

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

Interim Final

Date of Interim Audit Report: Click or tap here to enter text. N/A

If no Interim Audit Report, select N/A

Date of Final Audit Report: August 10, 2022

Auditor Information

Name: Brian D. Bivens	Email: briandbivens@gmail.com
Company Name: Brian D. Bivens and Associates	
Mailing Address: P.O. Box	City, State, Zip: Knoxville, TN 37950
Telephone: 865-789-1037	Date of Facility Visit: June 27 – July 1, 2022

Agency Information

Name of Agency: Miami-Dade Corrections and Rehabilitation Department			
Governing Authority or Parent Agency (If Applicable): Miami-Dade County			
Physical Address: 2525 Northwest 62nd Street		City, State, Zip: Miami, Florida 33147	
Mailing Address: Same		City, State, Zip: Same	
The Agency Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Agency Website with PREA Information: www.miamidade.gov/global/corrections/home.page			

Agency Chief Executive Officer

Name: Cassandra Jones, Interim Director	
Email: Cassandra.jones@miamidade.gov	Telephone: 786-263-6019

Agency-Wide PREA Coordinator

Name: Alicia Morris	
Email: Alicia.morris@miamidade.gov	Telephone: 786-263-6318
PREA Coordinator Reports to: Tara Hinnant-Johnson	Number of Compliance Managers who report to the PREA Coordinator: 5

Facility Information

Name of Facility: Metro West Detention Center

Physical Address: 13850 NW 41st

City, State, Zip: Miami, Florida 33178

Mailing Address (if different from above):
Same

City, State, Zip: Same

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: www.miamidade.gov/global/corrections/home.page

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA Bootcamp and Central Office

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
Florida Model Jail Standards

Warden/Jail Administrator/Sheriff/Director

Name: Safani Summons

Email: safani.summons@miamidade.gov

Telephone: 786-263-5009

Facility PREA Compliance Manager

Name: Corey Whittaker

Email: corey.whittaker@miamidade.gov

Telephone: 786-263-5008

Facility Health Service Administrator N/A

Name: Euphemia Duncan

Email: Euphemia.duncan@miamidade.gov

Telephone: 786-263-4927

Facility Characteristics

Designated Facility Capacity:

3098

Current Population of Facility:

2431

Average daily population for the past 12 months:	2094	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	18-55+	
Average length of stay or time under supervision:	368	
Facility security levels/inmate custody levels:	Minimum, Medium, and Maximum	
Number of inmates admitted to facility during the past 12 months:	2262	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	2262	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	Undetermined	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input checked="" type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input checked="" type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	545	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	0	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	5	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	50	

Physical Plant

<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	42
<p>Number of single cell housing units:</p>	2
<p>Number of multiple occupancy cell housing units:</p>	0
<p>Number of open bay/dorm housing units:</p>	36
<p>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</p>	77
<p>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<p>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<h3>Medical and Mental Health Services and Forensic Medical Exams</h3>	
<p>Are medical services provided on-site?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>Are mental health services provided on-site?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<input type="checkbox"/> On-site <input type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input checked="" type="checkbox"/> Other (please name or describe: Roxcy Bolton Rape Treatment Center)
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Investigations

Criminal Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p>	<p>0</p>
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<p>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A
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Administrative Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p>	<p>18</p>
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<p>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p>	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Facility Information

Name of Facility: Pre-Trial Detention Center

Physical Address: 1321 NW 13th Street

City, State, Zip: Miami, Florida 33125

Mailing Address (if different from above):
Same

City, State, Zip: Same

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: www.miamidade.gov/global/corrections/home.page

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
[Click or tap here to enter text.](#)

Warden/Jail Administrator/Sheriff/Director

Name: Pablo Valdes

Email: pablo.valdes@miamidade.gov

Telephone: 786-263-4179

Facility PREA Compliance Manager

Name: Betty Agenor

Email: betty.agenor@miamidade.gov

Telephone: 786-263-4173

Facility Health Service Administrator N/A

Name: Mykela Refuse

Email: mrefuse@jhsMiami.org

Telephone: 786-263-6066

Facility Characteristics

Designated Facility Capacity:

1687

Current Population of Facility:

1079

Average daily population for the past 12 months:	1140
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input checked="" type="checkbox"/> Males <input type="checkbox"/> Both Females and Males
Age range of population:	18-55+
Average length of stay or time under supervision:	368
Facility security levels/inmate custody levels:	Minimum, Medium, and Maximum
Number of inmates admitted to facility during the past 12 months:	1150
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	1150
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	Undetermined
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input checked="" type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A
Number of staff currently employed by the facility who may have contact with inmates:	365
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	0
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	1
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	1
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	3

Physical Plant

<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	86
Number of single cell housing units:	24
Number of multiple occupancy cell housing units:	77
Number of open bay/dorm housing units:	1
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	31
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Medical and Mental Health Services and Forensic Medical Exams	
Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<input type="checkbox"/> On-site <input type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input checked="" type="checkbox"/> Other (please name or describe: Roxcy Bolton Rape Treatment Center)
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Investigations

Criminal Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p>	<p>0</p>
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<p>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A
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Administrative Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p>	<p>18</p>
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<p>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p>	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Facility Information

Name of Facility: Boot Camp Program			
Physical Address: 6950 NW 41st Street		City, State, Zip: Miami, Florida 33166	
Mailing Address (if different from above): Same		City, State, Zip: Same	
The Facility Is:	<input type="checkbox"/> Military	<input type="checkbox"/> Private for Profit	<input type="checkbox"/> Private not for Profit
<input type="checkbox"/> Municipal	<input checked="" type="checkbox"/> County	<input type="checkbox"/> State	<input type="checkbox"/> Federal
Facility Type:	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
Facility Website with PREA Information: www.miamidade.gov/global/corrections/home.page			
Has the facility been accredited within the past 3 years? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No			
If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):			
<input type="checkbox"/> ACA			
<input type="checkbox"/> NCCHC			
<input type="checkbox"/> CALEA			
<input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.)			
<input checked="" type="checkbox"/> N/A			
If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe: Click or tap here to enter text.			
Warden/Jail Administrator/Sheriff/Director			
Name: Natasha Reese			
Email: natasha.reese@miamidade.gov		Telephone: 786-263-5809	
Facility PREA Compliance Manager			
Name: Lorela Lorfils-Thornton			
Email: loreal.lorfils@miamidade.gov		Telephone: 786-263-5808	
Facility Health Service Administrator <input type="checkbox"/> N/A			
Name: Renee Smith			
Email: renee.smith@jhs-miami.org		Telephone: 786-263-5486	
Facility Characteristics			
Designated Facility Capacity:		208	
Current Population of Facility:		62	

Average daily population for the past 12 months:	54	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	14-24	
Average length of stay or time under supervision:	16 months	
Facility security levels/inmate custody levels:	Minimum, and Medium	
Number of inmates admitted to facility during the past 12 months:	64	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	62	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	62	
Does the facility hold youthful inmates?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	Click or tap here to enter text. <input checked="" type="checkbox"/> N/A	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input checked="" type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	42	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	0	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	20	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	20	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	6	

Physical Plant

<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	4
<p>Number of single cell housing units:</p>	0
<p>Number of multiple occupancy cell housing units:</p>	0
<p>Number of open bay/dorm housing units:</p>	4
<p>Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):</p>	0
<p>In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)</p>	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
<p>Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?</p>	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
<h3>Medical and Mental Health Services and Forensic Medical Exams</h3>	
<p>Are medical services provided on-site?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
<p>Are mental health services provided on-site?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<input type="checkbox"/> On-site <input type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input checked="" type="checkbox"/> Other (please name or describe: Roxcy Bolton Rape Treatment Center)
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Investigations

Criminal Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p>	<p>0</p>
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<p>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A
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Administrative Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p>	<p>18</p>
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<p>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p>	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Facility Information

Name of Facility: Turner Guilford Knight Correctional

Physical Address: 7000 NW 41st Street

City, State, Zip: Miami, Florida 33166

Mailing Address (if different from above):
Same

City, State, Zip: Same

The Facility Is:

Military

Private for Profit

Private not for Profit

Municipal

County

State

Federal

Facility Type:

Prison

Jail

Facility Website with PREA Information: www.miamidade.gov/global/corrections/home.page

Has the facility been accredited within the past 3 years? Yes No

If the facility has been accredited within the past 3 years, select the accrediting organization(s) – select all that apply (N/A if the facility has not been accredited within the past 3 years):

ACA

NCCHC

CALEA

Other (please name or describe: [Click or tap here to enter text.](#))

N/A

If the facility has completed any internal or external audits other than those that resulted in accreditation, please describe:
[Click or tap here to enter text.](#)

Warden/Jail Administrator/Sheriff/Director

Name: Anthony Yeber

Email: Anthony.yeber@miamidade.gov

Telephone: 786-263-5569

Facility PREA Compliance Manager

Name: Samuel Menard

Email: Samuel.menard@miamidade.gov

Telephone: 786-263-5328

Facility Health Service Administrator N/A

Name: Renee Smith

Email: renee.smith@jhsiami.org

Telephone: 786-263-5486

Facility Characteristics

Designated Facility Capacity:

1353

Current Population of Facility:

1056

Average daily population for the past 12 months:	963	
Has the facility been over capacity at any point in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Which population(s) does the facility hold?	<input type="checkbox"/> Females <input type="checkbox"/> Males <input checked="" type="checkbox"/> Both Females and Males	
Age range of population:	18-55+	
Average length of stay or time under supervision:	368	
Facility security levels/inmate custody levels:	Minimum and Medium	
Number of inmates admitted to facility during the past 12 months:	43,347	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>72 hours or more</i> :	1,044	
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for <i>30 days or more</i> :	Undetermined	
Does the facility hold youthful inmates?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Number of youthful inmates held in the facility during the past 12 months: (N/A if the facility never holds youthful inmates)	18	
Does the audited facility hold inmates for one or more other agencies (e.g. a State correctional agency, U.S. Marshals Service, Bureau of Prisons, U.S. Immigration and Customs Enforcement)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Select all other agencies for which the audited facility holds inmates: Select all that apply (N/A if the audited facility does not hold inmates for any other agency or agencies):	<input checked="" type="checkbox"/> Federal Bureau of Prisons <input checked="" type="checkbox"/> U.S. Marshals Service <input checked="" type="checkbox"/> U.S. Immigration and Customs Enforcement <input type="checkbox"/> Bureau of Indian Affairs <input type="checkbox"/> U.S. Military branch <input type="checkbox"/> State or Territorial correctional agency <input checked="" type="checkbox"/> County correctional or detention agency <input type="checkbox"/> Judicial district correctional or detention facility <input type="checkbox"/> City or municipal correctional or detention facility (e.g. police lockup or city jail) <input type="checkbox"/> Private corrections or detention provider <input type="checkbox"/> Other - please name or describe: Click or tap here to enter text. <input type="checkbox"/> N/A	
Number of staff currently employed by the facility who may have contact with inmates:	793	
Number of staff hired by the facility during the past 12 months who may have contact with inmates:	0	
Number of contracts in the past 12 months for services with contractors who may have contact with inmates:	25	
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	25	
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	9	

Physical Plant

<p>Number of buildings:</p> <p>Auditors should count all buildings that are part of the facility, whether inmates are formally allowed to enter them or not. In situations where temporary structures have been erected (e.g., tents) the auditor should use their discretion to determine whether to include the structure in the overall count of buildings. As a general rule, if a temporary structure is regularly or routinely used to hold or house inmates, or if the temporary structure is used to house or support operational functions for more than a short period of time (e.g., an emergency situation), it should be included in the overall count of buildings.</p>	1
<p>Number of inmate housing units:</p> <p>Enter 0 if the facility does not have discrete housing units. DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows inmates to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	28
Number of single cell housing units:	0
Number of multiple occupancy cell housing units:	0
Number of open bay/dorm housing units:	4
Number of segregation cells (for example, administrative, disciplinary, protective custody, etc.):	0
In housing units, does the facility maintain sight and sound separation between youthful inmates and adult inmates? (N/A if the facility never holds youthful inmates)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A
Does the facility have a video monitoring system, electronic surveillance system, or other monitoring technology (e.g. cameras, etc.)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Has the facility installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology in the past 12 months?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
Medical and Mental Health Services and Forensic Medical Exams	
Are medical services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Are mental health services provided on-site?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>Where are sexual assault forensic medical exams provided? Select all that apply.</p>	<input type="checkbox"/> On-site <input type="checkbox"/> Local hospital/clinic <input type="checkbox"/> Rape Crisis Center <input checked="" type="checkbox"/> Other (please name or describe: Roxcy Bolton Rape Treatment Center)
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Investigations

Criminal Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting CRIMINAL investigations into allegations of sexual abuse or sexual harassment:</p>	<p>0</p>
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<p>When the facility received allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), CRIMINAL INVESTIGATIONS are conducted by: Select all that apply.</p>	<input type="checkbox"/> Facility investigators <input type="checkbox"/> Agency investigators <input checked="" type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for CRIMINAL INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for criminal investigations)</p>	<input checked="" type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input type="checkbox"/> N/A
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Administrative Investigations

<p>Number of investigators employed by the agency and/or facility who are responsible for conducting ADMINISTRATIVE investigations into allegations of sexual abuse or sexual harassment?</p>	<p>18</p>
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<p>When the facility receives allegations of sexual abuse or sexual harassment (whether staff-on-inmate or inmate-on-inmate), ADMINISTRATIVE INVESTIGATIONS are conducted by: Select all that apply</p>	<input type="checkbox"/> Facility investigators <input checked="" type="checkbox"/> Agency investigators <input type="checkbox"/> An external investigative entity
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<p>Select all external entities responsible for ADMINISTRATIVE INVESTIGATIONS: Select all that apply (N/A if no external entities are responsible for administrative investigations)</p>	<input type="checkbox"/> Local police department <input type="checkbox"/> Local sheriff's department <input type="checkbox"/> State police <input type="checkbox"/> A U.S. Department of Justice component <input type="checkbox"/> Other (please name or describe: Click or tap here to enter text.) <input checked="" type="checkbox"/> N/A
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Summary of Audit Findings

Standards Exceeded

Number of Standards Exceeded: N/A

List of Standards Exceeded: N/A

Standards Met

Number of Standards Met: 45

List of Standards Met: 115.11, 115.12, 115.13, 115.14, 115.15, 115.16, 115.17, 115.18, 115.21, 115.22, 115.31, 115.32, 115.33, 115.34, 115.35, 115.41, 115.42, 115.43, 115.51, 115.52, 115.53, 115.54, 115.61, 115.62, 115.63, 115.64, 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, 115.88, 115.89 115.401, 115.403

Standards Not Met

Number of Standards Not Met: N/A

List of Standards Not Met: N/A

Post-Audit Reporting Information

General Audit Information	
Onsite Audit Dates	
1. Start date of the onsite portion of the audit:	June 27, 2022
2. End date of the onsite portion of the audit:	July 1, 2022
Outreach	
3. Did you attempt to communicate with a community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If yes, identify the community-based organizations or victim advocates with whom you corresponded:	Roxcy Bolton Rape Crisis Center
Audited Facility Information	
4. Designated Facility Capacity:	Boot Camp Program- 208 Turner Guilford Knight Correctional – 1353, Metro West Detention Center – 3095, Pre-Trial Detention Center – 1687, Total: 6343
5. Average daily population for the past 12 months:	
6. Number of inmate/resident/detainee housing units:	
<p>DOJ PREA Working Group FAQ on the definition of a housing unit: How is a "housing unit" defined for the purposes of the PREA Standards? The question has been raised in particular as it relates to facilities that have adjacent or interconnected units. The most common concept of a housing unit is architectural. The generally agreed-upon definition is a space that is enclosed by physical barriers accessed through one or more doors of various types, including commercial-grade swing doors, steel sliding doors, interlocking sally port doors, etc. In addition to the primary entrance and exit, additional doors are often included to meet life safety codes. The unit contains sleeping space, sanitary facilities (including toilets, lavatories, and showers), and a dayroom or leisure space in differing configurations. Many facilities are designed with modules or pods clustered around a control room. This multiple-pod design provides the facility with certain staff efficiencies and economies of scale. At the same time, the design affords the flexibility to separately house inmates of differing security levels, or who are grouped by some other operational or service scheme. Generally, the control room is enclosed by security glass, and in some cases, this allows residents to see into neighboring pods. However, observation from one unit to another is usually limited by angled site lines. In some cases, the facility has prevented this entirely by installing one-way glass. Both the architectural design and functional use of these multiple pods indicate that they are managed as distinct housing units.</p>	<p>See previous section for breakdown per facility</p>
7. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

Inmates/Residents/Detainees

8. Enter the total number of inmates/residents/detainees housed at the facility as of the first day of the onsite portion of the audit:	Boot Camp Program- 62, Turner Guilford Knight Correctional -1051, Metro West Detention Center – 2431, Pre-Trial Detention Center – 1079, Total: 4623
9. Enter the total number of youthful inmates or youthful/juvenile detainees housed at the facility on the first day of the onsite portion of the audit:	30
10. Enter the total number of inmates/residents/detainees with a physical disability housed at the facility as of the first day of the onsite portion of the audit:	74
11. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) housed at the facility as of the first day of the onsite portion of the audit:	12
12. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) housed at the facility on the first day of the onsite portion of the audit:	57
13. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing housed at the facility on the first day of the onsite portion of the audit:	5
14. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) housed at the facility as of the first day of the onsite portion of the audit:	Due to the location of the agency and the fact the agency employees numerous bi-lingual staff, the agency does not track this number.
15. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual housed at the facility as of the first day of the onsite portion of the audit:	101
16. Enter the total number of inmates/residents/detainees who identify as transgender, or intersex housed at the facility as of the first day of the onsite portion of the audit:	11
17. Enter the total number of inmates/residents/detainees who reported sexual abuse in this facility who are housed at the facility as of the first day of the onsite portion of the audit:	4
18. Enter the total number of inmates/residents/detainees who reported sexual harassment in this facility who are housed at the facility as of the first day of the onsite portion of the audit:	10
19. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening housed at the facility as of the first day of the onsite portion of the audit:	69
20. Enter the total number of inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization housed at the facility as of the first day of the onsite portion of the audit:	0
21. Enter the total number of inmates/residents/detainees who are or were ever placed in segregated housing/isolation for having reported sexual abuse in this facility as of the first day of the onsite portion of the audit:	0
22. Enter the total number of inmates/residents detained solely for civil immigration purposes housed at the	0

facility as of the first day of the onsite portion of the audit:	
<p>23. Provide any additional comments regarding the population characteristics of inmates/residents/detainees in the facility as of the first day of the onsite portion of the audit (e.g., groups not tracked, issues with identifying certain populations).</p> <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	<p>Due to the location of the agency and the fact the agency employees numerous bi-lingual staff, the agency does not track the number of LEP inmates in custody.</p>
<p><i>Staff, Volunteers, and Contractors</i> <i>Include all full- and part-time staff employed by the facility, regardless of their level of contact with inmates/residents/detainees</i></p>	
<p>24. Enter the total number of STAFF, including both full- and part-time staff employed by the facility as of the first day of the onsite portion of the audit:</p>	1745
<p>25. Enter the total number of CONTRACTORS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	96
<p>26. Enter the total number of VOLUNTEERS assigned to the facility as of the first day of the onsite portion of the audit who have contact with inmates/residents/detainees:</p>	69
<p>27. Provide any additional comments regarding the population characteristics of staff, volunteers, and contractors who were in the facility as of the first day of the onsite portion of the audit.</p> <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	<p>Some of the contractors and volunteers move from facility to facility.</p>
Interviews	
Inmate/Resident/Detainee Interviews	
<i>Random Inmate/Resident/Detainee Interviews</i>	
<p>28. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	145
<p>29. Select which characteristics you considered when you selected random inmate/resident/detainee interviewees:</p>	<input checked="" type="checkbox"/> Age <input checked="" type="checkbox"/> Race <input checked="" type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input checked="" type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other (describe) Click or tap here to enter text. <input type="checkbox"/> None (explain) Click or tap here to enter text.
<p>30. How did you ensure your sample of random inmate/resident/detainee interviewees was geographically diverse?</p>	<p>The auditor attempted to select inmates from each housing unit or each floor to ensure sample interviews were geographically diverse.</p>
<p>31. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

<p>a. If no, explain why it was not possible to interview the minimum number of random inmate/resident/detainee interviews:</p>	<p>Yes</p>
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<p>32. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation, etc.).</p> <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	<p>The auditor attempted to select inmates from each housing unit or each floor to ensure sample interviews were geographically diverse.</p>
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<p><i>Targeted Inmate/Resident/Detainee Interviews</i></p>	
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<p>33. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p> <p><i>As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols.</i></p> <p><i>For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed.</i></p> <p><i>If a particular targeted population is not applicable in the audited facility, enter "0".</i></p>	<p>87</p>
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<p>34. Enter the total number of interviews conducted with youthful inmates or youthful/juvenile detainees using the "Youthful Inmates" protocol:</p>	<p>7</p>
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<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
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<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
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<p>35. Enter the total number of interviews conducted with inmates/residents/detainees with a physical disability using the “Disabled and Limited English Proficient Inmates” protocol:</p>	<p>3</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>36. Enter the total number of interviews conducted with inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) using the “Disabled and Limited English Proficient Inmates” protocol:</p>	<p>4</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>37. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (visually impaired) using the “Disabled and Limited English Proficient Inmates” protocol:</p>	<p>7</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>38. Enter the total number of interviews conducted with inmates/residents/detainees who are Deaf or hard-of-hearing using the “Disabled and Limited English Proficient Inmates” protocol:</p>	<p>2</p>

<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>39. Enter the total number of interviews conducted with inmates/residents/detainees who are Limited English Proficient (LEP) using the “Disabled and Limited English Proficient Inmates” protocol:</p>	<p>23</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>40. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the “Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates” protocol:</p>	<p>20</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>41. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex “Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates” protocol:</p>	<p>8</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the</p>	<p>N/A</p>

<p>PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	
<p>42. Enter the total number of interviews conducted with inmates/residents/detainees who reported sexual abuse in this facility using the “Inmates who Reported a Sexual Abuse” protocol:</p>	<p>5</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>43. Enter the total number of interviews conducted with inmates/residents/detainees who disclosed prior sexual victimization during risk screening using the “Inmates who Disclosed Sexual Victimization during Risk Screening” protocol:</p>	<p>8</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>N/A</p>
<p>44. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the “Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Alleged to have Suffered Sexual Abuse)” protocol:</p>	<p>0</p>
<p>a. If 0, select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were “none here” during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. If 0, discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>This was confirmed during interviews with segregation staff, the PREA Managers, and Facility Directors.</p>
<p>45. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation, etc.).</p>	<p>A total of 145 inmate interviews were conducted over a five-day period. 87 interviews were considered targeted.</p>

<p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	
Staff, Volunteer, and Contractor Interviews	
<i>Random Staff Interviews</i>	
46. Enter the total number of RANDOM STAFF who were interviewed:	66
47. Select which characteristics you considered when you selected RANDOM STAFF interviewees (select all that apply):	<input checked="" type="checkbox"/> Length of tenure in the facility <input checked="" type="checkbox"/> Shift assignment <input checked="" type="checkbox"/> Work assignment <input checked="" type="checkbox"/> Rank (or equivalent) <input type="checkbox"/> Other (describe) Click or tap here to enter text. <input type="checkbox"/> None (explain) Click or tap here to enter text.
48. Were you able to conduct the minimum number of RANDOM STAFF interviews?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, select the reasons why you were not able to conduct the minimum number of RANDOM STAFF interviews (select all that apply):	<input type="checkbox"/> Too many staff declined to participate in interviews <input type="checkbox"/> Not enough staff employed by the facility to meet the minimum number of random staff interviews (Note: select this option if there were not enough staff employed by the facility or not enough staff employed by the facility to interview for both random and specialized staff roles). <input type="checkbox"/> Not enough staff available in the facility during the onsite portion of the audit to meet the minimum number of random staff interviews. <input type="checkbox"/> Other (describe) Click or tap here to enter text.
b. Describe the steps you took to select additional RANDOM STAFF interviewees and why you were still unable to meet the minimum number of random staff interviews:	N/A
49. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, etc.). <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	Random staff interviews were conducted at each facility and on each shift.
Specialized Staff, Volunteers, and Contractor Interviews <i>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that interview would satisfy multiple specialized staff interview requirements.</i>	
50. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):	52
51. Were you able to interview the Agency Head?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, explain why it was not possible to interview the Agency Head:	N/A
52. Were you able to interview the Warden/Facility Director/Superintendent or their designee?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

a. If no, explain why it was not possible to interview the Warden/Facility Director/Superintendent or their designee:	N/A
53. Were you able to interview the PREA Coordinator?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, explain why it was not possible to interview the PREA CoordinatorN/the A:	N/A
54. Were you able to interview the PREA Compliance Manager?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)
a. If no, explain why it was not possible to interview the PREA Compliance Manager:	N/A
55. Select which SPECIALIZED STAFF roles were interviewed as part of this audit (select all that apply):	<input type="checkbox"/> Agency contract administrator <input checked="" type="checkbox"/> Intermediate or higher-level facility staff responsible for conducting and documenting unannounced rounds to identify and deter staff sexual abuse and sexual harassment <input checked="" type="checkbox"/> Line staff who supervise youthful inmates (if applicable) <input checked="" type="checkbox"/> Education and program staff who work with youthful inmates (if applicable) <input checked="" type="checkbox"/> Medical staff <input checked="" type="checkbox"/> Mental health staff <input checked="" type="checkbox"/> Non-medical staff involved in cross-gender strip or visual searches <input checked="" type="checkbox"/> Administrative (human resources) staff <input checked="" type="checkbox"/> Sexual Assault Forensic Examiner (SAFE) or Sexual Assault Nurse Examiner (SANE) staff <input checked="" type="checkbox"/> Investigative staff responsible for conducting administrative investigations <input type="checkbox"/> Investigative staff responsible for conducting criminal investigations <input checked="" type="checkbox"/> Staff who perform screening for risk of victimization and abusiveness <input checked="" type="checkbox"/> Staff who supervise inmates in segregated housing/residents in isolation <input checked="" type="checkbox"/> Staff on the sexual abuse incident review team <input checked="" type="checkbox"/> Designated staff member charged with monitoring retaliation <input checked="" type="checkbox"/> First responders, both security and non-security staff <input checked="" type="checkbox"/> Intake staff <input type="checkbox"/> Other (describe) Click or tap here to enter text.
56. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	3
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit (select all that apply):	<input checked="" type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental

	<input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
57. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	6
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit (select all that apply):	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Foodservice <input type="checkbox"/> Maintenance/Construction <input type="checkbox"/> Other
58. Provide any additional comments regarding selecting or interviewing specialized staff (e.g., any populations you oversampled, barriers to completing interviews, etc.). <i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i>	Contract employee interviews consisted of Jackson Memorial Staff assigned to each facility.

Site Review and Documentation Sampling

Site Review

PREA Standard 115.401(h) states, "The auditor shall have access to, and shall observe, all areas of the audited facilities." In order to meet the requirements in this Standard, the site review portion of the onsite audit must include a thorough examination of the entire facility. The site review is not a casual tour of the facility. It is an active, inquiring process that includes talking with staff and inmates to determine whether, and the extent to which, the audited facility's practices demonstrate compliance with the Standards. Note: discussions related to testing critical functions are expected to be included in the relevant Standard-specific overall determination narratives.

59. Did you have access to all areas of the facility?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, explain what areas of the facility you were unable to access and why.	N/A
Was the site review an active, inquiring process that included the following:	
60. Reviewing/examining all areas of the facility in accordance with the site review component of the audit instrument?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, explain why the site review did not include reviewing/examining all areas of the facility.	N/A
61. Testing and/or observing all critical functions in the facility in accordance with the site review component of the audit instrument (e.g., intake process, risk screening process, PREA education)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
a. If no, explain why the site review did not include testing and/or observing all critical functions in the facility.	N/A
62. Informal conversations with inmates/residents/detainees during the site review (encouraged, not required)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No

63. Informal conversations with staff during the site review (encouraged, not required)?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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<p>64. Provide any additional comments regarding the site review (e.g., access to areas in the facility, observations, tests of critical functions, or informal conversations).</p> <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	The auditor was given full access to each facility.
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Documentation Sampling

Where there is a collection of records to review—such as staff, contractor, and volunteer training records; background check records; supervisory rounds logs; risk screening and intake processing records; inmate education records; medical files; and investigative files—auditors must self-select for review a representative sample of each type of record.

65. In addition to the proof documentation selected by the agency or facility and provided to you, did you also conduct an auditor-selected sampling of documentation?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
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<p>66. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p> <p><i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other information that could compromise the confidentiality of any persons in the facility.</i></p>	Files reviewed included: 25 staff Training/Human Resource Files, 25 Inmate Files, 25 PREA Investigation Files, 5 volunteer training records and 5 contract member Training/Human Resource Files
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Sexual Abuse and Sexual Harassment Allegations and Investigations in this Facility

Sexual Abuse and Sexual Harassment Allegations and Investigations Overview

Remember the number of allegations should be based on a review of all sources of allegations (e.g., hotline, third-party, grievances) and should not be based solely on the number of investigations conducted.

Note: For question brevity, we use the term “inmate” in the following questions. Auditors should provide information on inmate, resident, or detainee sexual abuse allegations and investigations, as applicable to the facility type being audited.

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

Instructions: If you are unable to provide information for one or more of the fields below, enter an “X” in the field(s) where information cannot be provided.

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
<u>Inmate-on-inmate sexual abuse</u>	26	26	0	0
<u>Staff-on-inmate sexual abuse</u>	40	40	40	40
Total	66	66	40	40

a. If you were unable to provide any of the information above, explain why this information could not be provided.	N/A
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68. Total number of SEXUAL HARASSMENT allegations and investigations overview during the 12 months preceding the audit, by incident type:

Instructions: If you are unable to provide information for one or more of the fields below, enter an "X" in the field(s) where information cannot be provided.

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	6	6	0	0
Staff-on-inmate sexual harassment	13	13	13	13
Total	19	19	19	19

a. If you were unable to provide any of the information above, explain why this information could not be provided.

N/A

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

Instructions: If you are unable to provide information for one or more of the fields below, enter an "X" in the field(s) where information cannot be provided.

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	7	0	0	0	0
Staff-on-inmate sexual abuse	7	0	0	0	0
Total	14	0	0	0	0

a. If you were unable to provide any of the information above, explain why this information could not be provided.

N/A

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

Instructions: If you are unable to provide information for one or more of the fields below, enter an "X" in the field(s) where information cannot be provided.

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	0	0	0	0
Staff-on-inmate sexual abuse	7	14	19	0
Total	7	14	19	0

a. If you were unable to provide any of the information above, explain why this information could not be provided.

N/A

Sexual Harassment Investigation Outcomes

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

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

Instructions: If you are unable to provide information for one or more of the fields below, enter an "X" in the field(s) where information cannot be provided.

	Ongoing	Referred for Prosecution	Indicted/Court Case Filed	Convicted/Adjudicated	Acquitted
Inmate-on-inmate sexual harassment	2	0	0	0	0
Staff-on-inmate sexual harassment	0	0	0	0	0
Total	2	0	0	0	0

a. If you were unable to provide any of the information above, explain why this information could not be provided.

N/A

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

Instructions: If you are unable to provide information for one or more of the fields below, enter an "X" in the field(s) where information cannot be provided.

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	0	0
Staff-on-inmate sexual harassment	0	4	9	0
Total	0	4	9	0

a. If you were unable to provide any of the information above, explain why this information could not be provided.

N/A

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

66

a. If 0, explain why you were unable to review any sexual abuse investigation files:

N/A

74. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?

Yes No
 N/A (N/A if you were unable to review any sexual abuse investigation files)

Inmate-on-inmate sexual abuse investigation files

75. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:

19

76. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?

Yes No
 N/A (N/A if you were unable to review any inmate-on-inmate sexual abuse investigation files)

77. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?

Yes No

	<input type="checkbox"/> N/A (N/A if you were unable to review any inmate-on-inmate sexual abuse investigation files)
Staff-on-inmate sexual abuse investigation files	
78. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:	40
79. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any staff-on-inmate sexual abuse investigation files)
80. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any staff-on-inmate sexual abuse investigation files)
<u>Sexual Harassment Investigation Files Selected for Review</u>	
81. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:	19
a. If 0, explain why you were unable to review any sexual harassment investigation files:	N/A
82. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any sexual harassment investigation files)
Inmate-on-inmate sexual harassment investigation files	
83. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	6
84. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any inmate-on-inmate sexual harassment investigation files)
85. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any inmate-on-inmate sexual harassment investigation files)
Staff-on-inmate sexual harassment investigation files	
86. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	13
87. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any staff-on-inmate sexual harassment investigation files)
88. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A (N/A if you were unable to review any staff-on-inmate sexual harassment investigation files)
89. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files. <i>Note: as this text will be included in the audit report, please do not include any personally identifiable information or other</i>	There were eight-five total investigations and the auditor randomly selected twenty files to review.

information that could compromise the confidentiality of any persons in the facility.

Support Staff Information

DOJ-certified PREA Auditors Support Staff

90. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit?

Remember: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.

Yes No

a. If yes, enter the TOTAL NUMBER OF DOJ-CERTIFIED PREA AUDITORS who provided assistance at any point during the audit:

N/A

Non-certified Support Staff

91. Did you receive assistance from any NON-CERTIFIED SUPPORT STAFF at any point during this audit?

Yes No

a. If yes, enter the TOTAL NUMBER OF NON-CERTIFIED SUPPORT STAFF who provided assistance at any point during the audit:

1

Auditing Arrangements and Compensation

92. Who paid you to conduct this audit?

- The audited facility or its parent agency
- My state/territory or county government (if you audit as part of a consortium or circular auditing arrangement, select this option)
- A third-party auditing entity (e.g., accreditation body, consulting firm)
- Other

Audit Findings

Audit Narrative

The onsite PREA audit of the Miami-Dade Corrections and Rehabilitation Department was conducted June 27 – July 1, 2022, by Department of Justice Certified PREA Auditor Brian D. Bivens and Fred Chinn. A pre-audit visit was completed by PREA Auditor Brian D. Bivens on May 10-12, 2022. The Miami-Dade Corrections and Rehabilitation Department is located in Miami, Florida. Miami-Dade is located in the southeastern part of the state of Florida. According to the 2020 census, the county had a population of 2,701,767; the largest populous county in Florida and the seventh-most in the United States. According to Wikipedia, the county is home to 34 incorporated cities and many unincorporated areas. The county includes portions of two national parks; the Everglades National Park and Biscayne National Park.

The auditor wishes to extend his deepest appreciation to Lieutenant Alicia Morris and her staff for their professionalism, hospitality, and kindness. The auditor also wishes to compliment the Miami-Dade Corrections and Rehabilitation Department's Cpl. Nottage, Cpl. Martin, Cpl. Carroll, Cpl. Desir and Officers Williams, Mays, Jimenz, and Estevez for their outstanding work in organizing the files that were provided to the auditor in advance of the audit. This enabled the audit to move forward very efficiently.

The facility supplied a list of resident names sorted by housing units, disabilities, and special designations, as well as a list of facility staff names to the auditor. From these lists, the auditor selected, at random, a sampling of residents and staff to be interviewed during the on-site visit. The sampling size for residents included at least one resident from every floor. This decision was made to ensure all residents throughout the facility were receiving the same information and education related to all aspects of the PREA program instituted at this facility.

The on-site audit began with an entrance meeting being conducted on Monday, June 27, 2022 at 08:30 a.m. in the Roll Call Room at Turner Guilford Knight (TGK). The following staff attended the entrance meeting:

Renee Smith, Director of Operations CHS

Assistant Director, M. Guevera

Lt. R. Conforti

Chief John Johnson

Assistant Director Veronica Salom

Chief J. Gato Jackson

Capt. T. Johnson

Cpl. S. Carroll

Cpl. M. Pirerre-Louis

Cpl. N. Nottage

Cpl. B. Martin

Officer L. Inman
Cpl. M. Desir
Chief J.D. Patterson
Captain N. Reece
Officer L. Williams
Lt. Menard
Chief D. Bennett

Following the entrance meeting, the auditor conducted a comprehensive site review that began at approximately 09:00 a.m. and continued throughout the onsite visit. During the site review, the auditor reviewed camera placement, blind spots, staff placement and documentation to assist in determining standard compliance. While touring the facilities the auditor observed the notices of this PREA audit in all the buildings in every housing unit, as well as posters that called attention to the agency's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment). Posters were visible in English, Creole, and Spanish. Random staff and resident interviews were conducted in a private office provided. The following staff accompanied the auditor on the site review:

Cpl. M. Pierre-Louis
Cpl. N. Nottage
Officer L. Inman
Lt. R. Conforti
Cpl. M Desire
Lt. Menard

All housing units, day rooms, resident program areas, work areas, and all other resident accessible areas were toured (**CHART 1**). While touring several residents and staff were questioned about their knowledge of PREA standards, procedures for reporting, services available, and their responsibilities. All staff and residents informally interviewed during the tour acknowledged receiving training and procedures for reporting sexual abuse, sexual harassment, and/or retaliation for reporting. The auditor found the staff to be well versed in their duties as PREA 1st Responders.

On Tuesday, June 28, 2022, the audit continued at 0830 a.m. at Metro West Detention Center. An opening meeting was attended by:

Cpl. M. Pierre-Louis
Cpl. N. Nottage
Officer L. Inman
Cpl. M Desire

Following the entrance meeting, the auditor began interviewing inmates at 09:30 in a private attorney room. The auditor conducted a comprehensive site review that began at approximately 02:45 p.m. and continued throughout the onsite visit. During the site review, the auditor reviewed camera placement, blind spots, staff placement and documentation to assist in determining standard compliance. While touring the facilities the auditor observed the notices of this PREA audit in all the buildings in every housing unit, as well as posters that called attention to the agency's Zero Tolerance Policy and how to report allegations of sexual abuse and sexual harassment). Posters were visible in English, Creole and Spanish. Random staff and resident interviews were conducted in a private office provided. The following staff accompanied the auditor on the site review:

Cpl. M. Pierre-Louis

Cpl. N. Nottage

Officer L. Inman

Cpl. M Desir

On Wednesday June 29, 2022, the auditor reviewed inmate records, staff records and investigative files in the morning. The auditor met with Director Cassandra Jones; Director Jones reaffirmed the agency's commitment to zero tolerance for sexual abuse and sexual harassment.

On Thursday June 30, 2022, the audit continued at Pre-Trial Detention Center at 0830 a.m. The following staff attended the opening:

Captain Perez

Cpl. M. Desir

Cpl. N. Nottage

Cpl. B. Martin

Officer Williams

Officer Mayes

Sgt. Swindell

At approximately 0900 a.m. staff interviews began. At approximately 0100 pm., the tour of the facility was conducted; staff leading the tour of Pre-Trial Detention Facility included:

Captain Perez

Cpl. M. Desir

Cpl. N. Nottage

Cpl. B. Martin

Officer Williams

Officer Mayes

Sgt. Swindell

On Friday, July 1, 2022, the audit continued at 0830 a.m. at Boot Camp. An opening meeting was attended by:

Cpl. M. Pierre-Louis

Cpl. N. Nottage

Officer L. Inman

Cpl. M Devir

Chart 1 - Housing Areas Toured

AREA	Metro West Detention Center	Pre-Trial Detention Center	Boot Camp Program	Turner Guilford Knight Correctional
Administrative Area	X	X	X	X
Intake/Release	N/A	N/A	N/A	X
Kitchen	X	X	N/A	X
Laundry/Linen Exchange	X	X	X	X
Inmate Programs/Classroom	X	X	X	X
Recreation Yard	X	X	X	X
General Population	X	X	X	X
Segregation	X	X	N/A	X
Juvenile Housing	N/A	N/A	N/A	X
Control Room(s)	X	X	N/A	X
Maintenance	X	N/A	N/A	N/A
Commissary	N/A	N/A	N/A	N/A
Medical/Dental Area	X	X	N/A	X
Loading Dock	X	X	N/A	X
Court Holding	X	X	N/A	X
Visitation	X	X	N/A	X
Chapel	X	X	N/A	N/A

The auditor interviewed a total of one hundred and eighteen staff members, contractors and/or volunteers during the course of this audit (**CHART 2**). All staff interviewed was well versed in their respective areas of responsibility regarding PREA and affirmed compliance with the applicable PREA standards.

Chart 2 - Staff/Contractor/Volunteer Interviews (118)

Interview Type	Admin Building	Metro West Detention Center	Pre-Trial Detention Center	Boot Camp Program	Turner Guilford Knight Correctional	Total
Volunteer	N/A	1	0	0	N/A	1
Contract Employee	N/A	2	2	0	2	6
Supervisor	N/A	2	3	2	4	11
1 st Responder	N/A	1	0	0	0	1
Agency Head/Designee	1	N/A	N/A	N/A	N/A	1
Facility Head/Designee	N/A	0	1	1	1	3
Medical Staff	N/A	2	2	0	2	6
Mental Health Staff	N/A	0	0	0	2	2
PREA Coordinator	1	N/A	N/A	N/A	N/A	1
PREA Manager	N/A	1	1	1	1	4

1 st Shift Random Staff	N/A	5	8	7	21	41
2 nd Shift Random Staff	N/A	5	3	4	3	15
3 rd Shift Random Staff	N/A	4	1	1	5	11
PREA Investigator	2	N/A	N/A	N/A	N/A	2
Screening Staff	N/A	N/A	N/A	N/A	2	2
Human Resources	2	N/A	N/A	N/A	N/A	2
Training Staff	2	N/A	N/A	N/A	N/A	2
Juvenile Staff	N/A	N/A	N/A	N/A	2	2
Victim Advocacy	1	0	0	0	0	1
Segregation Staff	N/A	1	1	N/A	2	4
Contract Monitor	N/A	N/A	N/A	N/A	N/A	0

TOTAL 118

There is no SAFE or SANE staff at the facility; they are made available through a Memorandum of Understanding with the Roxcy Bolton Rape Treatment Center. Exams would be performed at Jackson Memorial Hospital. There was one SANE exam conducted in the last twelve months. Staff interviewed was well versed in their responsibilities in reporting sexual abuse, sexual harassment, staff negligence, and retaliation for reporting. The Roxcy Bolton Rape Treatment Center also acts the external reporting agency. Inmates can simply dial *9022# on any inmate phone, and they are quickly connected to a Victim Advocate. The internal hotline is posted on every inmate phone in the facility. The system was successfully tested during the initial tour of the facility.

There were one-hundred and forty-five inmates interviewed during the on-site visit (**CHART 3**). These residents consisted of: fifty-eight general population inmates and eighty-seven targeted.

Chart 3 - Inmate Interviews (145)

Interview Type	Metro West Detention Center (40)	Pre-Trial Detention Center (40)	Boot Camp Program (20)	Turner Guilford Knight Correctional (43)	Total
General Population	14	20	16	6	58
Juvenile	N/A	N/A	N/A	7	7
Limited English Proficient	6	9	0	8	23
Transgender	6	0	0	2	8
Blind/Low Vision	2	3	0	2	7
Deaf/Hearing Impaired	1	0	0	1	2
Self-Identified as LGBTQ	7	2	0	11	20
Cognitive Impairment	1	2	0	1	4
Physical Disability	1	1	0	1	3
Reported Sexual Abuse	3	1	0	1	5
Screened at Risk of Victimization	3	2	0	3	8

All of the inmates interviewed acknowledged receiving PREA training and written materials in languages that they could comprehend (posters, pamphlets, and resident handbooks) outlining the agency’s zero-tolerance policies towards sexual abuse, sexual harassment, and retaliation for reporting, as well as the procedures for reporting. Intake files did show fourteen inmates had signed

a form acknowledging they had watched the video. The review of their intake files showed where each had signed for the brochure as a facility-issued item. The vast majority of the inmates interviewed felt if they had to file a PREA complaint the facility would respond appropriately to their complaint and that all PREA complaints were taken very seriously by staff at this facility.

The auditor selected and carefully examined twenty-five human resource files, twenty-five staff training files, five contract medical employee files and five volunteer human resource files (**CHART 4**). The human resource and contract employee files were very well organized and contained all the necessary background check information and signed statements regarding previous sexual misconduct described in the standards. The training records were also very complete and included written documentation that staff and volunteers received the required training and understood what was being trained. It was clear the Training Division thoroughly covers all aspects of PREA during their training sessions.

Chart 4 – File Review

Inmate Files	Amount Reviewed
Inmate PREA Records	25
Employee Human Resource Files	25
Employee Training Records	25
Volunteer Human Resource Files	5
Volunteer Training Records	5
Contractor Human Resource Files	5 (Medical)
Contractor Training Records	5 (Medical)
Specialized PREA Investigator Training Records	10 (MDCR Admin Investigators)
Specialized PREA Medical/Mental Health Training Records	5 (Medical)
PREA Investigation Files	25

The auditor also reviewed thirty offender files and saw documentation of offender education, as well as documentation of the initial risk screenings, and screenings upon additional information being completed as required by the standard.

In the twelve months preceding the audit, the Miami-Dade Corrections and Rehabilitation Department and the Miami-Dade Police Department had received and investigated eighty-five PREA complaints regarding sexual harassment and/or sexual abuse. During the investigation, each case was properly investigated and dispositioned based on each merit, investigation findings and evidentially standards. All investigative files were reviewed during the on-site visit and appeared to document thoroughly the investigative process per agency policy. Policy was followed and documented for inmate notification, incident review and retaliations monitoring. Policy and procedure required that criminal investigative referrals were to be documented and proper referrals were made as warranted. Miami-Dade Corrections and Rehabilitation Department entered into a Memorandum of Understanding with the Miami-Dade Police Department in 2014 to investigate all allegations of sexual abuse.

At the conclusion of the on-site visit, an exit meeting was held on Friday, July 1, 2022, at 1500 in the agency's headquarters conference room to discuss the audit findings. The following staff attended:

Facility Characteristics

Miami-Dade Corrections and Rehabilitation Department operates four facilities located throughout the county. The Intake Release Bureau (IRB) is located at TGK.

Metro West Detention Center

Shift Hours: 0700-1500, 1500-2300, and 2300-0700

Name	Capacity	Custody Level	Housing Category
1D Wing	--	--	--
1D1	64	MD4-MN6	General Population
1D2	33	MX1-MN9	Medical Housing
1D3	64	MD3-MN9	General Population
1D4	64	MD4-MN6	Mental Health III
2A Wing	--	--	--
2A1	64	MD3-MN9	General Population
2A2	64	MD3-MN6	General Population
2A3	64	MD4-MN6	General Population
2A4	64	MD3-MN5	Mental Health III
2B Wing	--	--	--
2B1	64	MD3-MN9	General Population
2B2	64	MD3-MN9	General Population
2B3	72	MD3-MN9	General Population
2B4	64	MD3-MN9	Quarantine
2C Wing	--	--	--
2C1	72	MD3-MD6	General Population
2C2	48	MD3-MD6	Mental Health
2C3	72	MD4-MN6	General Population
2C4	72	MD3-MN6	General Population
2D Wing	--	--	--
2D1	72	MX1-MN9	General Population Females
2D2	64	Mx1-MN9	General Population Females
2D3	64	MD3-MN9	General Population Females
2D4	64	MX1-MN9	Mental Health Females
3A Wing	--	--	--
3A1	72	MD3-MN9	General Population
3A2	72	MD3-MN6	General Population
3A3	72	MD4-MD5	General Population
3A4	64	MD3-MN9	Quarantine
3B Wing	--	--	--
3B1	72	MD3-MN6	Mental Health
3B2	72	MD4-MD6	General Population
3B3	72	MD4-MD5	General Population
3B4	72	MD3-MN6	Mental Health III
3C Wing	--	--	--
3C1	72	MD3-MD5	General Population
3C2	72	MD3-MN6	General Population

3C3	72	MD4-MD5	General Population
3C4	72	MD4-MN5	Quarantine
3D Wing	--	--	--
3D1	72	MD3-Mn9	General Population
3D2	72	MD3-MN6	Mental Health III
3D3	72	MD3-MN9	General Population
3D4	72	MD3-MD5	Mental Health III
Medical Clinic	--	--	--
CO1	1	MX1-MN9	Medical Isolation
CO2	1	MX1-MN9	Medical Isolation
Special Man. Unit	--	--	--
North SMU	32	MX1-MN9	Safety Cells
North SMU MED	10		Safety Cells
South SMU	25	MX1-MN9	Safety Cells
South SMU MED	10		Safety Cells

MWDC has 3,098 beds for male inmates of maximum, medium, minimum custody levels. This facility is the largest in the Miami-Dade County Corrections system. This facility houses male maximum, medium, and minimal custody level inmates. The facility has approximately 350 cameras. The facility utilizes BlackCreek electronic door security system. The staff are required to complete security checks every 30 minutes. Supervisor staff are required to complete unannounced rounds once per shift and document the rounds in a log book.

The medical area has adequate space to include a dental area. Corporals and above are issued body cameras and tasers each shift. The facility has a Central Control Room which is operated by two employees at all time. During camera review, it was determined by there were no cameras that captured showers or toilets in any area of the facility. Showers have metal doors with metal mesh on top; each shower has a shower curtain to allow for privacy.

The facility has a spacious kitchen that serves a hot breakfast and dinner, along with a cold lunch. The facility is considered 3rd generation, mean each housing unit is open dorm. The facility is direct supervision, meaning staff are stationed inside each housing unit.

Pre-Trial Detention Center

Shift Hours: 0700-1500, 1500-2300, and 2300-0700

Name	Capacity	Custody Level	Housing Category
East Wing	--	--	--
EW1	54	MD4-5	General Population
EW2	50	MD3-MN9	General Population
PT1AO	32	MD3-MN9	General Population
PT1BO	28	MD3-MN9	General Population
Clinic	--	--	--
C11	20	MX1-MN9	General Population
C01-C10	7	MX1-MN9	Medical Housing
2nd Floor	--	--	--
PT2A1	12	MN6-MN9	General Population
PT2A2	20	MD3-MD5	General Population
PT2A3	24	MD4-MD5	General Population
PT2A4	24	MD4-MD5	General Population
PT2B1	12	MD3-MD5	General Population
PT2B3	19	MD3-MN9	Inmate Worker
3rd Floor	--	--	--
PT3A1	16	MD3-MD5	General Population
PT3A2	22	MD4-MN9	Empty due to Maintenance
PT3A3	22	MN6-MN9	General Population
PT3A4	24	MD4-MD5	General Population
PT3B1	8	MD3-MD5	General Population
PT3B2	12	MD3-MN9	General Population/Medical
PT3B3	24	MD3-MD5	General Population
PT3B4	24	MD4-MD5	General Population
PT3C1	20	MD4-MN9	Inmate Workers
PT3C2	16	MN6-MN9	General Population
S/C	6	MX1-MN9	Special Category
4th Floor	--	--	--
PT4A1	16	MD3-MN9	General Population Medium
PT4A2	20	MD4-MD5	General Population
PT4A3	24	MD3-MD5	General Population
PT4A4	24	MD3-MD5	General Population
PT4B1	20	MD4-MD5	General Population
PT4B2	16	MD3-MD5	General Population
PT4B3	24	MD4-MD5	General Population
PT4B4	24	MD4-MN5	General Population
PT4C1	16	MN6-MN9	General Population
PT4C2	16	MX1-MN9	Administrative Confinement
S/C	6	MX1-MN9	Special Category
5th Floor	--	---	--
PT5A1	14	MD4-MD5	General Population
PT5A2	20	MD4-MD5	General Population
PT5A3	24	MD4-MD5	General Population

PT5A4	24	MD3-MD5	General Population
PT5B1	20	MD4-MD5	General Population
PT5B2	15	MX1-MX2	General Population
PT5B3	24	MD3-MD5	General Population
PT5B4	23	MN6-MN9	General Population
PT5C1	16	MX1-MN9	Safety Cell/Escape
PT5C2	16	MX1-MN9	Safety Cell/Escape
S/C	6	MX1-MN9	Special Category
6th Floor	--	--	--
PT6A1	16	MX1-MX2	General Population
PT6A2	20	MD4-MD5	General Population
PT6A3	24	MD4-MD5	General Population
PT6A4	24	MD3-MD5	General Population
PT6B1	20	MD4-MD5	General Population
PT6B2	15	MX1-MX2	General Population
PT6B3	24	MD4-MD5	General Population
PT6B4	24	MD3-MD5	General Population
PT6C1	16	MX1-MN9	Administrative Confinement
PT6C2	16	MD4-MD5	General Population
S/C	6	MX1-MN9	Special Category
8th Floor	--	--	--
PT8A1	14	MX1-MN9	Administrative Confinement
PT8A2	10	MD4-MD5	General Population
PT8A3	10	MX1-MN9	Administrative Confinement
PT8A4	10	MD3-MD5	General Population
PT8B1	10	MN6-MN9	General Population
PT8B2	10	MD3-MD5	Empty due to Maintenance
PT8B3	10	MD3-MD5	General Population
PT8B4	10	MD3-MD5	General Population
PT8C1	10	MD3-MD5	General Population
PT8C2	10	MD4-MN8	Empty due to Maintenance
PT8C3	8	MX1-MN9	Administrative Confinement
S/C	12	MX1-MX2	General Population
9th Floor	--	--	--
PT9A1	7	MX1-MN9	Pending Mental Health
PT9A2	10	MX1-MN9	Quarantine
PT9A3	5	MX1-MN9	Mental Health III
PT9A4	10	MX1-MN9	Mental Health III
PT9B1	14	MX1-MN9	Mental Health III
PT9B2	10	MX1-MN9	Mental Health III
PT9B3	10	MX1-MN9	Mental Health III
PT9B4	10	MX1-MN9	Mental Health III
PT9C1	0	N/A	Converted to ZOOM Court
10th Floor	--	--	--
PTXA1	14	MX1-MN9	Mental Health III
PTXA2	10	MX1-MN9	Disciplinary Confinement
PTXA3	10	MX1-MN9	Mental Health III

PTXA4	10	MX1-MN9	Disciplinary Confinement
PTXB1	10	MN5-MN9	General Population
PTXB2	10	MX1-MN9	Disciplinary Confinement
PTXB3	10	MX1-MX2	General Population
PTXB4	10	MX1-MN9	Disciplinary Confinement
PTXC1	55	MX1-MN6	General Population

Pre-Trial Detention Center

Pre-Trial Detention Center has a maximum bed capacity of 1687 and houses maximum and medium male inmates. This facility houses male and female maximum, medium, and minimal custody level inmates. The facility is the only intake for Miami-Dade. The facility has approximately 600 cameras. The facility utilizes BlackCreek electronic door security system. The staff are required to complete security checks every 30 minutes. Supervisor staff are required to complete unannounced rounds once per shift and document the rounds in a log book.

The facility has 440 budgeted staff positions. The facility is considered 1st generation construction. Each floor has 3 or 4 housing units. Each floor has a washer and dryer. There are large program rooms on the 7th floor. The administration area is also located on the 7th floor.

Inmates generally wear orange two -piece uniforms indicating general population or red two-piece uniforms signifying segregation housing.

Boot Camp Program

Shift Hours: 0700-1500, 1500-2300, and 2300-0700

Name	Capacity	Gender	Custody Level
Platoon 1	38	Male	Minimum, Medium (Court Ordered)
Platoon 2	38	Male	Minimum, Medium (Court Ordered)
Platoon 3	40	Male	Minimum, Medium (Court Ordered)
Worker Pod	40	Male	Minimum Inmate Worker

The Miami-Dade County Corrections and Rehabilitation Department Bootcamp has gained a reputation throughout the nation as an organization dedicated to the achievement of excellence. This Department has earned its reputation by encouraging creative and innovative approaches to the numerous opportunities faced by correctional organizations. Participants sentenced to this program primarily consist of young men and women between the ages of 14 and 24 who have been adjudicated as adults. Juveniles are separated during the program and consciously supervised by a Platoon Leader. Juveniles are housed in the juvenile housing unit at TGK. Prior to admission into the Boot Camp program, each inmate receives a complete and comprehensive assessment, including a physical examination, a psychological evaluation and orientation. The Miami-Dade County Corrections and Rehabilitation Department Boot Camp Program utilize committed, specially trained personnel. It is a cost effective, population reducing, realistic reform program which serves the offender, and ultimately the community. Due to the nature of the Boot Camp program, visitation is a privilege that must be earned during Phase II only. The cadet is evaluated after the first 60 days of the Boot Camp Program. This evaluation is based on a file review and a satisfactory performance rating. Once these requirements are met, the cadet will be allowed minimal visitation. Boot Camp is an accredited facility. The rated capacity of BCP is 156.

The facility has approximately 20 cameras. The staff are required to complete security checks every 30 minutes. Supervisor staff are required to complete unannounced rounds once per shift and document the rounds in a log book.

The Program consist of:

Phase I – Four months of GED, Social Skills and physical fitness

Phase II – Transition Training for job readiness

Phase III – At home monitoring with ankle bracelet

Turner Guilford Knight Correctional

Shift Hours: 0700-1500, 1500-2300, and 2300-0700

Name	Capacity	Custody Level	Housing Category
2nd Floor	--	--	--
K2-1	72	MX1-MN9	Mental Health
K2-2	68	MX1-MN9	Mental Health Females
	4	MXI-MN9	Females/SMU
K2-3	72	MXI-MN9	Mental Health
K2-4	72	MXI-MN9	Intake Mental Health
K2-5	72	MXI-MN9	Intake/Misdemeanor
K2-8	72	MXI-MN9	Isolation
4th Floor	--	--	--
K4-1	72	MXI-MN9	Mental Health II
K4-2	72	MXI-MN9	Mental Health III
K4-3	72	MXI-MN9	Mental Health II & III
K4-4	72	MXI-MN9	GP/Safety Cells Females
K4-5	72	MXI-MN9	Quarantine/Isolation
K4-6	72	MXI-MN9	Detox
6th Floor	--	--	--
K6-1	72	MXI-MN9	General Population
K6-2	72	MXI-MN9	Intake/Felon
K6-3	72	MXI-MN9	Intake/Felon
K6-4	72	MD4-5	Intake/Felon
8th Floor	--	--	--
K8-1A	25	MX1-MN9	Juveniles
K8-1B	25	MX1-MN9	Safety Cell
K8-2	72	MX1-MN9	Mental Health III
South Unit 4	--	--	--
TTS4 A	42	MD3-MN9	Inmate Workers
Clinic	--	--	--
K110	7	MX1-MN9	Medical Isolation
K111	30	MX1-MN9	Medical Housing

TGK is a third-generation facility with a maximum bed capacity of 1,353 to include beds for Juvenile inmates adjudicated as adults. This facility houses male and female maximum, medium, and minimal custody level inmates. The facility is the only intake for Miami-Dade. The facility has approximately 650 cameras.; Central Control is manned 24/7 by three to four staff. The facility utilizes BlackCreek electronic door security system. The staff are required to complete security checks every 30 minutes. Supervisor staff are required to complete Unannounced Rounds once per shift and document the rounds in a log book.

The facility is the intake center for the entire agency. Staff report that average daily bookings around 130 per day. There are three separate Medical Stations in the inmate process. There are also full-time CHS Mental Health Staff in the Intake Area. The facility has a large kitchen area with several coolers and freezers and a dry storage area. The agency's Classification Unit is based out of TGK; the unit is a 24/7

operation. Classification utilizes a decision-tree process to determine custody levels. Classification is also responsible for all initial PREA screenings. Each facility's PREA Manager completes PREA 30-day reassessments. The agency utilizes a three-tier mental health (Level I, II, and III) status for each facility.

PREVENTION PLANNING

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

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

115.11 (a)

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

115.11 (b)

- Has the agency employed or designated an agency-wide PREA Coordinator? Yes No
- Is the PREA Coordinator position in the upper-level of the agency hierarchy? Yes No
- Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?
 Yes No

115.11 (c)

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) Yes No NA
- Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)
 Yes No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Interagency Policy IP-001 – Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
2. **Chain-of-Command Chart**
3. **Agency Memorandum (11/8/21)**

B. Interviews

1. **PREA Coordinator**
2. **PREA Managers (5)**

C. Other

1. Auditor Observation

115.11 (a) The Miami-Dade Corrections and Rehabilitation Department staff follows the agency's policy, Interagency Policy IP-001 – Inmate Sexual Battery/Abuse/Harassment Prevention and Response which mandates a zero-tolerance (page 1) for all forms of sexual abuse and sexual harassment. This policy outlines the agency's approach to preventing, detecting, and responding to such conduct. This was evident during the onsite tour, and interviews with inmates and staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.11 (B) and (C) According to the agency's chain-of-command chart, the agency employs an upper-level, agency-wide PREA Coordinator. Lt. Morris was appointed as the agency-wide PREA Coordinator. The agency provided the auditors with the organizational chart showing the PREA Coordinator position as an upper-level, agency-wide position, Lt. Morris reports directly to Captain Tara Hinnant-Johnson. Lt. Morris is very knowledgeable of the PREA standards and actively assists the facility with compliance. Lt. Morris has the authority to develop, implement, and oversee PREA compliance. She is actively updating the facility as new Frequently Ask Questions (FAQs) results are published on the PREA Resource Center website. On November 8, 2021, the Miami-Dade Corrections and Rehabilitation Director appointed Samuel Menard, Corey Whittaker, Betty Agenor, Lt. Wilson, Lorela Lorfis-Thornton, and Darius Passmore as PREA Managers for their respective facilities.

During interviews with the PREA Coordinator and the PREA Compliance Managers, all indicated they had sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit. The Miami-Dade Corrections and Rehabilitation Department meets this standard due to the fact it employs a PREA Compliance Coordinator and a PREA Compliance Manager for each facility. Therefore, this standard was found to be in compliance during this audit.

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

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

115.12 (a)

- If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's

obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.) Yes No NA

115.12 (b)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. Policy
2. Memorandum of Understanding with Broward County Sheriff's Office, Palm Beach Sheriff's Office, and Collier County Sheriff's Office.

B. Interviews

1. PREA Coordinator
2. PREA Managers (5)
3. Random Staff

C. Other

1. Website for Broward County Sheriff's Office, Palm Beach Sheriff's Office, and Collier County Sheriff's Office.

Based on the documentation provided: as well as, interviews with the Random Staff, PREA Coordinator, and PREA Managers, it was determined the Miami-Dade Corrections and Rehabilitation Department does not contract with other facilities to house inmates assigned to their custody. Miami-Dade does not contract with other agencies for the confinement of those in their custody except for extreme emergency situations. For those extreme emergency situations such as hurricanes, Miami-Dade Corrections and Rehabilitation Department has a Memorandum of Understanding with Broward County Sheriff's Office, Palm Beach Sheriff's Office, and Collier County Sheriff's Office. All three agencies are

PREA compliant according to information found on each agency's website. Therefore, this standard was found to be in compliance during this audit.

Standard 115.13: Supervision and monitoring

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

115.13 (a)

- Does the 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any applicable State or local laws, regulations, or standards? Yes No

- 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 No
- In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors? Yes No

115.13 (b)

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

115.13 (c)

- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies? Yes No
- In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? Yes No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? Yes No
- Is this policy and practice implemented for night shifts as well as day shifts? Yes No
- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
- 2. DSOP 6-030 Review of Staffing Requirements**
- 3. Memorandum from The Director**
- 4. Staffing Analysis**
- 5. Duty Rosters**
- 6. Red Log Book Unannounced Rounds**

B. Interviews

- 1. PREA Coordinator**
- 2. PREA Managers (5)**
- 3. Acting Director**
- 4. Supervisory Staff conducting unannounced rounds**
- 5. Random Inmates**

C. Other

- 1. Auditor Observation**

115.13 (a) DSOP 6-030 Review of Staffing Requirements outlines a detailed staffing formula for each facility. The facility has documented and made its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing as described and required by this standard. The established staffing plan uses the criteria found in the standard 115.13 (a) to include the physical layout of the facility, composition of the residents housed, the prevalence of substantiated and unsubstantiated incidents of sexual abuse, and any other relevant factors identified. Video monitoring has been deployed to assist with the protection of offenders against sexual abuse at this facility. The staffing levels are monitored daily by a review of shift rosters. According to the PREA Coordinator, there have not been any judicial findings of inadequacy in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (b) The facility has procedures in place to ensure all deviations are covered by overtime or notification must be documented on the shift roster and submitted to the PREA Manager outlining the reason(s) for the deviation. When staff shortages occur, the Shift Supervisor will:

1. Ask the on-duty shift if they want to work over,
2. Call off duty employees to see if they want to come in and work;
3. Mandate on-duty employees to work over.

There has not been any deviation reported where the staffing plan had not been complied with in the past twelve months, as confirmed by written documentation and during interview with the PREA Manager. When staff shortages occur, the Shift Supervisor will:

1. Ask the on-duty shift if they want to work over,
2. Call off duty employees to see if they want to come in and work;
3. Mandate on-duty employees to work over.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (c) The staffing plan is reviewed annually by the PREA Coordinator and forwarded to the Captain for review. It is then forwarded to Chief Financial Officer for signature and approval of any recommendations made which would include changes to policy and procedures, physical plant, video monitoring, or staffing levels. The last Annual Staffing Plan assessment was completed on December 7, 2021. The acting Director disclosed the agency was actively attempting to fill the agency's vacancies. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.13 (d) Based on Miami-Dade Corrections and Rehabilitation Department Shift Supervisor interviews, facility WTMS logs, staff interviews, and policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response. Intermediate-level or higher-level supervisors are required to conduct and are documenting unannounced rounds on all shifts as required. A department memorandum from the Director mandates each security supervisor shall conduct unannounced rounds and physically enter every housing area on each shift to identify and deter staff sexual battery/abuse/harassment. Staff shall not alert others that such rounds are being conducted. Staff alerting others regarding unannounced rounds shall be subject to discipline. Rounds shall be documented in the Watch Tour Manager System (WTMS) or on a Physical Sight Check Sheet when the WTMS is unavailable or inoperable. Rounds shall also be documented in the Red Log Book. Interviews with supervisory staff supported this practice. Random documentation review showed within a 72-hour period; more than a dozen unannounced rounds were conducted in each facility. Random inmate interviews indicated that unannounced rounds were generally being conducted at each facility according to the agency's policy. Such rounds were logged in the appropriate Red Log Book. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.14: Youthful inmates

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

115.14 (a)

- Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

115.14 (b)

- In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates [inmates <18 years old].) Yes No NA

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

115.14 (c)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **DSOP: 12-001 Juvenile Intake, Classification, Housing and Programs**
2. **DSOP: 21-007 Inmate Programs and Services**
3. **Affiliating Agreement with The School Board of Miami-Dade County District/School Operations**
4. **Housing Plan**

B. Interviews

1. **PREA Coordinator**
2. **PREA Manager**
3. **Staff supervising Youthful Offenders**
4. **Youthful Offenders (7)**

C. Other

1. **Auditor Observation**

115.14 (a) Miami-Dade DSOP: 12-001 Juvenile Intake, Classification, Housing and Programs states that youthful detainees will be separated at all times during the intake process and housing. Such detainees will be supervised under direct supervision guidelines. Such detainees will be separated by sight, sound and physical contact with the adult inmate/detainee population. Random interviews with youthful offenders revealed that two officers are typically present at all times in the unit and supervisors visit the unit at least once per shift. This was verified during interviews with Staff supervising youthful offenders and interviews with five youthful offenders. Male and female youthful offenders are housed at Turner Guilford Knight; separated by sight and sound from the adult population. This was verified during interviews with seven youthful detainees and observations by the auditors during the outside visit. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.14 (b) Miami-Dade Dade DSOP: 12-001 Juvenile Intake, Classification, Housing, and Programs states that youthful detainees will be separated at all times during the intake process and housing. Such detainees will be supervised under direct supervision guidelines. Such detainees will be separated by sight, sound and physical contact with the adult inmate/detainee population. Random interviews with youthful offenders revealed that two officers are typically present at all times in the unit and supervisors visit the unit at least once per shift. Miami-Dade Housing Plan outlines the daily activities for youthful detainees, including educational services and recreation times. The auditor reviewed the daily activity schedule for the juvenile inmates. This was verified during interviews with seven youthful detainees and random staff interviews, and observations by the auditors during the outside visit. Male and female youthful offenders are housed at Turner Guilford Knight; separated by sight and sound from the adult population. Miami-Dade has a written affiliating agreement with the School Board of Miami-Dade County District/School Operations to provide educational services outreach to incarcerated youthful offenders. There were no female youthful offenders housed at TGK during the onsite portion of the audit. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.14 (c) Male and female youthful offenders are housed at Turner Guilford Knight; separated by sight and sound from the adult population. Security staff are assigned inside the youthful housing units 24 hours a day, 7 days a week. Random interviews with youthful offenders revealed that two officers are typically present at all times in the unit and supervisors visit the unit at least once per shift. DSOP: 21-007 Inmate Programs and Services outlines multiple educational, vocational and rehabilitative programs available to youthful offenders. This was confirmed during an interview with the PREA Manager and through auditor observation during the onsite visit. During an interview with the PREA Managers, it was determined that there have not been any youthful detainees housed outside of the designed housing units at Turner Guilford Knight in the past twelve months for any reason. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.15: Limits to cross-gender viewing and searches

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

115.15 (a)

- Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?
 Yes No

115.15 (b)

- Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)
 Yes No 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.) Yes No NA

115.15 (c)

- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches? Yes No
- Does the facility document all cross-gender pat-down searches of female inmates? (N/A if the facility does not have female inmates.) Yes No NA

115.15 (d)

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

115.15 (e)

- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status? Yes No
- If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner? Yes No

115.15 (f)

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

Auditor Overall Compliance Determination

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

Overall compliance determination was based on:

A. Documentation

1. **DSOP: 11-022 Frisk and Strip Search Procedures**
2. **DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates**
3. **Miami-Dade Corrections and Rehabilitation Department Rules 2.2.000 Rules – General Conduct and Responsibilities**
4. **Miami-Dade Corrections and Rehabilitation Department Lesson Plan and PowerPoint – Inmate Sexual Battery/Abuse/Harassment Prevention and Response (4-Hour Course)**
5. **Staff Training Files**
6. **Strip Search Logs**
7. **Inmate Handbook**

B. Interviews

1. **Random Staff**
2. **PREA Coordinator**
3. **Random Inmates**
4. **Medical Staff**
5. **Transgender Inmates (8)**

C. Other

1. **Auditor Observation**
2. **Opposite Gender Announcement Signs**

115.15 (a) Miami-Dade DSOP: 11-022 Frisk and Strip Search Procedures outlines offender searches including searches of transgender and intersex offenders. The review of training curriculums and staff

interviews revealed cross gender strip searches are prohibited except in exigent circumstances and must be documented when conducted. DSOP: 18-017 states transgender inmates are referred to the Intake Screening Nurse in the intake area, who will determine the gender status of the inmate based on their verbal assessment with the inmate and a review of any available medical records. There have been no documented cross-gender visual body cavity or strip searches reported in the past twelve months according to the PREA Coordinator. This was reiterated during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (b) Miami-Dade DSOP: 11-022 Frisk and Strip Search Procedures and prohibits male employees from frisk/pat searches of female inmates/residents except in exigent circumstances. In such cases, the applicable staff shall generate a MDCR Incident Report. This practice was confirmed during random female inmate interviews.

115.15 (c) Miami-Dade Policy DSOP: 11-022 Frisk and Strip Search Procedures prohibit frisk/pat searches of the female inmates by male staff and requires that all cross-gender searches in exigent circumstances be documented. If a search is completed under exigent circumstances, the search is documented on an MDCR Incident Report. There were no reported searches completed under exigent circumstances in the past twelve months. Random male inmates reviewed that female patdown searches are conducted in a professional manner. Random female staff interviews revealed they are trained to use the back of their hands during patdowns of male inmates. This practice was confirmed during female staff interviews.

115.15 (d) Miami-Dade Corrections and Rehabilitation Department Lesson Plan – Inmate Sexual Battery/Abuse/Harassment Prevention and Response outlines that inmates shall be permitted to shower, perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia. The inmates confirmed during interviews they have privacy when showering, using the toilets and while changing their clothes. Miami-Dade Corrections and Rehabilitation Department Rules 2.2.000 Rules – General Conduct and Responsibilities page 1 and Miami-Dade Inmate Handbook page 2 also require staff of the opposite gender to announce their presence prior to entering the housing units. Inmate and staff interviews revealed that opposite gender announcements were common practice at this facility and reminders of this requirement are posted on some entry doors of all housing units meet the requirements of this part of the standard during this audit.

The auditor suggests that “Opposite Gender Announcement Signs” are posted at every entry door to every housing unit in each of the four facilities.

115.15 (e) Based on Miami-Dade DSOP: 11-022 Frisk and Strip Search Procedures page 7 and training curriculum provided and staff interviews the facility prohibits staff from physically examining transgender or intersex inmates for the sole purpose of determining genital status. DSOP: 18-017 stipulates that if the inmate’s genital status is unknown, it is determined 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. This was corroborated during interviews with eight LBGTI inmates, medical staff and random staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.15 (f) Based on Miami-Dade Corrections and Rehabilitation Department Lesson Plan – Inmate Sexual Battery/Abuse/Harassment Prevention and Response, training curriculum provided, staff

training file reviews, and staff interviews the facility trains security staff to conduct cross-gender pat-down searches, and searches of transgender and intersex inmates, in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs. This is outlined in Miami-Dade Corrections and Rehabilitation Department lesson plan. During interviews with the eight transgender inmates, it was confirmed that the inmates felt the staff conducts proper searches. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

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

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? Yes No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if "other," please explain in overall determination notes)? Yes No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? Yes No
- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? Yes No
- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? Yes No

115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? Yes No
- Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? Yes No

115.16 (c)

- Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Policy DSOP: 17-005 Limited English Proficiency**
- 2. Policy DSOP: 12-007 American with Disabilities ACT – Inmates and Visitors**
- 3. Americans with Disabilities Act Lesson Plan**
- 4. Contract for Interpreter Services**
- 5. Invoices for Interpreter Services**
- 6. Inmate Handbook**
- 7. Administrative Memorandum Procedural Directive CIC#35 -Inmate Access for Purple Video Relay Service for ADA Hearing Impaired Inmates (July 20, 2018)**
- 8. "I Speak" Language Identification Tool**

B. Interviews

- 1. Random Staff**
- 2. Targeted Inmates**

115.16 (a) DSOP: 12-007 Americans with Disabilities Act – Inmates and Visitors policy indicates that the Miami-Dade Corrections and Rehabilitation Department takes appropriate steps to ensure inmates with disabilities (including, for example, inmates who are deaf or hard of hearing, those who are blind or have low vision, or those who have intellectual, psychiatric, or speech disabilities), have an equal opportunity to participate in or benefit from all aspects of its efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including steps to provide interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in English, Creole, and Spanish. The agency also has a Memorandum of Understanding for interpreter services. The facility also makes available Purple phones at each facility; an Administrative Memorandum (July 20, 2018) outlines a procedural directive outlining inmate access. During interviews with the inmates identified to meet the aspects of this standard, they all confirmed having received training and materials they could understand. The agency has multiple employees who are fluent in Spanish. Agency policy DSOP: 17-005 Limited English Proficiency outlines the agency's guidelines for LEP inmates; including the use of the "I SPEAK" Language Identification Tool. The inmates and staff also confirmed that interpreter services are available when needed. The auditor was provided with invoices and payments for the contracted interpreter service provider. There was seven blind/low vision and two deaf/hearing impaired inmates to interview during the onsite visit. All inmates displayed a sound working knowledge of the agency's zero tolerance for sexual abuse and sexual harassment and both were able to list the internal and external reporting mechanisms that the facility provides. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.16 (b) DSOP: 12-007 Americans with Disabilities Act – Inmates and Visitors policy indicates Miami-Dade Corrections and Rehabilitation Department takes 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, including steps to provide interpreters who

can interpret effectively accurately and impartially. Contracted interpreter services and/or staff interpreters are used to translate at this facility. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in English, Creole, and Spanish. The agency also has a Memorandum of Understanding with a contracted interpreter service. There were twenty-three Spanish speaking inmates interviewed (with the assistant of a staff interpreter) during the on-site visit and they confirmed during interviews receiving all written PREA information. The inmates and staff also confirmed that interpretive services are available when needed. The facility also makes Purple phone in each facility. Miami-Dade has a significant number of bi-lingual employees to assist with interpreter services. Miami-Dade DSOP: 12-007 Americans with Disabilities Act – Inmates and Visitors policy outlines these practices. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.16 (c) Miami-Dade DSOP: 12-007 Americans with Disabilities Act – Inmates and Visitors policy illustrates the facility does not rely on inmate interpreters, inmate readers, or other types of inmate assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate’s safety. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in English, Creole, and Spanish. The agency also has a Memorandum of Understanding for contracted language interpreter services. The agency provided multiple invoices for the use of the interpreter service. This was confirmed during interviews with random staff and targeted inmates. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.17: Hiring and promotion decisions

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

115.17 (a)

- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No
- Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)? Yes No
- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in

the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse? Yes No

- Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the question immediately above? Yes No

115.17 (b)

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

115.17 (c)

- Before hiring new employees, who may have contact with inmates, does the agency perform a criminal background records check? Yes No
- Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse? Yes No

115.17 (d)

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

115.17 (e)

- Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees? Yes No

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? Yes No
- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees? Yes No

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

115.17 (g)

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

115.17 (h)

- Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.) Yes No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **Miami-Dade Corrections and Rehabilitation Department Rules 2.2.000 Rules-General Conduct and Responsibilities**
3. **DSOP: 6-049 Promotional Procedures**
4. **S.O.P. PMB 13-76 Correctional Officer Personnel Selection and Background Process**
5. **Employee Human Resource Files (25)**
6. **Initial Background Checks (25)**
7. **Contract Employee Background Checks (5)**
8. **Volunteer Background Checks (5)**
9. **Promotional PREA Documentation (5)**
10. **4-Year Employee Background Checks (25)**
11. **PREA Applicant Questionnaire**

B. Interviews

1. **Human Resource Staff (2)**
2. **Background Investigator**
3. **PREA Manager**

C. Other

1. Auditor Observation

115.17 (a) Miami-Dade DSOP: 6:049 Promotional Procedures Miami-Dade S.O.P. PMB 13.76 Correctional Officer Personnel Selection and Background Process (page 4) outline that Miami-Dade Corrections and Rehabilitation Department does not hire or promote anyone who may have contact with inmates, and does not enlist the services of any contractor or volunteer who may have contact with inmates, who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution, has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse; or has been civilly or administratively adjudicated to have engaged in the activity described above. The facility completes thorough background checks on all applicants as well as a background check is completed on all new applicants confirming compliance. The Agency S.O.P. PMB 13-79 outlines background investigations as:

- Criminal History Check – NCIC, Local. Florida Criminal Information Center, and the Florida Comprehensive Case Information System
- Sexual Misconduct Checks and Questionnaire
- Document Verification
- Other Law Enforcement Agency Records (if applicable)
- Personal References
- Neighborhood Check
- Driver's License History
- Military History
- Credit History
- Polygraph

This practice was confirmed during interviews with the agency's Human Resource Staff and the Background Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (b) Miami-Dade Corrections and Rehabilitation Department considers any incidents of sexual harassment in determining whether to hire or promote anyone or to enlist the services of any contractor or volunteer, who may have contact with inmates. This was confirmed during the review of five human resource files for contract employees. S.O.P. PMB 13-76 states:

"The investigator will instruct the applicant to complete and sign the Applicant Prison Rape Elimination Act (PREA) Questionnaire which includes the definition page, and the Rejection Guidelines as well as any other form acknowledging potential reasons for background file discontinuation. If any adverse information is discovered or if the applicant does not meet the minimum qualifications, the intake process will be discontinued."

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (c)-1 Miami-Dade Corrections and Rehabilitation Department requires a criminal background records check be completed before hiring any new employee. Twenty-five out of twenty-five Human Resource files confirmed this practice.

The Agency has eleven trained background investigators. Background investigations include:

- Criminal History Check – NCIC, Local. Florida Criminal Information Center, and the Florida Comprehensive Case Information System
- Sexual Misconduct Checks and Questionnaire
- Document Verification
- Other Law Enforcement Agency Records (if applicable)
- Personal References
- Neighborhood Check
- Driver's License History
- Military History
- Credit History
- Polygraph

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

(c)-2 Miami-Dade Corrections and Rehabilitation Department makes their best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any pending investigations of allegation of sexual abuse. The agency has eleven Background Investigators. Review of Human Resource files illustrated this practice. Four applicants had previously worked at a prior institution; both times, the Background Investigator had sent and received the prior documentation from the previous employer. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (d) Miami-Dade Corrections and Rehabilitation Department requires a criminal background records check be completed before enlisting the services of any contractor or volunteer who may have contact with the inmates. The agency has not utilized the services of volunteers during the past twelve months due to Covid concerns. Five out of five Jackson Medical Staff reviewed confirmed this practice. Five out of five volunteer records reviewed confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (e) Miami-Dade Corrections and Rehabilitation Department completes background checks every five years. There is a tracking system in place to monitor the process. Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy (page 1) outlines the requirements. The last five-year background checks were completed in the summer of 2023. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (f) Miami-Dade Corrections and Rehabilitation Department instills upon all employees a continuing affirmative duty to disclose any sexual misconduct as required by this standard. Each applicant must complete and sign the agency's PREA Applicant Questionnaire Form. The applicant signs the form acknowledging,

“Should you become involved in any incident of sexual abuse, sexual misconduct, or sexual harassment (on duty or off duty) after completion of this questionnaire, you are required to report such incurrence, including arrest(s), to the Personnel Management Bureau, Background Investigation Unit. Material omission regarding such misconduct, or provision of materially false information shall be grounds for disqualification and/or termination.”

File review showed that twenty-five out of twenty-five files contained a signed acknowledgment of this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (g) Miami-Dade Corrections and Rehabilitation Department Rules 2.2.000 Rules – General Conduct and Responsibilities (page 1) mandate that material omissions regarding sexual misconduct, and the provision of materially giving false information, are grounds for termination as required by this standard. The information is also on the agency’s PREA Applicant Questionnaire Form: the for specifically states:

“I understand that signing this questionnaire is an acknowledgement that I have read and understood relevant definitions and I have not withheld any information. Furthermore, I understand that any significant factors revealed on this questionnaire may result in the disqualification of my application.”

The PREA Manager stated there has not been any terminations of a contract employee for this circumstance in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.17 (h) Miami-Dade employment verification procedures requires that the agency shall provide information on substantiated allegations of sexual abuse or sexual harassment involving a current or former employee upon receiving a request from an institutional employer for whom such employee has applied to work. The Human Resource Staff stated the agency has not received such a request in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.18: Upgrades to facilities and technologies

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

115.18 (a)

- If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency’s ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)
 Yes No NA

115.18 (b)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Memorandum detailing all upgrades for each facility in the past ten years**

B. Interviews

- 1. PREA Coordinator**

C. Other

- 1. Auditor Observation**

115.18 (a) Miami-Dade Corrections and Rehabilitation Department requires when designing or acquiring any new facility and in planning any substantial expansion or modification of existing facilities, the agency shall consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse. The PREA Coordinator proved documentation of upgrades for each facility for the past ten years. During this audit cycle, there were substantial enhancements to the video technology at any of the facilities. All identified blind spots were addressed and staff as well as inmates/detainees confirmed during interviews they felt safer with the changes in place. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.18 (b) Miami-Dade Corrections and Rehabilitation Department requires when installing or updating a video monitoring system, electronic surveillance system, or other monitoring technology, the agency shall consider how such technology may enhance the agency's ability to protect inmates from sexual abuse. The PREA Coordinator proved documentation of upgrades for each facility for the past ten years. During this audit cycle, there were substantial enhancements to the video technology at this facility. All identified blind spots were addressed and staff as well as inmates/detainees confirmed

during interviews they felt safer with the changes in place. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

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

115.21 (a)

- If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)
 Yes No NA

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA
- Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) Yes No NA

115.21 (c)

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate? Yes No
- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? Yes No
- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? Yes No

- Has the agency documented its efforts to provide SAFEs or SANEs? Yes No

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? Yes No
- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA
- Has the agency documented its efforts to secure services from rape crisis centers? Yes No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? Yes No
- As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals? Yes No

115.21 (f)

- If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating 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.) Yes No NA

115.21 (g)

- Auditor is not required to audit this provision.

115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency *always* makes a victim advocate from a rape crisis center available to victims.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

Overall compliance determination based on:

A. Documentation

1. **Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol (Adjunct to MDCR Policy IP Interagency Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response.**
2. **Jackson Memorial Hospital Sexual Assault Consent Policy**
3. **Jackson Memorial Hospital Advocacy/Accompaniment Policy**
4. **Memorandum of Understanding with Miami-Dade Police Department**
5. **Memorandum of Understanding with Roxy Bolton Rape Treatment Center**
6. **Review of PREA Investigation Files**
7. **Miami-Dade Corrections and Rehabilitation Department Inmate Handbook**
8. **Jackson Health System Website (<https://jacksonhealth.org/rape-treatment>)**

B. Interviews

1. **Administrative Investigator**
2. **Roxy Bolton Rape Treatment Center Staff**
3. **Random Staff**
4. **Contracted Jackson Medical Staff**

C. Other

1. **Auditor Observation**

115.21 (a) and (b) Miami-Dade Corrections and Rehabilitation Department complies with all elements of this standard. Documented in Miami-Dade Sexual Assault Response Team Protocol (Adjunct to MDCR Policy IP Interagency Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Policy, the agency follows a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings. Miami-Dade Corrections and Rehabilitation Department conducts its own PREA administrative investigations and maintains a Memorandum of Understanding with the Miami-Dade Police Department for investigating all criminal complaints. The Miami-Dade Police Department investigates all PREA complaints for potential criminal activity and maintains a close working relationship with the County Prosecutor and the Miami-Dade Corrections and Rehabilitation

Department on each case. A Memorandum of Understanding between the Miami-Dade Correction and Rehabilitation Department and the Miami-Dade Police Department outlines each agency's responsibilities pertaining to sexual abuse investigations. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (c) Miami-Dade Corrections and Rehabilitation Department offers all victims of sexual abuse access to forensic medical examinations by Roxy Bolton Rape Treatment Center staff (signed in July 2017) without financial cost to the inmate, where evidentiary or medically appropriate. Such examinations are to be performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) as required. During the past twelve months, there was one inmate who alleged sexual abuse that constituted the need for a SANE exam. The exam was conducted. At the conclusion of the investigation, the PREA Investigator determined the allegation to be unfounded. An interview with the Roxy Bolton Rape Treatment Center staff confirmed this practice. The MDCR Inmate Handbook (page 4) advises potential victims of sexual assault they shall have access to advocates, pregnancy test, medical treatment, crisis counseling, at no charge. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (d) The Miami-Dade Corrections and Rehabilitation Department has entered into a Memorandum of Understanding with Roxy Bolton Rape Treatment Center (effective July 2017) which agrees to provide outside victim advocacies services to the inmates. The Jackson Health System Policy .008 Advocacy/ Accompaniment states sexual assault victim's forensic examination, treatment, and advocacy services are available 24 hours a day, 7 days a week, and 365 days a year. This information is also located on the agency's website at <http://jackson.health.org/rape-treatment>. The services of these victim advocates have not been requested or used by the inmates during this audit cycle. The MDCR Inmate Handbook (page 4) advises potential victims of sexual assault that they shall have access to advocates, pregnancy test, medical treatment, crisis counseling, at no charge. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (e) Miami-Dade Corrections and Rehabilitation Department has entered into a Memorandum of Understanding with Roxy Bolton Rape Treatment Center (effective July 2017); which agrees to provide outside victim advocacies services to the inmates upon request. Interviews with multiple Miami-Dade Corrections and Rehabilitation Department staff members and medical staff members confirmed this practice. The MDCR Inmate Handbook (page 4) advises potential victims of sexual assault they shall have access to advocates, pregnancy test, medical treatment, crisis counseling, at no charge. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.21 (f) The Miami-Dade Corrections and Rehabilitation Department is responsible for administrative investigations. Criminal investigations are conducted by the Miami-Dade Police Department. This was confirmed during an interview with the PREA Coordinator and during review of all PREA investigation files from the past twelve months. Therefore, this part of the standard is not applicable to this facility.

115.21 (g) A Memorandum of Understanding between the Miami-Dade Correction and Rehabilitation Department and the Miami-Dade Police Department outlines each agency's responsibilities pertaining to sexual abuse investigations.

115.21 (h) Miami-Dade Corrections and Rehabilitation Department offers all victims of sexual abuse access to forensic medical examinations by Roxy Bolton Rape Treatment Center staff (signed in July 2017) without financial cost to the inmate, where evidentiary or medically appropriate. The MDCR

Inmate Handbook (page 4) advises potential victims of sexual assault they shall have access to advocates, pregnancy tests, medical treatment, and crisis counseling, at no charge. Roxy Bolton Rape Treatment Center also supplies victim advocates upon request for the victims of sexual abuse. This was confirmed during two interviews with contracted medical staff. The Jackson Health System Policy .008 Advocacy/ Accompaniment states sexual assault victims' forensic examination, treatment, and advocacy services are available 24 hours a day, 7 days a week, and 365 days a year. This information is also located on the agency's website at <http://jackson.health.org/rape-treatment>. Therefore, this part of the standard is not applicable to this facility.

Standard 115.22: Policies to ensure referrals of allegations for investigations

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

115.22 (a)

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

115.22 (b)

- Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? Yes No
- Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? Yes No
- Does the agency document all such referrals? Yes No

115.22 (c)

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

115.22 (d)

- Auditor is not required to audit this provision.

115.22 (e)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
- 2. Memorandum of Understanding with Miami-Dade Police Department**
- 3. Review of PREA Investigation Files**

B. Interviews

- 1. PREA Coordinator**
- 2. PREA Administrative Investigator**

C. Other

1. Auditor Observation

115.22 (a) The Miami-Dade Corrections and Rehabilitation Department is required to investigate all PREA complaints received at this facility. Miami-Dade Corrections and Rehabilitation Department has a Memorandum of Understanding with the Roxy Bolton Rape Treatment Center. All potential criminal activity is referred to the Miami-Dade Police Department; MDCR has maintained a Memorandum of Understanding with Miami-Dade Police Department since 2014 to investigate criminal complains. There were eighty-six cases of sexual misconduct or sexual harassment referred and investigated during this audit cycle according to the agency's PREA Administrative Investigators. This was also corroborated during the review of PREA investigative files. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.22 (b) All PREA allegations are investigated by the Miami-Dade Corrections and Rehabilitation Department for potential criminal activity. If it is determined that the allegation involves potential criminal activity, it is referred to the Miami-Dade Police Department for investigation and prosecution as warranted. This was confirmed during an interview with the PREA Coordinator. This policy is published on the agency website <https://www.miamidade.gov/global/corrections/home.page> as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.22 (c) The Miami-Dade Corrections and Rehabilitation Department refers all criminal allegations for investigation to the designated Miami-Dade Police Department. This was confirmed during an interview with the PREA Coordinator. The requirements of this part of the standard are outlined in the

policy that is posted on the website <https://www.miamidade.gov/global/corrections/home.page>. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

TRAINING AND EDUCATION

Standard 115.31: Employee training

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

115.31 (a)

- Does the agency train all employees who may have contact with inmates on its zero-tolerance policy for sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on how to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures? Yes No
- Does the agency train all employees who may have contact with inmates on inmates' right to be free from sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment? Yes No
- Does the agency train all employees who may have contact with inmates on the dynamics of sexual abuse and sexual harassment in confinement? Yes No
- Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims? Yes No
- Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse? Yes No
- Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates? Yes No
- Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities? Yes No

115.31 (b)

- Is such training tailored to the gender of the inmates at the employee's facility? Yes No
- Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa? Yes No

115.31 (c)

- Have all current employees who may have contact with inmates received such training?
 Yes No
- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? Yes No
- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? Yes No

115.31 (d)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

Overall compliance determination based on:

A. Documentation

1. **Staff Training Files**
2. **PREA Lesson Plan, Requirements, and PowerPoint**
3. **Staff Training Sign-In Sheets**

B. Interviews

1. **Training Staff**
2. **Random Staff**

C. Other

1. Auditor Observation

115.31 (a) Miami-Dade Corrections and Rehabilitation Department requires all their employees who have contact with inmates be trained on:

- (1) Its zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Inmates' right to be free from sexual abuse and sexual harassment;
- (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;
- (6) The common reactions of sexual abuse and sexual harassment victims;
- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with inmates;
- (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

All employees must complete a 26-week state academy; Miami-Dade staff will then complete a 3-4 week field training requirement.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.31 (b) The training is tailored to both the male and female gender of the inmates at Miami-Dade Corrections and Rehabilitation Department. This was confirmed after reviewing the training lesson plan and PowerPoint and an interview with the Training Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.31 (c) The training staff provided a report containing all staff that had been PREA trained which confirmed the requirements needed to meet the standard and proved that all current staff was trained within one year of the effective date of the PREA standards. All staff receives annual refresher PREA training during in-service which meets the requirements of this standard. A review of twenty-five employee training files illustrated that all twenty-five were found to be in compliance with the policy. Therefore, the facility meets this part of the standard during this audit.

115.31 (d) Miami-Dade Corrections and Rehabilitation Department documents, through employee examination on Miami-Dade PREA procedures, demonstrate all employees understand the training they have received. Twenty-five out of twenty-five training file reviews confirmed this practice. Staff at each facility demonstrated a clear understanding of:

- (1) The agency's zero-tolerance policy for sexual abuse and sexual harassment;
- (2) How to fulfill their responsibilities under agency sexual abuse and sexual harassment prevention, detection, reporting, and response policies and procedures;
- (3) Inmates' right to be free from sexual abuse and sexual harassment;
- (4) The right of inmates and employees to be free from retaliation for reporting sexual abuse and sexual harassment;
- (5) The dynamics of sexual abuse and sexual harassment in confinement;

- (6) The common reactions of sexual abuse and sexual harassment victims;
- (7) How to detect and respond to signs of threatened and actual sexual abuse;
- (8) How to avoid inappropriate relationships with inmates;
- (9) How to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates; and
- (10) How to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.32: Volunteer and contractor training

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

115.32 (a)

- Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency’s sexual abuse and sexual harassment prevention, detection, and response policies and procedures? Yes No

115.32 (b)

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

115.32 (c)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
- 2. Training Files**
- 3. Orientation Video and Orientation Video Checklist**

B. Interviews

- 1. Contract Employee Interviews**
- 2. Training Staff**

C. Other

1. Auditor Observation

115.32 (a) Miami-Dade Corrections and Rehabilitation Department policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 14) ensures all volunteers and contractor employees who have contact with inmates have been trained on their responsibilities under Miami-Dade Corrections and Rehabilitation Department's sexual abuse and sexual harassment prevention, detection, and response policies and procedures. Miami-Dade Orientation Video and Video Checklist given to all volunteers and contractors. Interviews with two contractors (no volunteers were interviewed due to Covid) confirmed they had been properly trained. The signature on the Miami-Dade Orientation Checklist acknowledges contract employee has:

- received and understands the PREA training provided
- been given the opportunity to ask questions on any topic(s) {including PREA}
- acknowledged they understand their responsibilities to ensure adherence to all respective departmental rules, regulations, and policies.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.32 (b) The level and type of training provided to volunteers and contractors is based on the services they provide and level of contact they have with inmates, but all volunteers and contractors who have contact with inmates are notified of Miami-Dade's zero-tolerance policy regarding sexual abuse and sexual harassment and their requirements to report such incidents. A review of contract employee training records also confirmed the training. The agency has not utilized the services of volunteers in the past twelve months due to Covid concerns. The signature on the Miami-Dade Orientation Checklist acknowledges contract employee has:

- received and understands the PREA training provided
- been given the opportunity to ask questions on any topic(s) {including PREA}
- acknowledged they understand their responsibilities to ensure adherence to all respective departmental rules, regulations, and policies.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.32 (c) Miami-Dade Corrections and Rehabilitation Department documents through signature on the Miami-Dade Orientation Video Checklist, that volunteers and contractors understand the training they have received. A review of contract employees' training files confirmed this practice. The agency

has not utilized the services of volunteers in the past twelve months due to Covid concerns. The signature on the Miami-Dade Orientation Checklist acknowledges contract employee has:

- received and understands the PREA training provided
- been given the opportunity to ask questions on any topic(s) {including PREA}
- acknowledged they understand their responsibilities to ensure adherence to all respective departmental rules, regulations, and policies.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.33: Inmate Education

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

115.33 (a)

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

115.33 (b)

- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents? Yes No
- Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents? Yes No

115.33 (c)

- Have all inmates received the comprehensive education referenced in 115.33(b)?
 Yes No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?
 Yes No

115.33 (d)

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

115.33 (e)

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

115.33 (f)

- In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Policy OP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
2. **DSOP: 17-005 Limited English Proficiency**
3. **Miami-Dade DSOP: 5-007 Records Retention and Disposition**
4. **MDCR P.O. Number RPSB 20-001 Police Records Specialist**
5. **Inmate Orientation Statement**
6. **Inmate Handbook (pages 2-4)**
7. **Signage**
8. **PREA Brochure**

9. PREA Orientation Video

B. Interviews

- 1. Random Inmates**
- 2. Random Staff**
- 3. PREA Coordinator**

C. Other

1. Auditor Observation

115.33 (a) During the intake process, inmates receive information explaining Miami-Dade Corrections and Rehabilitation Department's zero-tolerance Inmate Handbook (pages 2-4) regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates sign the Orientation Statement that they have received the Miami-Dade Corrections and Rehabilitation Department "Sexual Battery/Abuse/Harassment Awareness Brochure which is available in English, Creole and Spanish. This was confirmed during an interview with the Classification Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (b) Within 30 days of intake, Miami-Dade Corrections and Rehabilitation Department provides a comprehensive education to the inmates, administered by video, regarding their rights to be free from sexual abuse and sexual harassment and to be free from retaliation for reporting such incidents, and regarding agency policies and procedures for responding to such incidents. The additional education is provided in the form of a video (both English and Spanish). The video "PREA- What you need to know" was created by the PREA Resource Center, Miami-Dade Correction and Rehabilitation Department, and Just Detention International. This practice is outlined in the Miami-Dade Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response. There were fourteen inmates who did not remember if they had watched the PREA orientation video utilized for the more in-depth training. Intake files did show all fourteen inmates had signed a form acknowledging they had watched the video or were required to watch the video. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (c) Miami-Dade Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response mandates that Miami-Dade Corrections and Rehabilitation Department provides such education within one year of the effective date of the PREA standards to all its inmates, and provides education to inmates upon transfer as required by this standard. This was confirmed during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (d) Miami-Dade Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response mandates that Miami -Dade Corrections and Rehabilitation Department provides inmate education in formats accessible to all inmates, including those who are limited English proficient, deaf, visually impaired, or otherwise disabled, as well as to inmates who have limited reading skills. The facility has an agreement with a contracted interpreter service. PREA handouts, PREA postings, PREA education video, and the inmate handbook are provided in English, Creole and Spanish. The facility also makes available a Purple phone at each facility. There was seven blind/low vision and two

deaf/hard of hearing inmates incarcerated at the time of the onsite visit. Both inmates were able to understand the auditor during the interview; and both displayed a working knowledge of the agency's zero tolerance against sexual abuse and sexual harassment, and were able to list the internal and external modes of reporting. Twenty-three limited English proficient inmates had documentation in their intake file showing they all had received a PREA Brochure, properly screened and watched the PREA education video. MDCR DSOP: 17-005 Limited English Proficiency policy stipulates the specific requirements for LEP orientation. Twenty out of the twenty-three LEP inmates stated they felt safe in the facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (e) MDCR DSOP: 5-007 Records Retention requires inmate's participation records in PREA educational sessions are kept for four years. MDCR P.O. Number 20-001 requires PRS shall receive signed PREA Comprehensive Inmate Education Handouts form RPSB Supervisor and complete the following steps daily:

1. Updates the Criminal Justice Information System (CJIS) Prea screen to document the inmt's participation/non-participation
2. Archives the handouts on the RPSB Shared Drive

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.33 (f) Miami-Dade Corrections and Rehabilitation Department does provide the inmates with posters, pamphlets, and an inmate handbook in English, Creole and Spanish outlining the zero-tolerance policy regarding sexual abuse and sexual harassment and how to report incidents or suspicions of sexual abuse or sexual harassment. Inmates/detainees are given the "Miami-Dade Sexual Battery/Abuse/Harassment Awareness Brochure". The agency has "Zero Tolerance" Posters located in all common areas of the facility. Records review showed that twelve out of twenty-three LEP inmates received education information in a Spanish format; twenty out of the twenty-three LEP inmates stated they felt safe in the facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.34: Specialized training: Investigations

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

115.34 (a)

- In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators 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 No NA

115.34 (b)

- Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

- Does this specialized training include proper use of Miranda and Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

- Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

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

115.34 (c)

- Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

115.34 (d)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Policy DSOP: 4-015 Complaints, Investigations and Dispositions**
2. **Vector Solutions Training Records**
3. **National Institute of Corrections Training Certificates**
4. **Memorandum of Understanding with Miami-Dade Police Department**

B. Interviews

1. Administrative PREA Investigators (2)

C. Other

1. Auditor Observation

115.34 (a) In addition to the general training provided to all employees Miami-Dade Corrections and Rehabilitation Department ensures that the PREA Administrative Investigator received training in conducting investigations in confinement settings. This was confirmed during a review of the Investigation's training records. The Miami-Dade Police Department conducts all PREA criminal investigations; MDCR has maintained a Memorandum of Understanding with MDPD since 2014. Investigators have specialized training for sexual assault in a confinement setting. The Investigators have multiple years of experience each have attended countless trainings pertaining to their job duties. DSOP: 4-015 Complaints, Investigations, and Dispositions policy requires all administrative PREA investigators receive specialized training for sexual abuse and sexual harassment in a confinement setting. Department investigations complete a specialized course through the National Institute of Corrections. A review of training records confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.34 (b) Specialized training includes techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings, and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. The Investigators have multiple years of experience and have attended countless trainings pertaining to their job duties. DSOP: 4-015 Complaints, Investigations, and Dispositions policy requires all administrative PREA investigators receive specialized training for sexual abuse and sexual harassment in a confinement setting. Department investigations complete a specialized course through the National Institute of Corrections. A review of training records confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.34 (c) Miami-Dade Corrections and Rehabilitation Department maintains Memorandum of Understanding with Miami-Dade Police Department for conducting sexual abuse investigations. The auditor found the facility PREA Investigators to be very knowledgeable and well versed in the PREA standards as they pertain to investigations and evidentially standards. The auditor examined numerous PREA investigation files, each was found to be very organized, thorough, and detailed. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.35: Specialized training: Medical and mental health care

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

115.35 (a)

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual

abuse and sexual harassment? (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 No NA

- 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 No NA
- 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 No NA
- 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 No NA

115.35 (b)

- If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.) Yes No NA

115.35 (c)

- Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (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 No NA

115.35 (d)

- 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 No NA
- 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 No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
2. **Training Records**
3. **PowerPoint**

B. Interviews

1. **Medical Staff (2)**

C. Other

1. **Auditor Observation**

115.35 (a) Jackson Health Service provides PREA Specialized Medical/Mental Health training video, curriculum provided, training file Miami-Dade Corrections and Rehabilitation Department review and staff interviews revealed the agency has provided specialized training to all its medical and mental health staff on how to detect and assess signs of sexual abuse and sexual harassment, how to preserve physical evidence, 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. A review of five training records and interviews with two Miami-Dade contracted Jackson Health System Medical Staff members confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.35 (b) The medical staff at this facility does not conduct forensic exams. This was confirmed during interviews with the Medical Staff and the PREA Coordinator. Miami-Dade Corrections and Rehabilitation Department has a Memorandum of Understanding with Roxcy Bolton Rape Treatment Center for SANE/SAFE examinations. Exams are conducted at Jackson Memorial Medical Center. Therefore, this part of the standard is not applicable to this facility.

115.35 (c) The agency maintains documentation that all medical and mental health practitioners have received specialized training. The agency utilizes the training PowerPoint entitled; Miami-Dade Corrections and Rehabilitation Department and Corrections Health Services – Inmate Sexual Battery/Abuse/Harassment Prevention and Response (PREA). A review of five training records and

interviews with two Miami-Dade staff members confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.35 (d) Contracted medical and mental health care practitioners with Miami-Dade also receive the annual training mandated for all employees, contractors, and volunteers. A review of five training records and interviews with two Miami-Dade staff members confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

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

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No
- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? Yes No

115.41 (b)

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

115.41 (c)

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

115.41 (d)

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (1) Whether the inmate has a mental, physical, or developmental disability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate? Yes No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate's criminal history is exclusively nonviolent? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming (the facility affirmatively asks the inmate about his/her sexual orientation and gender identity AND makes a subjective determination based on the screener's perception whether the inmate is gender non-conforming or otherwise may be perceived to be LGBTI)? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate's own perception of vulnerability? Yes No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? Yes No

115.41 (e)

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

115.41 (f)

- Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening? Yes No

115.41 (g)

- Does the facility reassess an inmate's risk level when warranted due to a referral?
 Yes No
- Does the facility reassess an inmate's risk level when warranted due to a request?
 Yes No
- Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?
 Yes No
- 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 No

115.41 (h)

- Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?
 Yes No

115.41 (i)

- Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive information is not exploited to the inmate's detriment by staff or other inmates?
 Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Classification Manual**
2. **MDCR S.O.P. Number 13-001 Classification Procedures**
3. **Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
4. **DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates**
5. **Inmate PREA Screening Tool**
6. **PREA Reassessment Form**
7. **Inmate Handbook/PREA Brochure**

B. Interviews

- 1. Random Inmates**
- 2. Screening Staff**
- 3. PREA Coordinator**

C. Other

1. Auditor Observation

115.41 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 1) mandates that Miami-Dade Corrections and Rehabilitation Department ensures that all inmates are assessed during intake and upon transfer to another facility for risk of being sexually abused by other inmates or sexually abusive toward other inmates. Random inmate interviews confirmed this practice. Inmates sign a facility property receipt, indicating they have received the facility's brochure on PREA. Sixteen inmates interviewed stated they did not remember receiving a PREA brochure upon intake. The review of their intake files showed where each had signed for the brochure as a facility-issued item. The brochure (Miami-Dade Corrections and Rehabilitation Department Sexual Battery/Abuse/Harassment Awareness Brochure outlines basic information on the topics of sexual assault and sexual harassment, the agency's zero tolerance, reporting procedures and the victim advocacy support available. The auditor recommended the PREA team review the process of issuing the PREA Brochures to ensure daily compliance with the agency's policy. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (b) The Miami-Dade Corrections and Rehabilitation Department provided documentation proving compliance with the standard that all inmates are screened for their risk of being sexually abused by other inmates or being sexually abusive toward other inmates normally upon intake but no later than 72 hours of arrival at the facility. This process is documented on intake screening instrument (Miami-Dade) Sexual Abuse Screening Tool is a decision tree model (with input from Intake Staff, Classification Staff, Medical Intake Staff and Mental Health Staff) accompanied with a software-based algorithm Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (c) Based on the documentation provided and inmate file reviews the facility utilizes an objective screening instrument that covers all aspects of this standard (Miami-Dade) Sexual Abuse Screening Tool is a decision tree model (with input from Intake Staff, Classification Staff, Medical Intake Staff, and Mental Health Staff) accompanied with a software-based algorithm. Review of Classification files confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (d) The intake screening instrument (Miami-Dade) Sexual Abuse Screening Tool is a decision tree model (with input from Intake Staff, Classification Staff, Medical Intake Staff and Mental Health Staff) accompanied with a software-based algorithm which considers, 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;
- (2) The age of the inmate;
- (3) The physical build of the inmate;

- (4) Whether the inmate has previously been incarcerated;
- (5) Whether the inmate's criminal history is exclusively nonviolent;
- (6) Whether the inmate has prior convictions for sex offenses against an adult or child;
- (7) Whether the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender nonconforming;
- (8) Whether the inmate has previously experienced sexual victimization;
- (9) The inmate's own perception of vulnerability; and
- (10) Whether the inmate is detained solely for civil immigration purposes.

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (e) The initial screening considers prior acts of sexual abuse, prior convictions for violent offenses, and a history of prior institutional violence or sexual abuse, as known to Miami-Dade Corrections and Rehabilitation Sexual Abuse Screening Tool is a decision tree model (with input from Intake Staff, Classification Staff, Medical Intake Staff and Mental Health Staff) accompanied with a software-based algorithm. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (f) Miami-Dade Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 4) mandates within 30 days from the inmate's arrival, the Miami-Dade Corrections and Rehabilitation Department will reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by Miami-Dade Corrections and Rehabilitation Department since the intake screening. A designated Facility Corporal completes a follow-up interview with each inmate within 30 days to determine if additional information is available. The information is forwarded to the appropriate Facility PREA Manager and then to the agency PREA Coordinator for quality assurance purposes. This process is documented on the Miami-Dade Corrections and Rehabilitation Department PREA Reassessment Form. A review of Classification files confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (g) Miami-Dade Policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 4) mandates Miami- Dade Corrections and Rehabilitation Department will reassess an inmate's risk level when warranted due to a referral, request, incident of sexual abuse, or receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness. A review of rescreening showed there was a clear handoff from the PREA Manager and the Screening staff, when circumstances warranted a reassessment. Two such rescreening's were reviewed during the onsite visit. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (h) Miami-Dade S.O.P. Number 13-001 Classification Procedures (page 7) and DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates Policy mandates Miami- Dade Corrections and Rehabilitation Department does not discipline inmates for refusing to answer screening questions or not disclosing complete information. This was confirmed during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.41 (i) Miami-Dade Corrections and Rehabilitation Department implements appropriate controls on the dissemination 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. Based on policy review, interview with the PREA Coordinator and interviews with the staff responsible for

completing the screening, all information gathered on the screening instrument is restricted to staff making housing, work and program assignments. Staff responsible for inmate movements have access to see who is listed as an aggressor and/or a victim; lists are maintained in the agency's Jail Management System. The auditor would recommend a more robust inmate management software system. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.42: Use of screening information

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

115.42 (a)

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

115.42 (b)

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

115.42 (c)

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

- When making housing or other program assignments for transgender or intersex inmates, does the agency consider on a case-by-case basis whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems?
 Yes No

115.42 (d)

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

115.42 (e)

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

115.42 (f)

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

115.42 (g)

- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.) Yes No NA
- Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)
 Yes No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Miami-Dade S.O.P. Number 13-001 Classification Procedures**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
3. **DSOP: 19-005 Objective Jail Classification**
4. **DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates**
5. **PREA Screening Tool**

B. Interviews

1. **Random Inmates**
2. **Self-Identified LBGTI Inmates (20)**
3. **Transgender Inmates (8)**
4. **Random Staff**
5. **PREA Managers**

C. Other

1. Auditor Observation

115.42 (a) Miami-Dade Corrections and Rehabilitation Department uses information from the risk screening to decide housing, bed, work, education, and program assignments with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive. This was confirmed during a review of policy and during an interview with the PREA Managers. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy (page 2) requires Miami-Dade Corrections and Rehabilitation Department makes individualized determinations about how to ensure the safety of each inmate. This was confirmed during a review of policy and during an interview with the PREA Managers. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (c) Miami-Dade Corrections and Rehabilitation Department DSOP: 19-005 Objective Jail Classification policy outlines the procedures to be followed in deciding whether to assign a transgender inmate to a facility for male or female inmates, and the process for making housing and programming assignments, on case-by-case basis as required by this standard. Based on interview with the twenty self-identified LBGTI inmates housed with the four facilities, the inmate generally feeling safe at the

facility and felt staff considered the inmate's safety when making housing and programming assignments. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy (PREA) (page 2) and DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates (page 6) documents Miami-Dade Corrections and Rehabilitation Department procedures for placement and programming assignments of each transgender or intersex inmate being reassessed at least twice per year to review any threats to safety experienced by the inmate as required by this standard. Based on interviews with the twenty self-reported LBGTI inmates housed within each facility, the inmates generally feeling safe at the facility and felt staff considered the inmate's safety when making housing and programming assignments. The inmates also confirmed the PREA Managers always inquire about the inmate's safety. Documentation provided revealed that a review was conducted and documented every six months as required. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (e) Miami-Dade Corrections and Rehabilitation Department requires that a transgender and intersex inmate's own views regarding their own safety be given serious consideration. Based on interview with twenty self-identified LBGTI inmates housed with each facility, the inmates generally feeling safe at the facility and felt staff considered the inmate's safety regarding housing assignments. Once a transgender inmate is processed into the facility, a multi-disciplinary team reviews the inmates housing, programming and worker status based on the inmates' own views, medical and mental health history, prior institutional behavior record and programming needs. The multi-disciplinary team will then make an individualized assessment. Eight transgender inmates interviewed confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (f) Miami-Dade DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmate Policy (page 7) requires that Miami-Dade Corrections and Rehabilitation Department transgender and intersex inmates be given the opportunity to shower separately from other inmates. The eight self-identified transgender inmates confirmed during interview with this auditor being given the opportunity to shower separately. The decision for housing and programs placement for a transgender inmate is documented on the Miami-Dade Corrections and Rehabilitation Department's in the jail software. The auditor recommended the opportunity to shower separately should be logged in the appropriate red log book. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.42 (g) Miami-Dade DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmate Policy (page 5) stipulates that Miami-Dade Corrections and Rehabilitation Department does not place lesbian, gay, bisexual, transgender, or intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status, unless such 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 such inmates. This was confirmed by the auditor's observation during the onsite visit, interview with twenty self-identified LBGTI inmates and discussion with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.43: Protective Custody

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

115.43 (a)

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

115.43 (b)

- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? Yes No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? Yes No
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the opportunities that have been limited? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the duration of the limitation? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA
- If the facility restricts any access to programs, privileges, education, or work opportunities, does the facility document the reasons for such limitations? (N/A if the facility *never* restricts access to programs, privileges, education, or work opportunities.) Yes No NA

115.43 (c)

- Does the facility assign inmates at high risk of sexual victimization to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged? Yes No
- Does such an assignment not ordinarily exceed a period of 30 days? Yes No

115.43 (d)

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

115.43 (e)

- In the case of each inmate who is placed in involuntary segregation because he/she is at high risk of sexual victimization, does the facility afford a review to determine whether there is a continuing need for separation from the general population EVERY 30 DAYS? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmate Policy**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response**
3. **DSOP: 12-002 Inmate Administrative and Disciplinary Confinement**

B. Interviews

1. **Random Staff**
2. **Random Inmates**
3. **PREA Coordinator**

C. Other

1. **Auditor Observation**

115.43 (a) Miami-Dade DSOP: 18-017 Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates (page 7) states that inmates/detainees at high risk for sexual victimization are not placed 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. These policies outline the procedures to ensure compliance with this standard. Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose

during the past twelve months at this facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.43 (b) Miami-Dade DSOP: 12-002 Inmate Administrative and Disciplinary Confinement (page 1) stipulates that inmates placed in segregated housing for this purpose have access to programs, privileges, education, and work opportunities to the extent possible. If Miami-Dade Corrections and Rehabilitation Department restricts access to programs, privileges, education, or work opportunities, Miami-Dade Corrections and Rehabilitation Department documents the opportunities that have been limited, the duration of the limitation; and the reasons for such limitations. This was confirmed during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.43 (c) Miami-Dade Corrections and Rehabilitation Department IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 7) states the agency assigns such inmates to involuntary segregated housing only until an alternative means of separation from likely abusers can be arranged, and such an assignment does not ordinarily exceed a period of 30 days. Staff and inmate interviews revealed no incidents of involuntary segregated housing being used for this purpose during the past twelve months at this facility. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

REPORTING

Standard 115.51: Inmate reporting

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

115.51 (a)

- Does the agency provide multiple internal ways for inmates to privately report sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? Yes No
- Does the agency provide multiple internal ways for inmates to privately report staff neglect or violation of responsibilities that may have contributed to such incidents? Yes No

115.51 (b)

- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? Yes No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? Yes No

- Does that private entity or office allow the inmate to remain anonymous upon request?
 Yes No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? (N/A if the facility *never* houses inmates detained solely for civil immigration purposes)
 Yes No NA

115.51 (c)

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

115.51 (d)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **DSOP: 15-001 Inmate Grievance**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
3. **MDCR S.O.P Number 16-001 Intake Procedures**
4. **DSOP: 19-007 Detention of Foreign Nationals**
5. **Inmate Handbook (page 4)**
6. **PREA Brochure MDCR Sexual Awareness: Sexual Battery, Abuse, and Harassment**
7. **PREA Signage**
8. **MDCR Inmate Grievance Form**

B. Interviews

1. **PREA Coordinator**
2. **PREA Managers (4)**

C. Other

1. Auditor Observation

Based on Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 6), the Inmate Handbook, PREA Brochures, and posters provided to inmates were utilized to verify compliance with this standard. The following delineates the audit findings regarding this standard:

115.51 (a) Miami-Dade Corrections and Rehabilitation Department IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 6) provides multiple internal ways for inmates to report incidents of abuse or harassment: they include;

- Call Miami-Dade Corrections and Rehabilitation Department PREA hotline at (786) 263-6599 or *9027#
- Call the Florida Council Against Sexual Abuse at 888-956-7273
- Write Security and Internal Affairs Bureau at:
601 NW 1 Court, 17th Floor
Miami, FL 33126 or call:
(786) 263-6500
- Report to any staff, volunteer, contractor, chaplain, or medical or mental health staff
- Submit an emergency grievance on paper or through a kiosk where available
- Report to the PREA Coordinator or the appropriate Facility PREA Compliance Manager
- Tell a family member, friend, legal counsel, or anyone else outside the facility. They can report on the inmate's behalf by calling (305) 585-7273
- Call the Roxy Bolton Rape Treatment Center at *9022#
- Write a letter to Roxy Bolton Rape Treatment Center
1611 NW 12th Avenue
Miami, FL 33136

Posters are located in each housing unit and in all common areas in English, Creole, and Spanish outlining the multiple processes in which inmates can report sexual abuse and/or sexual harassment. The auditor successfully tested the phone system during the facility tour. Inmates are given a MDCR Sexual Awareness: Sexual Battery, Abuse, and Harassment Brochure; the brochure outlines the many different ways inmates can report sexual abuse and/or sexual harassment. The brochure is printed in English, Spanish, and Creole. Reporting modes are also available on page 4 of the Miami-Dade Correction and Rehabilitation Department Inmate Handbook. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (b) Miami-Dade Corrections and Rehabilitation Department provides at least one way for inmates to report abuse or harassment to a public or private entity or office that is not part of Miami-Dade Corrections and Rehabilitation Department, and that is able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials, allowing the inmate to remain anonymous upon request. The Miami-Dade Corrections and Rehabilitation Department has by Memorandum of Understanding provided the address and phone number for Roxy Bolton Rape Treatment Center to the inmates satisfying the requirements of this standard. The auditor successfully tested the phone system during the facility tour.

- Call the Roxy Bolton Rape Treatment Center at *9022#
- Write a letter to Roxy Bolton Rape Treatment Center
1611 NW 12th Avenue
Miami, FL 33136

MDCR S.O.P. 16-001 requires the Intake Supervisor to ensure that all arrested defendants identified as Foreign Nationals will have their respective Consulate notified upon request or in accordance with established guidelines. DSOP: 19-007, "Detention of Foreign Nationals" and all required documents is completed followed by an incident report. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 6) requires all staff to accept reports made verbally, in writing, anonymously and from third parties. All allegations shall be promptly documented in an incident report and reported to the supervisor. All staff and contractors have been trained in the mandatory reporting laws in the State of Florida; all confirmed this practice during interviews. This philosophy was collaborated during review of the agency's PREA investigation files. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.51 (d) Miami-Dade Corrections and Rehabilitation Department staff may privately report sexual abuse and sexual harassment to Miami-Dade Correction and Rehabilitation Department Internal Affairs Division or the PREA external telephone number. Informational posters are located throughout all facilities including; common areas, administration areas, and inmate housing areas. This information includes the telephone number and address of the Roxy Bolton Rape Treatment Center.

- Call the Roxy Bolton Rape Treatment Center at *9022#
- Write a letter to Roxy Bolton Rape Treatment Center
1611 NW 12th Avenue
Miami, FL 33136

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.52: Exhaustion of administrative remedies

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

115.52 (a)

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

115.52 (b)

- Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (c)

- Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) Yes No NA
- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) Yes No NA
- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) Yes No NA

- If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)
 Yes No NA

115.52 (f)

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)
 Yes No NA
- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) Yes No NA
- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)
 Yes No NA
- Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) Yes No NA
- Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA
- Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) Yes No NA

115.52 (g)

- If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.) Yes No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. DSOP: 15-001 Inmate Complaint/Grievance Process**
- 2. Grievance Form**
- 3. Inmate Grievance Response Appeal Process**
- 4. Inmate Handbook**

B. Interviews

- 1. PREA Coordinator**
- 2. Random Inmates**

C. Other

- 1. Auditor Observation of Grievance Process**

115.52 (a) According to Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 1) states the agency investigates any report of sexual abuse and takes appropriate actions whether or not such information is received in the form of a grievance. Interview with the PREA Coordinator and Random Inmates confirms this process. The agency is in compliance with this section of the standard.

115.52 (b) The Miami-Dade Correction and Rehabilitation Department DSOP: 15-001 Inmate Complaint/Grievance Process Policy (page 2) does not impose a time limit on when offenders/detainees may submit a grievance regarding an allegation of sexual abuse. An interview with the PREA Coordinator confirms this practice. The same information is also located in the MDCR Inmate Handbook on page 7. Therefore, the agency complies with this section of the standard.

115.52 (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy states the agency will ensure that offenders/detainees alleging sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint. According to Miami-Dade DSOP: 15-001 Inmate Complaint/Grievance Process (page 4), MDCR/IMP Staff receiving an inmate grievance regarding an inmate subject to a substantial risk of imminent sexual abuse, shall take immediate action to protect the inmate and notify the Shift Supervisor/Commander immediately for additional information. The inmate shall be present with an initial response within 8 hours and a final response with five calendar days. Additionally, such grievances will not be referred to the staff member who is the subject of the complaint. Therefore, the agency is in compliance with this section of the standard.

115.52 (d) According to Miami-Dade DSOP: 15-001 Inmate Complaint/Grievance Process (page 4), and the MDCR Inmate Handbook (pages 7-8) MDCR/IMP Staff receiving an inmate grievance regarding an inmate subject to a substantial risk of imminent sexual abuse, shall take immediate action to protect the inmate and notify the Shift Supervisor/Commander immediately for additional information. The inmate shall be present with an initial response within 8 hours and a final response with five calendar days. At any level of the administrative process, including the final level, if the complainant does not receive a response within the time allotted for reply, including any properly noticed extension, the inmate's complaint may consider the absence of a response to be a denial at this level. Interview with

the PREA Coordinator reiterates this process; therefore the agency is found to be in compliance with section of the standard.

115.52 (e) Miami-Dade DSOP: 15-001 Inmate Complaint/Grievance Process (page 2) states third parties including fellow inmates, staff members, family members, attorneys, and outside advocates, shall be permitted to assist inmates in filing requests for administrative remedies related to allegations of sexual abuse and shall also be permitted to file such requests on behalf of offenders/detainees. If the inmate declines to have the request processed on his or her behalf, the agency shall document the inmate's decision. The PREA Coordinator confirmed this process. Therefore, the agency complies with this section of the standard.

115.52 (f) The Miami-Dade DSOP: 15-001 Inmate Complaint/Grievance Process (page 4) states when an inmate is subject to a substantial risk of imminent threat of sexual abuse, the offender/detainee may file a grievance through the grievance process on the kiosk system and the grievance will be considered an emergency grievance. The initial response to the grievance must be made within 48 hours and the final determination must be made within 5 calendar days, except in circumstances of county holidays and significant events. The agency's immediate focus must be to take action to prevent potential sexual abuse. Corrective and protective action must be pursued promptly. Miami-Dade Correction and Rehabilitation Department DSOP: 15-001 Inmate Complaint/Grievance Process page 4, mandates that staff must treat the information as confidential, only to be revealed to their supervisors in the chain-of-command to ensure prompt action is taken interview with the PREA Coordinator confirms this practice; therefore, the agency complies with this standard.

Standard 115.53: Inmate access to outside confidential support services

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

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? Yes No
- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? (N/A if the facility *never* has persons detained solely for civil immigration purposes.) Yes No NA
- Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible? Yes No

115.53 (b)

- Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws? Yes No

115.53 (c)

- Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse? Yes No
- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **MDCR IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **Memorandum of Understanding with Roxy Bolton Rape Treatment Center**
3. **MDCR Inmate Handbook**
4. **PREA Postings**
5. **Orientation Video**
6. **DSOP 4-018 Quality Assurance**

B. Interviews

1. **Random Staff**
2. **Random Inmates**
3. **PREA Coordinator**

C. Other

1. **Auditor Observation**

115.53 (a) The agency has entered into a Memorandum of Understanding with the Roxy Bolton Rape Treatment Center which agrees to provide confidential outside victim advocacies services to the inmates at Miami-Dade Corrections and Rehabilitation Department. The mailing address and telephone number for this agency are made available to all inmates at the facility.

- Call the Roxy Bolton Rape Treatment Center at *9022#
- Write a letter to Roxy Bolton Rape Treatment Center
1611 NW 12th Avenue

Miami, FL 33136

- Call the Florida Council Against Sexual Violence 888-956-7273

Miami-Dade Corrections and Rehabilitation Department enables reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible. The auditor successfully tested the phone system. The person who answered the call, took the auditor through the process if an actual inmate had contacted them for assistance. The Victim Advocacy representative stated they did utilize the bi-lingual employees, if they received a call from a limited English Proficient inmate. The Victim Advocacy Representative stated the agency had received phone calls from inmates from Miami-Dade Correction and Rehabilitation Department; she advised due to confidentiality she was not allowed to provide any further information. Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy and the Inmate Handbook outlines this process. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.53 (b) Miami-Dade Corrections and Rehabilitation Department informs 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. All calls to the Roxy Bolton Rape Treatment Center are not recorded. The contact information is on postings throughout each facility; as well as, the Inmate Handbook. This was confirmed by the PREA Coordinator. The auditor successfully tested the phone system. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.53 (c) Miami-Dade Corrections and Rehabilitation Department maintains a Memorandum of Understanding with the Roxy Bolton Rape Treatment Center. DSOP: 4-018 Quality Assurance policy (page 3) states The Sexual Assault Response Team (SART) Coordinating Committee monitors compliance with PREA standard and MDCR policies related to sexual abuse. The committee reviews and revises policies training materials, Memorandum of Understanding, scope of work agreements, and contracts related to prevention and response to sexual abuse. The SART Coordinating Committee submits reviews and results of reviews to the TAAP Unit Supervisor. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.54: Third-party reporting

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

115.54 (a)

- Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment? Yes No
- Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. Memorandum of Understanding with Roxy Bolton Rape Treatment Center**
- 2. MDCR Sexual Battery/Abuse/Harassment Awareness Brochure**
- 3. Posting in the Visitation Area**

B. Interviews

- 1. PREA Coordinator**

C. Other

- 1. Agency Website**

115.54 (a) Miami-Dade Corrections and Rehabilitation Department provides multiple methods for receiving third-party reports of sexual abuse and sexual harassment on the facility's website at: [Corrections and Rehabilitation \(miamidade.gov\)](http://www.miamidade.gov). Methods include:

- Call the Roxcy Bolton Rape Treatment Center at *9022# (305-585-7173)
- Write a letter to Roxcy Bolton Rape Treatment Center
1611 NW 12th Avenue
Miami, FL 33136
[Roxcy Bolton Rape Treatment Center \(jacksonhealth.org\)](http://jacksonhealth.org)
- Call the Florida Council Against Sexual Violence 888-956-7273
www.fcasv.org

Roxcy Bolton Rape Treatment Center (RTC) is a non-profit, hospital-based sexual assault crisis center located on the Jackson Memorial Medical Center campus. The center is staffed with sexual assault nurse examiners (SANE-trained), who provide comprehensive, quality medical treatment. The center's victim advocates are available to provide support and crisis intervention, and short-term counseling services are offered by licensed clinicians. RTC is certified by the Florida Council Against Sexual Violence (FCASV), a statewide nonprofit organization committed to victims and survivors of sexual violence and the sexual assault crisis programs who serve them. All staff is sensitively trained to work with victims of sexual assault. RTC services are at no cost to the survivor and are completely confidential regardless of police involvement or reporting status.

The information available on the website explains how to report sexual abuse and sexual harassment on behalf of an inmate. The facility takes all reports seriously no matter how they are received and

investigates each reported incident. A review of PREA investigation files revealed that several investigations were started and completed based on third-party reports. The file review indicated each were properly investigated. The PREA Coordinator also confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT

Standard 115.61: Staff and agency reporting duties

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

115.61 (a)

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? Yes No
- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? Yes No

115.61 (b)

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

115.61 (c)

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? Yes No
- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? Yes No

115.61 (d)

- If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws? Yes No

115.61 (e)

- Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. Jackson Health Systems Policy CHS-015 Federal Sexual Reporting Regulations
2. DSOP: 4-015 Complaints, Investigations, and Dispositions
3. DSOP: 6-029 Discrimination, Harassment, and Retaliation Policy
4. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy

B. Interviews

1. Random Staff
2. PREA Managers
3. PREA Coordinator
4. Medical Staff

C. Other

1. PREA Response Card

115.61 (a) IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 1), MDCR DSOP: 6-029 Discrimination, Harassment, and Retaliation policy (page 1) and Jackson Memorial Health Systems policy CHS-015 Federal Sexual Assault Reporting Regulations (page 2) 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 Miami-Dade Corrections and Rehabilitation Department; retaliation against inmates or staff who reported such an incident; and any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation. Staff are required to keep a "MDCR PREA Response Card" on their person while on duty. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy and DSOP: 4-015 Complaints, Investigations and Dispositions policy (page 11) stipulates that

Miami-Dade Corrections and Rehabilitation Department requires apart from reporting to designated supervisors or officials, staff do not reveal 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. This was reiterated during an interview with the PREA Managers. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (c) Miami-Dade Corrections and Rehabilitation Department IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 10) requires medical and mental health practitioners to report sexual abuse immediately to the security staff supervisor. Medical and mental health practitioners are required to inform the inmates of their duty to report, and the limitations of confidentiality, at the initiation of services. Jackson Memorial Health Systems policy CHS-015 Federal Sexual Assault Reporting Regulations (page 2) mandates this process. This was confirmed during interviews with two Jackson Memorial Medical staff; each confirmed their knowledge of mandatory reporting laws in the state of Florida. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (d) MDCR DSOP: 6-029 Discrimination, Harassment, and Retaliation policy (page 1) mandates if the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, Miami-Dade Corrections and Rehabilitation Department reports the allegation to the designated state or local services agency. This was confirmed by the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.61 (e) Miami-Dade Corrections and Rehabilitation Department IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 6) and SOP: 4-015 Complaints, Investigations and Dispositions policy requires that reports all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to PREA Investigators as required. File review of random PREA investigation files confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.62: Agency protection duties

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

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy
2. Review of Investigation Files and Reports

B. Interviews

1. Random Staff

C. Other

115.62 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy and staff training requires all staff to take immediate action and staff acknowledged during their interviews the requirement of all staff to protect inmates when it is learned that an inmate at the Miami-Dade Corrections and Rehabilitation Department is subject to a substantial risk of imminent sexual abuse. The review of random PREA investigation files clearly illustrated that everyone from line staff, intermediate supervisors and the PREA Incident Review Team play specific roles in dealing with PREA allegations. Miami-Dade maintains an updated "keep separate" list at all times; this list is made available to all staff charged with the duty of housing movements. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.63: Reporting to other confinement facilities

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

115.63 (a)

- Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred? Yes No

115.63 (b)

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

115.63 (c)

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

115.63 (d)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
- 2. DSOP: 4-015 Complaints, Investigations, and Dispositions**

B. Interviews

- 1. PREA Coordinator**
- 2. Agency PREA Investigator**

C. Other

115.63 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 2) mandates that upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of Miami-Dade Corrections and Rehabilitation Department that received the allegation notifies the head of the facility or appropriate office where the alleged abuse occurred. This process is documented on memorandum. This process was corroborated during interviews with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.63 (b) and (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 2) mandates that such notification is provided as soon as possible, but no later than 72 hours after receiving the allegation, and all actions are thoroughly documented. Documentation review revealed that several such notifications have occurred during the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.63 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 7) and the DSOP: 4-015 Complaints, Investigations, and Dispositions policy (page 2) mandates that upon receiving a call from an outside facility that an inmate had been sexually abused while in the custody of the Miami-Dade Corrections and Rehabilitation Department; the allegation is referred immediately to PREA Investigators to be investigated. This was confirmed during interviews

with the PREA Coordinator and the PREA Investigators. The PREA Investigators stated they have not received any notification from another agency in the past twelve months. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.64: Staff first responder duties

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

115.64 (a)

- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?
 Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence? Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No
- Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence? Yes No

115.64 (b)

- If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **DSOP: 11-028 Preservation of a Crime Scene**
3. **Orientation Video**
4. **PREA Response Card**

B. Interviews

1. **Random Staff**
2. **Contract Employee**

C. Other

115.64 (a) Miami-Dade DSOP: 11-028 Preservation of a Crime Scene (pages 1-3), IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy and the PREA Response Card issued to all staff outlines the responsibilities of all staff members receiving an allegation of sexual abuse to follow these guidelines:

- (1) Separate the alleged victim and abuser;
- (2) Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;
- (3) If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating; and
- (4) 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, smoking, drinking, or eating. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.64 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy mandates when the first staff responder is not a security staff member, they shall advise the alleged victim not to take any actions that could destroy physical evidence, and then notify security staff immediately. The auditor confirmed compliance based on interviews with and training records of five contract employees. All random staff interviews confirmed staff is trained on their role and responsibility of a first responder. Two first responders were also interviewed; it was clear each understand the process as it is outlined in Miami-Dade IP-001 Inmate Sexual

Battery/Abuse/Harassment Prevention and Response policy. Staff are given a "PREA Response Card". The card outlines immediate steps to be taken by Sworn Staff, Non-Sworn Staff, Shift Supervisor/Command Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.65: Coordinated response

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

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and REponse Policy
2. Sexual Assault Response Team Protocol
3. PREA Response Card

B. Interviews

1. Random Staff
2. Incident Review Team Member

115.65 (a) Miami-Dade Corrections and Rehabilitation Department IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy has a very comprehensive written plan to coordinate actions taken in response to an incident of sexual abuse, among staff first responders, medical and mental health practitioners, investigators and facility leadership. The plan clearly defines the roles and responsibilities of each person involved and the procedures to be followed in detail. Interviews with Incident Review Team members confirmed their knowledge of the response plan.

Staff are given a "PREA Response Card". The card outlines immediate steps to be taken by Sworn Staff, Non-Sworn Staff, Shift Supervisor/Command Staff. The MDCR Sexual Assault Response Team Protocol is a 30-page document that outlines additional responses and protocols to allegations of sexual abuse. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

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

115.66 (a)

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

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. American Federation of State, County and Municipal Employees A.F.L.- C.I.O. General Employees Local 199 Collective Bargaining Agreement**
- 2. The Government Supervisors Association of Florida OPEIU, Local 100 – Professional Employees Collective Bargaining Agreement**
- 3. The Government Supervisors Association of Florida OPEIU, Local 100 – Supervisory Employees Collective Bargaining Agreement**
- 4. The Dade County Police Benevolent Association Rank and File Unit Agreement**
- 5. The Dade County Police Benevolent Association Law Enforcement Supervisory Unit Agreement**

B. Interviews

1. PREA Coordinator

115.66 (a) Employees are subject to disciplinary sanctions up to termination for violating Miami-Dade Corrections and Rehabilitation Department policies on sexual abuse and sexual harassment. This was confirmed during an interview with the PREA Coordinator. The five listed agreements do not limit the Miami-Dade Corrections and Rehabilitation Department'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. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.67: Agency protection against retaliation

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

115.67 (a)

- Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff? Yes No
- Has the agency designated which staff members or departments are charged with monitoring retaliation? Yes No

115.67 (b)

- Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services, for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations? Yes No

115.67 (c)

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? Yes No

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? Yes No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? Yes No
- Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? Yes No

115.67 (d)

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

115.67 (e)

- If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?
 Yes No

115.67 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
- 2. Compliance Manager Documentation/Memorandum**
- 3. DSOP: 6-029 Discrimination/Harassment/Retaliation**

B. Interviews

- 1. Random Staff**
- 2. Incident Review Team Member**

115.67 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (pages 11-12) to protect all inmates and staff at Miami-Dade Corrections and Rehabilitation Department who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff, and designates which staff members or departments are charged with monitoring retaliation. Monitoring is documented on departmental memorandum.

115.67 (b) Miami-Dade Corrections and Rehabilitation Department has multiple protection measures, such as housing changes or transfers for inmates, victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff that fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations. Monitoring is documented on departmental memorandum. Each facility's PREA Manager is the facility's Retaliation Monitor. The auditor recommends a standardized form be implemented to ensure consistency in each case, while following the language of the standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.67 (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (pages 11-12) calls for at least 90 days following a report of sexual abuse, Miami-Dade Corrections and Rehabilitation Department monitors the conduct and treatment of inmates or staff who reported the sexual abuse and 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, and act promptly to remedy any such retaliation. There are periodic status checks performed and documented. Miami-Dade Corrections and Rehabilitation Department's monitoring includes any inmate disciplinary reports, housing, or program changes, or negative performance reviews or reassignments of staff. Such

monitoring continues beyond 90 days if the initial monitoring indicates a continuing need. Each facility's PREA Manager is the that facility's Retaliation Monitor. Monitoring is documented on departmental memorandum. The auditor recommends a standardized form be implemented to ensure consistency in each case, while following the language of the standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.67 (d), (e), (f) DSOP: 6-029 Discrimination, Harassment, and Retaliation policy (page 2) and Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 12) state if any other individual who cooperates with an investigation expresses a fear of retaliation, Miami-Dade Corrections and Rehabilitation Department takes appropriate measures to protect that individual against retaliation. Miami-Dade's obligation to monitor shall terminate if the inmate is released from custody. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.68: Post-allegation protective custody

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

115.68 (a)

- Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy
- DSOP 12-022 Inmate Administrative and Disciplinary Confinement

B. Interviews

- Segregation Staff
- Random Inmates
- PREA Manager

C. Other

115.68 (a) Miami-Dade DSOP: 12-022 Inmate Administrative and Disciplinary Confinement Policy (page 1) and in accordance with interagency policy IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy states that Miami-Dade Corrections and Rehabilitation Department prohibits offenders who have alleged sexual abuse to be placed in involuntary segregated housing. Interviews with the PREA Managers and segregation staff revealed that involuntary segregation has not been used for this purpose in the past 12 months. The PREA Manager stated that if separation was required to protect the offender, they would be placed in segregation for no longer than 72 hours. Interviews with Segregation Security Staff and random inmates also confirmed this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

INVESTIGATIONS

Standard 115.71: Criminal and administrative agency investigations

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

115.71 (a)

- When the agency conducts its own investigations into allegations of sexual abuse and sexual harassment, does it do so promptly, thoroughly, and objectively? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA
- Does the agency conduct such investigations for all allegations, including third party and anonymous reports? [N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).] Yes No NA

115.71 (b)

- Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34? Yes No

115.71 (c)

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

115.71 (d)

- When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution? Yes No

115.71 (e)

- Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff? Yes No
- Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? Yes No

115.71 (f)

- Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse? Yes No
- Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? Yes No

115.71 (g)

- Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? Yes No

115.71 (h)

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

115.71 (i)

- Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years? Yes No

115.71 (j)

- Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? Yes No

115.71 (k)

- Auditor is not required to audit this provision.

115.71 (I)

- When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).) Yes No NA

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **DSOP: 4-015 Complaints, Investigations, and Dispositions**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
3. **DSOP: 11-015 Employee Association with Inmates, Ex-inmates or Criminal Element**
4. **Training Certificates and Vector Solutions Training Reports**

B. Interviews

1. **Agency Administrative Investigator**
2. **PREA Coordinator**
3. **PREA Manager**

C. Other

115.71 (a) DSOP: 4-015 Complaints, Investigations, and Dispositions Policy (page 1) and IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) mandate Miami-Dade Corrections and Rehabilitation Department PREA investigators conduct an investigation immediately when notified of an allegation of sexual abuse and sexual harassment. Miami-Dade Corrections and Rehabilitation Department has a multiple-layered investigation approach for Staff-on-Inmate Sexual Abuse allegations as a result of Florida State Statute 112.532, which states "the contents of the complaint and investigation shall remain confidential until such time as the employing law enforcement agency makes a final determination whether or not to issue a notice of disciplinary action consist of suspension with a loss of pay, demotion, or dismissal. Due to the state of emergency declared by the Governor of the State of Florida, Internal Affairs cannot compel staff to be interviewed for internal affairs investigation. If an allegation of sexual abuse for staff-on-inmate is made, the potential criminal component takes priority, the allegation will immediately be forwarded to the Miami-

Dade Police Department review. The investigative files were reviewed and it appeared that the investigations were conducted promptly, documented thoroughly, and objectively for all allegations, including third-party, and anonymous reports. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (b) Based on training curriculums provided, investigators' training file review, and investigative staff interviews, it was evident the facility provided, in addition to the general training received by all employees, specialized training to all its investigators. This training included techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, sexual abuse evidence collection in confinement settings and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. Training records reviewed so that Internal Affairs Investigators, all PREA Managers, and all PREA Investigators have specialized training. A Vector Solutions Training Report provided to the auditor illustrates the completion of specialized training for number staff (three pages). DSOP: 4-015 Complaints, Investigations, and Dispositions Policy (page 10) mandates this training requirement. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (c) Miami-Dade Correction and Rehabilitation PREA Investigators gather and preserve direct and circumstantial evidence, including any available physical evidence and any available electronic monitoring data; interview alleged victims, suspected perpetrators, and witnesses; and review prior complaints and reports of sexual abuse involving the suspected perpetrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (d) Miami-Dade DSOP: 4-015 Complaints, Investigations, and Dispositions Policy stipulates, when the quality of evidence appears to support a criminal prosecution, Miami-Dade Corrections and Rehabilitation Department refers the case to the Miami-Dade Police Department for the criminal investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (e) The credibility of an alleged victim, suspect, or witness is assessed on an individual basis and is not determined by the person's status as inmate or staff. The inmate who alleges sexual abuse is not required to submit to a polygraph examination or other truth-telling device as a condition for proceeding with the investigation of such an allegation. This was confirmed during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (f) DSOP: 4-015 Complaints, Investigations, and Dispositions Policy (page 3) mandates Miami-Dade Corrections and Rehabilitation Department administrative investigations include efforts to determine whether staff actions or failures to act contributed to the abuse; and are documented in written reports that include a description of the physical and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings. This was confirmed during investigative file review and during an interview with an Agency PREA Administrative Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (g) Miami-Dade Corrections and Rehabilitation Department criminal investigations are documented by the Miami-Dade Correction and Rehabilitation Department Internal Affairs Investigations Division in a written report that contains a thorough description of physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (h) Miami-Dade Corrections and Rehabilitation Department refers all allegations to the Miami-Dade Police Department for investigation and prosecution when warranted. MDCR and the Miami-Dade Police Department maintain a Memorandum of Understanding outlining both agency's obligations for investigating sexual abuse allegations. DSOP: 4-015 Complaints, Investigations, and Dispositions Policy (page 11) outlines this practice. This was confirmed during the review of PREA investigation files. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (i) Miami-Dade Corrections and Rehabilitation Department retains all written reports for as long as the alleged abuser is incarcerated or employed by Miami-Dade Corrections and Rehabilitation Department, plus five years. This is stipulated in the Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (j) The departure of the alleged abuser or victim from employment or control of the Miami-Dade Corrections and Rehabilitation Department or agency does not provide a basis for terminating an investigation. This was confirmed during an interview with an agency PREA Administrative Investigator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (k) The Miami-Dade Correction and Rehabilitation Department Administration and/or Internal Affairs Unit refers allegations of sexual abuse to the Miami-Dade Police Department who conducts criminal sexual abuse investigations pursuant to the requirements of this standard. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.71 (l) Miami-Dade Corrections and Rehabilitation Department refers all criminal cases to the Miami-Dade Police Department and cooperates with their investigators during the entire investigation. The facility remains informed of the progress of the investigation through communication between the Miami-Dade Correction and Rehabilitation Department Internal Affairs Unit and the Miami-Dade Police Department. MDCR has maintained a Memorandum of Understanding with Miami-Dade Police Department since 2014; the MOU outlines both agency's responsibilities during a sexual abuse investigation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.72: Evidentiary standard for administrative investigations

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

115.72 (a)

- Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **Review of Investigation Files**

B. Interviews

1. **Agency PREA Administrative Investigator**

Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 12) states the Miami-Dade Corrections and Rehabilitation Department imposes no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated. This was reiterated during an interview with the PREA Investigator and evident during PREA Investigation File reviews. Random PREA investigation file review corroborated this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.73: Reporting to inmates

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

115.73 (a)

- Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded? Yes No

115.73 (b)

- If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency

in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.) Yes No NA

115.73 (c)

- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer posted within the inmate's unit? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The staff member is no longer employed at the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? Yes No
- Following an inmate's allegation that a staff member has committed sexual abuse against the inmate, 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 inmate whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (d)

- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility? Yes No
- Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility? Yes No

115.73 (e)

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

115.73 (f)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

- 1. DSOP: 4-015 Complaints, Investigations and Dispositions**
- 2. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
- 3. Notification Documentation**

B. Interviews

1. Inmate's alleging sexual abuse

115.73 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 2) mandates that following an investigation into an inmate's allegation he/she suffered sexual abuse in the facility, the inmate was to be informed whether the allegation had been determined to be substantiated, unsubstantiated, or unfounded. The documentation provided confirmed the inmates were provided this notification on the Miami-Dade Corrections and Rehabilitation Department Memorandum. Several examples were reviewed by the auditor. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 2) states the agency does request all relevant information from the criminal investigation conducted by the Miami-Dade Police Department in order to inform the inmate as required by this standard. Miami-Dade Corrections and Rehabilitation Department outlines the requirements of the criminal investigation and complies with all aspects of this standard. MDCR and the Miami-Dade Police Department maintains a Memorandum of Understanding outlining each agency's obligation for investigating sexual abuse allegations. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (c) Based on Miami-Dade Corrections and Rehabilitation Department practice and documentation provided, it was confirmed that following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency shall subsequently inform the inmate (unless the agency has determined that the allegation is unfounded) whenever:

- (1) The staff member is no longer posted within the inmate's unit;
- (2) The staff member is no longer employed at the facility;

- (3) The agency learns that the staff member has been indicted on a charge related to sexual abuse within the Miami-Dade Corrections and Rehabilitation Department; or
- (4) The agency learns that the staff member has been convicted on a charge related to sexual abuse within the Miami-Dade Corrections and Rehabilitation Department

The documentation provided confirmed the inmates were provided this notification on the Miami-Dade Corrections and Rehabilitation Department Memorandum. Several examples were reviewed by the auditor. Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy outline this process. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (d) Based on Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 12), following an inmate’s allegation they had been sexually abused by another inmate, Miami-Dade Corrections and Rehabilitation Department subsequently informs the alleged victim whenever the facility learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or Miami-Dade Corrections and Rehabilitation Department learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. The documentation provided confirmed the inmates were provided this notification on the Miami-Dade Corrections and Rehabilitation Department Memorandum. Several examples were reviewed by the auditor. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (e) All such notifications or attempted notifications are documented on the Miami-Dade Corrections and Rehabilitation Department Memorandum. Several examples were reviewed by the auditor. Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 13) outlines this practice. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.73 (f) Based on Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 12), outlines the agency’s obligation to report under this standard terminates if the inmate is released from Miami-Dade Corrections and Rehabilitation Department’s custody. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

DISCIPLINE

Standard 115.76: Disciplinary sanctions for staff

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

115.76 (a)

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

115.76 (b)

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

115.76 (c)

- Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories? Yes No

115.76 (d)

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)? Yes No
- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

Overall compliance determination based on:

A. Documentation

1. **DSOP: 11-015 Employee Association with Inmates, Ex-Inmates, or Criminal Element**
2. **DSOP: 6-013 Employee Counseling and Discipline Procedures.**
3. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
4. **Notification Documentation**

B. Interviews

1. PREA Coordinator

115.76 (a) and (b) DSOP: 11-015 Employee Association with Inmates, Ex-Inmates, or Criminal Element policy (page1) stipulates that staff are subject to disciplinary sanctions up to and including termination

for violating agency sexual abuse or sexual harassment policies. Termination is the presumptive disciplinary sanction for staff who have engaged in sexual abuse. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.76 (c) DSOP: 6-013 Employee Counseling and Discipline Procedures (pages 7-8) states that disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) are 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. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.76 (d) DSOP: 6-013 Employee Counseling and Discipline Procedures (pages 7-8) Miami-Dade mandates that 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, are reported to law enforcement, unless the activity was clearly not criminal, and to any relevant licensing bodies. This was confirmed during an interview with the PREA Coordinator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.77: Corrective action for contractors and volunteers

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

115.77 (a)

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

115.77 (b)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

Overall compliance determination based on:

A. Documentation

1. **DSOP: 23-001 Use of Non-Staff/Volunteers and Contractors**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**

B. Interviews

1. PREA Manager

115.77 (a) DSOP 23-001 Use of non-staff/volunteers and Contractors and the Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy (page 12) states any contractor or volunteer who engages in sexual abuse is prohibited from contact with inmates and are reported to law enforcement unless the activity was clearly not criminal, and to relevant licensing bodies. According to an interview with a PREA Manager, during the past twelve months, there have not been any PREA incidents at Miami-Dade involving a contractor or volunteer. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.77 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy (page 13) requires the Miami-Dade Corrections and Rehabilitation Department to take appropriate remedial measures and consider whether to prohibit further contact with inmates, in the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer. During the past twelve months, there have not been any PREA incidents at Miami-Dade involving a contractor or volunteer. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.78: Disciplinary sanctions for inmates

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

115.78 (a)

- Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process? Yes No

115.78 (b)

- Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories? Yes No

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior? Yes No

115.78 (d)

- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? Yes No

115.78 (e)

- Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact? Yes No

115.78 (f)

- For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation? Yes No

115.78 (g)

- 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 No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

Overall compliance determination based on:

A. Documentation

1. DSOP: 16-001 Inmate Discipline Procedures

- 2. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
- 3. Inmate Handbook**
- 4. DSOP: 12-002 Inmate Administrative and Disciplinary Confinement**

B. Interviews

1. PREA Manager

115.78 (a) Miami-Dade DSOP: 16-001 Inmate Disciplinary Procedures (page 7) and Inmate Disciplinary Violations and Sanctions states that inmates/detainees are subject to disciplinary sanctions pursuant to a formal disciplinary process following an administrative finding that the inmate engaged in inmate-on-inmate sexual abuse (detainee on detainee) or following a criminal finding of guilt for inmate-on-inmate sexual abuse.

Violations include:

100.3 Attempted Sexual Battery or Sexual Battery

200.6 Threatening MDCR Staff, contractual personnel, visitors, volunteers, etc., with bodily harm or any offense against another person or property (this includes making sexual proposals or threats)

200.7 Subjecting MDCR staff, contractual personnel, visitors, volunteers, etc., to obscene acts such as indecent exposure, lewd exhibitionism and/or masturbation

400.13 Engaging in sexual acts not involving threat or force

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (b) Sanctions are commensurate with the nature and circumstances of the abuse committed, the inmate's or detainee's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories.

Violations include:

100.3 Attempted Sexual Battery or Sexual Battery

200.6 Threatening MDCR Staff, contractual personnel, visitors, volunteers, etc., with bodily harm or any offense against another person or property (this includes making sexual proposals or threats)

200.7 Subjecting MDCR staff, contractual personnel, visitors, volunteers, etc., to obscene acts such as indecent exposure, lewd exhibitionism and/or masturbation

400.13 Engaging in sexual acts not involving threat or force

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (c) Miami-Dade DSOP: 12-002 Inmate Administrative and Disciplinary Confinement (pages 4-5) states that the disciplinary process considers whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining what type of sanction if any, should be imposed. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (d) The Jackson Mental Health staff offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, Miami-Dade Corrections and Rehabilitation Department does not require the offending inmate to participate in such interventions as a condition of access to programming or other benefits. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (e) DSOP: 16-001 Inmate Disciplinary Procedures (page 8) notates that Miami-Dade Corrections and Rehabilitation Department disciplines an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (f) MDCR affirms if a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred does not constitute falsely reporting an incident or lying, even if an investigation does not establish evidence sufficient to substantiate the allegation. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.78 (g) Miami-Dade Corrections and Rehabilitation Department prohibits all sexual activity between inmates and may discipline inmates for such activity.

Violation:

400.13 Engaging in sexual acts not involving threat or force

Therefore, the facility demonstrated compliance with this part of the standard during this audit.

MEDICAL AND MENTAL CARE

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

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

115.81 (a)

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

115.81 (b)

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

115.81 (c)

- If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? Yes No

115.81 (d)

- Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law? Yes No

115.81 (e)

- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. CHS Medial and Behavioral Health Screening Tool and Reports
2. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy
3. MDCR DSOP: 14-001 Inmate Health Care Services
4. Queue Management System Manual
5. CHS Privacy of Care Policy CHS-009

- 6. CHS Federal Sexual Assault Reporting Regulations CHS-015**
- 7. CHS consent for Treatment Form**
- 8. CHS Informed Consent and Right to Refuse CHS-072**
- 9. CHS Sexual Assault Consent Policy**

B. Interviews

- 1. PREA Manager**
- 2. CHS Staff**

C. Other

1. Auditor Observation

115.81 (a) The Miami-Dade Corrections and Rehabilitation Department does not operate a prison. Therefore, the facility is exempt from this part of the standard during this audit.

115.81 (b) The Miami-Dade Corrections and Rehabilitation Department does not operate a prison. Therefore, the facility is exempt from this part of the standard during this audit.

115.81 (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (page 2), CHS Medical and Behavior Health Screening Tool, CHS Privacy of Care Policy (page 1), and the Queue Management System Manual mandates if the screening indicates an inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, the screening staff at the Miami-Dade Corrections and Rehabilitation Department ensures the inmate is offered a follow-up meeting with mental health staff within 14 days of the intake screening as required by this part of the standard. The Classification Staff shall document the referral to the (page 22), Miami-Dade Mental Health Staff. Medical records review produced two such referrals. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.81 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response (pages 6-9 and 13) requires that any information related to sexual victimization or abusiveness that occurred in the facility is strictly limited to medical and mental health practitioners and other staff, as necessary, to inform treatment plans and security and management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law. This was confirmed during an interview with two contracted Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.81 (e) Miami-Dade Corrections and Rehabilitation Department requires Miami-Dade Medical and Mental Health Staff to obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in the facility, unless the inmate is under the age of 18. This was confirmed during an interview with two contracted Medical Staff. During the past twelve months, there has not been a situation where consent from an inmate under the age of 18 has occurred. The CHS Sexual Assault Consent Policy, the Informed Consent and Right to Refuse Policy, and Consent for Treatment form is in place if needed. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.82: Access to emergency medical and mental health services

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

115.82 (a)

- Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?
 Yes No

115.82 (b)

- If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62? Yes No
- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? Yes No

115.82 (c)

- Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate? Yes No

115.82 (d)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?
 Yes No

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. **Emergency Treatment Log**
2. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
3. **MDCR DSOP: 14-001 Inmate Health Care Services**
4. **CHS Privacy of Care Policy CHS-009**
5. **CHS Federal Sexual Assault Reporting Regulations CHS-015**
6. **Sexual Assault Response Team Protocol**
7. **Inmate Handbook**
8. **PREA Response Card**

B. Interviews

1. **PREA Manager**
2. **CHS Staff**
3. **SART Members**

115.82 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (pages 8-9) and CHS-015 Federal Sexual Assault Reporting Regulations (page 3) outline the agency's initial response and state that Miami-Dade Corrections and Rehabilitation Department has a Memorandum of Understanding with the Roxcy Bolton Rape Treatment Center to treat inmate victims of sexual abuse. The facility also has medical and mental health staff at the facility ensuring inmates 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. Services are initially documented on the Emergency Treatment Log. The MDCR Sexual Assault Response Team Protocol also outlines the agency's response to all sexual assault allegations. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 6) Miami-Dade Corrections and Rehabilitation Department has procedures to follow when no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders take preliminary steps to protect the victim and shall immediately notify the appropriate medical and mental health practitioners. Victims will be assessed by to Nancy at Jackson Memorial Hospital and will have access to victim advocacy services through a Memorandum of Understanding with the Roxcy Bolton Rape Treatment Center. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (c) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 9) and CHS-015 Federal Sexual Assault Reporting Regulations (page 3) states Miami-Dade Corrections and Rehabilitation Department ensures inmate victims of sexual abuse while incarcerated are 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. This is done in cooperation with Roxcy Bolton Rape Treatment Center and Central Florida Center against Sexual Abuse. Information is located in the Inmates

Handbook (page 4). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.82 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 1), and the Inmates Handbook (page 4) states that Miami-Dade Corrections and Rehabilitation Department requires that all treatment services provided to the victim are without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident. The Miami-Dade bares all cost. This was confirmed during interviews with SART. The MDCR Sexual Assault Response Team Protocol also outlines the agency's response to all sexual assault allegations. Staff have an issued PREA Response Card. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

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

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

115.83 (a)

- Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility? Yes No

115.83 (b)

- Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody? Yes No

115.83 (c)

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

115.83 (d)

- Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all-male" facility. *Note: in "all-male" facilities, there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.*) Yes No NA

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all-male" facility. *Note: in "all-male" facilities, there may be*

inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.) Yes No NA

115.83 (f)

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

115.83 (g)

- Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident? Yes No

115.83 (h)

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

Auditor Overall Compliance Determination

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

Overall compliance determination based on:

A. Documentation

1. CHS Inmate Intake and Receiving Screening CHS-033
2. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy
3. MDCR DSOP: 14-001 Inmate Health Care Services
4. CHS Federal Sexual Assault Reporting Regulations CHS-015
5. Inmate Handbook

B. Interviews

1. PREA Manager
2. CHS Staff

115.83 (a) Miami-Dade Inmate Handbook (page 4), CHS-015 Federal Sexual Assault Reporting Regulations, and IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 1) requires Miami-Dade Corrections and Rehabilitation Department to offer medical and mental health evaluations and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any facility. This was confirmed during an interview with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (b) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 4) requires Miami-Dade Corrections and Rehabilitation Department that the evaluations 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. Follow-up care is done in cooperation between Roxcy Bolton Rape Treatment Center and Miami-Dade Corrections and Rehabilitation Department. This was confirmed during interviews with the Health Services Administrator. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (c) IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 4) states the Miami-Dade Corrections and Rehabilitation Department requires that medical and mental health staff provide all victims with medical and mental health services consistent with the community level of care. Follow-up care is done in cooperation between Roxcy Bolton Rape Treatment Center and Miami-Dade Corrections and Rehabilitation Department. This was confirmed during interviews with the Health Services Administrator and the PREA Manager for the Miami-Dade Corrections and Rehabilitation Department. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (d and e) Based on Miami-Dade Corrections and Rehabilitation Department documentation and DSOP-14-001 Inmate Health Care Services policy requires inmate victims of sexually abusive vaginal penetration, while incarcerated, shall be offered pregnancy tests and timely information about, and access to, all pregnancy-related medical services that are lawful in the community as required by this standard. Follow-up care is done in cooperation between Roxcy Bolton Rape Treatment Center, and the Miami-Dade Corrections and Rehabilitation Department. This was confirmed during interviews with the Jackson Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (f) Miami-Dade Inmate Handbook (page 4) and IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 9) notates the Miami-Dade Corrections and Rehabilitation Department requires that medical and mental health staff provide inmate victims of sexual abuse while incarcerated tests for sexually transmitted infections as medically appropriate. Follow-up care is done in cooperation between Roxcy Bolton Rape Treatment Center and the Miami-Dade Corrections and Rehabilitation Department. This was confirmed during interviews with the Medical Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (g) Miami-Dade Corrections and Rehabilitation Department requires that medical and mental health staff provide treatment services 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. Follow-up care is done in cooperation between Roxcy Bolton Rape Treatment Center and the Miami-Dade

Corrections and Rehabilitation Department. This information is located in the Inmate Handbook (pages 4 and 11), CHS-015 Federal Sexual Assault Reporting Regulations (page 4), and in IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 1). This was confirmed during interviews with the Medial Staff. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.83 (h) CHS-015 Federal Sexual Assault Reporting Regulations (page 4), CHS-033 Intake and Receiving Screening (page 8), and IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 9) notates the Miami-Dade Corrections and Rehabilitation Department shall 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. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

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

115.86 (a)

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

115.86 (b)

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

115.86 (c)

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

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? Yes No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? Yes No

- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? Yes No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? Yes No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? Yes No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? Yes No

115.86 (e)

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

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **Sexual Response Team (SART) Protocol**
3. **SART Meeting Notes/Summary/Chart**

B. Interviews

1. SART Members

115.86 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 14) mandates that Miami-Dade Corrections and Rehabilitation Department conducts 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. This was confirmed during file review and during interviews with Incident Review Team. The review

is documented in SART meeting notes. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.86 (b) Miami-Dade Corrections and Rehabilitation Department ensures that these reviews occur within 30 days of the conclusion of the investigation and documents the review in SART meeting notes. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.86 (c) IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) and SART Protocol states the review team consist of upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners. Therefore, the facility demonstrated compliance with this part of the standard during this audit. There are typically 10-15 attendees at each incident review meeting. All attendees are listed in the SART meeting notes.

115.86 (d) IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) and SART Protocol states the review team considers whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse; whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; or gang affiliation; or was motivated or otherwise caused by other group dynamics at the facility; and they examine the area in Miami-Dade Corrections and Rehabilitation Department where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse; assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or augmented to supplement supervision by staff. The agency has deployed an adequate PREA after-action review process that addresses all elements of the standard. Therefore, this meets this portion of the standard.

115.86 (e) Miami-Dade Corrections and Rehabilitation Department shall implement the recommendations for improvement, or shall document its reasons for not doing so. Each of the 30-Day reviews clearly marked recommendations as deemed appropriate are documented. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.87: Data collection

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

115.87 (a)

- Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? Yes No

115.87 (b)

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

115.87 (c)

- Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? Yes No

115.87 (d)

- Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? Yes No

115.87 (e)

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

115.87 (f)

- Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **Survey of Sexual Victimization**
3. **Annual PREA Report**

B. Interviews

1. PREA Coordinator

115.87 (a), (b) and (c) IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) notates the Miami-Dade Corrections and Rehabilitation Department collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a

standardized instrument and set of definitions, and aggregates the incident-based sexual abuse data at least annually. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) mandates that the incident-based data collected is based on the most recent version of the Survey of Sexual Violence conducted by the Department of Justice. The Miami-Dade Corrections and Rehabilitation Department did submit a Survey of Sexual Violence to the Department of Justice in 2020. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy (page 11) stipulates the Miami-Dade Corrections and Rehabilitation Department maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. The Miami-Dade Corrections and Rehabilitation Department did submit a Survey of Sexual Violence to the Department of Justice in 2020. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (e) Miami-Dade Corrections and Rehabilitation Department does not contract its inmates to other facilities. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.87 (f) Upon request, Miami-Dade Corrections and Rehabilitation Department provides all such data from the previous calendar year to the Department of Justice no later than June 30 when required. The Miami-Dade Corrections and Rehabilitation Department did submit a Survey of Sexual Violence to the Department of Justice in 2020. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.88: Data review for corrective action

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

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? Yes No
- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Preparing an annual report of its findings and corrective actions for each facility, as well as the agency as a whole? Yes No

115.88 (b)

- Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse Yes No

115.88 (c)

- Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means? Yes No

115.88 (d)

- Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

A. Documentation

- 1. IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
- 2. Survey of Sexual Victimization**
- 3. Annual PREA Report**

B. Interviews

1. PREA Coordinator

115.88 (a) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy specifies that Miami-Dade Corrections and Rehabilitation Department reviews data collected to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions for each facility, as well as Miami-Dade Corrections and Rehabilitation Department as a whole. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (b) Such reports include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the Miami-Dade Corrections and Rehabilitation Department's progress in addressing sexual abuse. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (c) Miami-Dade Corrections and Rehabilitation Department's report is approved by the Director and made readily available to the public through its website <https://www8.miamidade.gov/global/corrections/home.page>. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.88 (d) Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy states that the Miami-Dade Corrections and Rehabilitation Department may redact specific material from the reports when publication would present a clear and specific threat to the safety and security of the facility but must indicate the nature of the material redacted. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.89: Data storage, publication, and destruction

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

115.89 (a)

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

115.89 (b)

- Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means? Yes No

115.89 (c)

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

115.89 (d)

- Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

A. Documentation

1. **IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response Policy**
2. **State of Florida Retention Records Schedule**
3. **Annual PREA Report**

B. Interviews

1. **PREA Coordinator**

C. Other

1. **Agency Website**

115.89 (a) through (d): Miami-Dade IP-001 Inmate Sexual Battery/Abuse/Harassment Prevention and Response policy mandate Miami-Dade Corrections and Rehabilitation Department PREA Coordinator to make all aggregated sexual abuse data, readily available to the public at least annually through the agency website <https://www8.miamidade.gov/global/corrections/home.page> reports are securely retained and maintained for at least 10 years after the date of the initial collection unless Federal, State, or Local law requires otherwise; this is found on pages 22-23 of the State of Florida General Records Schedule GS2 for Law Enforcement, Correctional Facilities, and District Medical Examiners Guide. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

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

115.401 (a)

- During the 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 No

115.401 (b)

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

115.401 (h)

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

115.401 (i)

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

115.401 (m)

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

115.401 (n)

- Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel? Yes No

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

115.401 (a) and (b) The Miami-Dade Corrections and Rehabilitation Department did have a PREA audit during the first audit cycle. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (h) The auditor has full access to all location/areas of the Miami-Dade Corrections and Rehabilitation Department. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (i) The auditor did obtain all necessary copies of audit items. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (m) The auditor was allowed to interview inmates in a private setting. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

115.401 (n) The auditor did receive six letters from Miami-Dade Corrections and Rehabilitation Department inmates/detainees. Each inmate was interviewed by the auditor. Audit notices were observed in every housing unit; as well as all common areas. Therefore, the facility demonstrated compliance with this part of the standard during this audit.

Standard 115.403: Audit contents and findings

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

115.403 (f)

- The agency has published on its agency website, if it has one, or has otherwise made publicly available, all Final Audit Reports. 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 that there has never been a Final Audit Report issued.) Yes No NA

Auditor Overall Compliance Determination

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

Instructions for Overall Compliance Determination Narrative

115.403 Miami-Dade Corrections and Rehabilitation Department has had a PREA audit in 2019; the final report is posted on the agency's website [www8.miamidade.gov/global/corrections/home page](http://www8.miamidade.gov/global/corrections/home%20page). Therefore, the facility demonstrated compliance with this part of the standard during this audit.

AUDITOR CERTIFICATION

I certify that:

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

Brian D. Bivens

August 10, 2022

Auditor Signature

Date