 1400.02-IV-page 1, 1400.02-B2 & C pages 2-5 covers all elements of the standard regarding the procedures for filing grievances concerning sexual abuse / harassment. Grievances are reviewed immediately upon receipt by staff and assigned to be investigated immediately. The facility has an emergency grievance box in housing units for inmates needing immediate assistance.

§115.53 – Inmate Access to Outside Confidential Support Services

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

There is an MOU in place with the San Antonio Rape Crisis center for victim advocate services. This auditor spoke with Ms. Deana Buriel in advance of the audit and she indicated the center provides emergency services and support through free telephone services that the inmates are allowed to make. The number is posted in all inmate housing units. Policy 1400.03-D-b1-6 page 4, hotline posters and inmate brochure covers all elements of the standard.

§115.54 – Third-Party Reporting

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

Policy 1400.03-5a-b-page 6 covers all elements of the standard. This information is made available through agency web-site (PREA@bexar.org) posters, inmate memo and inmate brochure. Inmate interviews indicated inmates are aware of reporting can be through a third party.

§115.61 – Staff and Agency Reporting Duties

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

Policy 1400.03-2a-e-3a-d page 5 and 606-610-page 61 covers all elements of the standard on requiring staff to report sexual abuse / harassment incidents including anonymous and third party reports, immediately to supervisor. This was verified through random staff and inmate interviews.

§115.62 – Agency Protection Duties

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

Policy 1400.03-2a-e-3a-d page 5 and 606-610-page 61 covers all elements of the standard on requiring staff to report sexual abuse / harassment incidents including anonymous and third party reports immediately to supervisor to ensure safety of the inmates. This was verified through random staff and inmate interviews.

§115.63 – Reporting to Other Confinement Facilities

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

Policy 1400.03-4a-b-page 6 covers all elements of the standard. Through interviews with the Sheriff and other administrative staff, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility that received the allegation shall notify the head of the facility or appropriate office of the agency where the alleged abuse occurred. An investigation will be initiated immediately. This notification will be made immediately and documented.

§115.64 – Staff First Responder Duties

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

Policy 1400.03-G1-4-page 7 covers all elements of the standard to ensure that first responders separate the victim and abuser, evidence is preserved and collected, not allow inmates to take any actions that could destroy evidence, contact medical staff and supervisor. This was verified through random interviews with Detention Officers and other line staff.

§115.65 – Coordinated Response

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

A detailed PREA Plan has been developed with a checklist ensuring a coordinated response by agency staff to include medical, mental health, Detention Officers, investigators and supervisors.

§115.66 – Preservation of ability to protect inmates from contact with abusers

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

The agency has a disciplinary process that includes the Sheriff's Civil Service Rules allow for staff discipline when staff have participated in a sexual abuse / harassment incident to including dismissal.

§115.67 – Agency protection against retaliation

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

Policy 1400.03-3a-d-page 5 covers all elements of the standard. The PREA Coordinator and PREA Compliance Manager are designated to monitor retaliation up to a 90 day period or for as long as needed.

§115.68 – Post-Allegation Protective Custody

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

Policy 1000.04-IV-B1-4-page 1 covers all elements of the standard. Inmates are very seldom placed in segregation unit after making an allegation of sexual abuse / harassment. The inmates are placed in an alternative unit for protection unless inmate requests segregation placement. This was verified through shift supervisor and investigator interviews.

§115.71 – Criminal and Administrative Agency Investigations

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

The agency has 10 trained investigators to investigate sexual abuse / harassment allegations. There were 29 allegations reported the past 12 months with 4 still pending disposition. Policy 1400.03-G-J-page 8 covers all elements of the standard requiring investigations to be initiated immediately after allegation is received. All 29 allegations were reviewed by this auditor and reports indicated the agency follows standard requirements. Investigators were interviewed who indicated investigations continue when investigated staff and inmates depart the

facility. Investigators and PREA Coordinator assist other agencies who may conduct an investigation at the facility.

§115.72 – Evidentiary Standard for Administrative Investigations

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

Policy 1400.03-03-H-page 8 covers all elements of the standard stating the agency shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse / harassment are substantiated. This was verified through interviews with the investigators.

§115.73 – Reporting to Inmate

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

Policy 1400.03-6a-page 6 covers all elements of the standard to ensure inmates are notified of the disposition of the investigation. All inmates were notified through an interview with the classification staff and are documented.

§115.76 – Disciplinary sanctions for staff

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

Agency policy does not indicate presumptive sanction (termination) for violation of Agency zero tolerance.

The agency has a staff disciplinary process that includes the Sheriff's Civil Service Rules allow for staff discipline when staff have participated in a sexual abuse / harassment incident to include dismissal. There were 3 staff involved in

sexual abuse / harassment cases and all three were disciplined. One staff member resigned, but was not prosecuted due to lack of evidence. Policy 1400.03-N1-4-page 9 and Sheriff's Civil Service Rules covers all elements of the standard.

§115.77 – Corrective action for contractors and volunteers

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

Policy 100.03-O-page 2 covers all elements of the standard that prohibits contractors and volunteers from engaging in inappropriate contact with inmates. The individuals are prohibited from entering the facility until the investigation is completed. This information was verified through interviews with contractors, volunteers and investigators.

§115.78 – Disciplinary sanctions for inmates

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

Policy 1400.03-M-page 2 and 1500.01-G2-page 2 covers all elements of the standard. Inmates are subject to disciplinary sanctions following an administrative investigation finding that the inmate engaged in inmate-on-inmate sexual abuse or following a criminal investigation finding of guilt for inmate-on-inmate sexual abuse. Sanctions are commensurate with the nature and circumstance of the abuse committed. The inmate's disciplinary history, mental disabilities or illness are to be considered before sanctions are imposed.

§115.81 – Medical and mental health screenings; history of sexual abuse

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

Policy 1300.04-IV-2a-10-page 5 covers all elements of the standard ensuring proper medical and mental health screening process. Through medical, mental health staff and inmate interviews the screening process in place allows for inmates to disclose if they have had previous sexual victimization. Follow-up care is available at the facility and local hospital.

§115.82 – Access to emergency medical and mental health services

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

The facility has 24 hour medical and mental health care and follow-up and also has an MOU with University Health System / Methodist Specialty and Transplant Hospital. Policy 1400.03-H-page 8 covers all elements of the standard. Treatment of the inmates is at no cost to the inmate.

§115.83 – Ongoing medical and mental health care for sexual abuse victims and abusers

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

The facility has 24 hour medical and mental health care and follow-up and also has an MOU with University Health System / Methodist Specialty and Transplant Hospital. Policy 1400.03-L1-page 8 covers all elements of the standard. Pregnancy tests are offered when inmate has vaginal penetration. If pregnancy results are positive inmates are given timely and comprehensive information about and timely access to all lawful pregnancy related medical

services. Inmate victims of sexual abuse while incarcerated shall be offered tests for sexually transmitted infections as medically appropriate. Treatment of the inmate is consistent with the community level of care. This was verified through medical and mental health staff interviews.

§115.86 – Sexual abuse incident reviews

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

Policy 100.02-Q-page 10 and 100.02-G2-4-page 3 covers all elements of the standard ensuring all sexual abuse / harassment incidents are reviewed. The review team consists of investigators, jail administrator, assistant jail administrator and PREA coordinator who review the incident within 30 days upon conclusion of investigation.

§115.87 – Data Collection

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

Policy 1400.03-L1-4-page 9 covers all elements of the standard. Collected data is maintained in the PREA Coordinator's office in the administrative section of the facility outside the secure perimeter. Collected data is reviewed by administrative staff including the PREA Coordinator. This auditor reviewed data evidence collected and action taken by the agency to improve the safety of the inmates.

§115.88 – Data Review for Corrective Action

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

Policy 1400.03-L1-4-page 9 covers all elements of the standard. Collected data is maintained in the PREA Coordinator's office in the administrative section of the facility outside the secure perimeter. Collected data is reviewed by administrative staff including the PREA Coordinator. This auditor reviewed data evidence collected and action taken by the agency to improve the safety of the inmates. Examples of action taken are additional mirrors, additional cameras and procedure changes.

§§115.89 – Data Storage, Publication, and Destruction

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

Policy 1400.03-K1-2-page 8 and 1400.03-L3-page 9 covers all elements of the standard ensuring all sexual abuse / harassment incident data is collected and maintained. The data is maintained in a secure cabinet in the PREA Coordinator's office and is maintained for 10 years.

AUDITOR CERTIFICATION:

The auditor certifies that the contents of the report are accurate to the best of his/her knowledge and no conflict of interest exists with respect to his or her ability to conduct an audit of the agency under review.

Stephen J. Huffman 12/15/2014

Auditor Signature

Date