

PREA Facility Audit Report: Final

Name of Facility: Turner Guilford Knight Correctional Center

Facility Type: Prison / Jail

Date Interim Report Submitted: NA

Date Final Report Submitted: 10/26/2024

Auditor Certification	
The contents of this report are accurate to the best of my knowledge.	<input type="checkbox"/>
No conflict of interest exists with respect to my ability to conduct an audit of the agency under review.	<input type="checkbox"/>
I have not included in the final report any personally identifiable information (PII) about any inmate/resident/detainee or staff member, except where the names of administrative personnel are specifically requested in the report template.	<input type="checkbox"/>
Auditor Full Name as Signed: Karen d. Murray	Date of Signature: 10/26/2024

AUDITOR INFORMATION	
Auditor name:	Murray, Karen
Email:	kdmconsults1@gmail.com
Start Date of On-Site Audit:	09/10/2024
End Date of On-Site Audit:	09/12/2024

FACILITY INFORMATION	
Facility name:	Turner Guilford Knight Correctional Center
Facility physical address:	7000 Northwest 41st Street , Miami, Florida - 33166
Facility mailing address:	3505A n.w. 107 ave, Doral , Florida - 33178

Primary Contact

Name:	Linda Downs
Email Address:	Linda.Downs@miamidade.gov
Telephone Number:	786-263-6047

Warden/Jail Administrator/Sheriff/Director	
Name:	Regina Shaw
Email Address:	regina.shaw@miamidade.gov
Telephone Number:	786-263-5569

Facility PREA Compliance Manager	
Name:	Nicole Channer
Email Address:	nicole.channer@miamidade.gov
Telephone Number:	O: 786-795-9940
Name:	Craig Mcgahee
Email Address:	craig.mcgahee@miamidade.gov
Telephone Number:	O: 786-326-2321
Name:	Zebanisha Monroe
Email Address:	zebanisha.monroe@miamidade.gov
Telephone Number:	O: 786-616-6979

Facility Health Service Administrator On-site	
Name:	Carmelo Berrios
Email Address:	carmelo.berrios@jhsmiami.org
Telephone Number:	786-263-5341

Facility Characteristics

Designed facility capacity:	1561
Current population of facility:	1010
Average daily population for the past 12 months:	1101
Has the facility been over capacity at any point in the past 12 months?	No
Which population(s) does the facility hold?	Both females and males
Age range of population:	13 - 55+
Facility security levels/inmate custody levels:	Minimum Medium High Medium Maximum
Does the facility hold youthful inmates?	Yes
Number of staff currently employed at the facility who may have contact with inmates:	757
Number of individual contractors who have contact with inmates, currently authorized to enter the facility:	36
Number of volunteers who have contact with inmates, currently authorized to enter the facility:	67

AGENCY INFORMATION

Name of agency:	Miami-Dade County Corrections and Rehabilitation Department
Governing authority or parent agency (if applicable):	
Physical Address:	2525 NW 62nd Street, Miami, Florida - 33147
Mailing Address:	3505 NW 107 AVE, DORAL, Florida - 33178
Telephone number:	7862636047

Agency Chief Executive Officer Information:

Name:	Sherea Green
Email Address:	Sherea.Green@miamidade.gov
Telephone Number:	7862636019

Agency-Wide PREA Coordinator Information			
Name:	Linda Downs	Email Address:	linda.downs@miamidade.gov

Facility AUDIT FINDINGS	
Summary of Audit Findings	
<p>The OAS automatically populates the number and list of Standards exceeded, the number of Standards met, and the number and list of Standards not met.</p> <p>Auditor Note: In general, no standards should be found to be "Not Applicable" or "NA." A compliance determination must be made for each standard. In rare instances where an auditor determines that a standard is not applicable, the auditor should select "Meets Standard" and include a comprehensive discussion as to why the standard is not applicable to the facility being audited.</p>	
Number of standards exceeded:	
6	<ul style="list-style-type: none"> • 115.17 - Hiring and promotion decisions • 115.34 - Specialized training: Investigations • 115.35 - Specialized training: Medical and mental health care • 115.42 - Use of screening information • 115.71 - Criminal and administrative agency investigations • 115.83 - Ongoing medical and mental health care for sexual abuse victims and abusers
Number of standards met:	

39

Number of standards not met:

0

POST-AUDIT REPORTING INFORMATION

GENERAL AUDIT INFORMATION

On-site Audit Dates

1. Start date of the onsite portion of the audit:	2024-09-10
2. End date of the onsite portion of the audit:	2024-09-12

Outreach

10. Did you attempt to communicate with community-based organization(s) or victim advocates who provide services to this facility and/or who may have insight into relevant conditions in the facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Identify the community-based organization(s) or victim advocates with whom you communicated:	Roxcy Bolton Rape Treatment Center - Advocacy Center Miami-Dade Police Department Special Crimes Unit - external reporting agency

AUDITED FACILITY INFORMATION

14. Designated facility capacity:	1505
15. Average daily population for the past 12 months:	933
16. Number of inmate/resident/detainee housing units:	22
17. Does the facility ever hold youthful inmates or youthful/juvenile detainees?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> Not Applicable for the facility type audited (i.e., Community Confinement Facility or Juvenile Facility)

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

Inmates/Residents/Detainees Population Characteristics on Day One of the Onsite Portion of the Audit

36. Enter the total number of inmates/residents/detainees in the facility as of the first day of onsite portion of the audit:	907
38. Enter the total number of inmates/residents/detainees with a physical disability in the facility as of the first day of the onsite portion of the audit:	18
39. Enter the total number of inmates/residents/detainees with a cognitive or functional disability (including intellectual disability, psychiatric disability, or speech disability) in the facility as of the first day of the onsite portion of the audit:	18
40. Enter the total number of inmates/residents/detainees who are Blind or have low vision (visually impaired) in the facility as of the first day of the onsite portion of the audit:	18
41. Enter the total number of inmates/residents/detainees who are Deaf or hard-of-hearing in the facility as of the first day of the onsite portion of the audit:	18
42. Enter the total number of inmates/residents/detainees who are Limited English Proficient (LEP) in the facility as of the first day of the onsite portion of the audit:	2
43. Enter the total number of inmates/residents/detainees who identify as lesbian, gay, or bisexual in the facility as of the first day of the onsite portion of the audit:	24

<p>44. Enter the total number of inmates/residents/detainees who identify as transgender or intersex in the facility as of the first day of the onsite portion of the audit:</p>	<p>3</p>
<p>45. Enter the total number of inmates/residents/detainees who reported sexual abuse in the facility as of the first day of the onsite portion of the audit:</p>	<p>4</p>
<p>46. Enter the total number of inmates/residents/detainees who disclosed prior sexual victimization during risk screening in the facility as of the first day of the onsite portion of the audit:</p>	<p>8</p>
<p>47. Enter the total number of inmates/residents/detainees who were ever placed in segregated housing/isolation for risk of sexual victimization in the facility as of the first day of the onsite portion of the audit:</p>	<p>0</p>
<p>48. 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>Please know the agency did not separate out type of disability but provided a total number of 18, which is why each category above states 18.</p>
<p>Staff, Volunteers, and Contractors Population Characteristics on Day One of the Onsite Portion of the Audit</p>	
<p>49. Enter the total number of STAFF, including both full- and part-time staff, employed by the facility as of the first day of the onsite portion of the audit:</p>	<p>455</p>
<p>50. 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>	<p>372</p>

<p>51. 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>	<p>125</p>
<p>52. 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>No text provided.</p>
<p>INTERVIEWS</p>	
<p>Inmate/Resident/Detainee Interviews</p>	
<p>Random Inmate/Resident/Detainee Interviews</p>	
<p>53. Enter the total number of RANDOM INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>15</p>
<p>54. Select which characteristics you considered when you selected RANDOM INMATE/RESIDENT/DETAINEE interviewees: (select all that apply)</p>	<p> <input type="checkbox"/> Age <input type="checkbox"/> Race <input type="checkbox"/> Ethnicity (e.g., Hispanic, Non-Hispanic) <input type="checkbox"/> Length of time in the facility <input checked="" type="checkbox"/> Housing assignment <input checked="" type="checkbox"/> Gender <input type="checkbox"/> Other <input type="checkbox"/> None </p>

<p>55. How did you ensure your sample of RANDOM INMATE/RESIDENT/DETAINEE interviewees was geographically diverse?</p>	<p>The Thursday before the onsite review the facility provided the Auditor inmate rosters by living unit and by target. Once the Auditor randomly chose inmates by target, random inmate names were chosen by housing unit and gender to ensure an inmate from most housing units were interviewed. When the Auditor initially chose names, alternative names were also chosen due to this facility being an assessment center where male inmates are not kept unless they are considered mental health or detoxing. Although alternative names were chosen, a small percentage of names chosen by the Auditor had discharged upon the first day of the onsite review, the Auditor again randomly chose names to ensure enough targeted and random inmates were interviewed based on target and or same living unit.</p>
<p>56. Were you able to conduct the minimum number of random inmate/resident/detainee interviews?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
<p>57. Provide any additional comments regarding selecting or interviewing random inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Targeted Inmate/Resident/Detainee Interviews</p>	
<p>58. Enter the total number of TARGETED INMATES/RESIDENTS/DETAINEES who were interviewed:</p>	<p>15</p>

As stated in the PREA Auditor Handbook, the breakdown of targeted interviews is intended to guide auditors in interviewing the appropriate cross-section of inmates/residents/detainees who are the most vulnerable to sexual abuse and sexual harassment. When completing questions regarding targeted inmate/resident/detainee interviews below, remember that an interview with one inmate/resident/detainee may satisfy multiple targeted interview requirements. These questions are asking about the number of interviews conducted using the targeted inmate/resident/detainee protocols. For example, if an auditor interviews an inmate who has a physical disability, is being held in segregated housing due to risk of sexual victimization, and disclosed prior sexual victimization, that interview would be included in the totals for each of those questions. Therefore, in most cases, the sum of all the following responses to the targeted inmate/resident/detainee interview categories will exceed the total number of targeted inmates/residents/detainees who were interviewed. If a particular targeted population is not applicable in the audited facility, enter "0".

<p>60. 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>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>Initially this category of inmate was chosen for an interview but was replaced with another targeted category due to discharge.</p>
<p>61. 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>5</p>

<p>62. Enter the total number of interviews conducted with inmates/residents/detainees who are Blind or have low vision (i.e., visually impaired) using the "Disabled and Limited English Proficient Inmates" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After review of the facility rosters, specialized and random staff interviews and a tour of the facility, this category of targeted inmate did not appear to be in the facility during the onsite review.</p>
<p>63. 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>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After review of the facility rosters, specialized and random staff interviews and a tour of the facility, this category of targeted inmate did not appear to be in the facility during the onsite review.</p>

<p>64. 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>3</p>
<p>65. Enter the total number of interviews conducted with inmates/residents/detainees who identify as lesbian, gay, or bisexual using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>3</p>
<p>66. Enter the total number of interviews conducted with inmates/residents/detainees who identify as transgender or intersex using the "Transgender and Intersex Inmates; Gay, Lesbian, and Bisexual Inmates" protocol:</p>	<p>2</p>
<p>67. 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>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>After review of the facility rosters, specialized and random staff interviews and a tour of the facility, this category of targeted inmate did not appear to be in the facility during the onsite review.</p>

<p>68. 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>2</p>
<p>69. Enter the total number of interviews conducted with inmates/residents/detainees who are or were ever placed in segregated housing/isolation for risk of sexual victimization using the "Inmates Placed in Segregated Housing (for Risk of Sexual Victimization/Who Allege to have Suffered Sexual Abuse)" protocol:</p>	<p>0</p>
<p>a. Select why you were unable to conduct at least the minimum required number of targeted inmates/residents/detainees in this category:</p>	<p><input checked="" type="checkbox"/> Facility said there were "none here" during the onsite portion of the audit and/or the facility was unable to provide a list of these inmates/residents/detainees.</p> <p><input type="checkbox"/> The inmates/residents/detainees in this targeted category declined to be interviewed.</p>
<p>b. Discuss your corroboration strategies to determine if this population exists in the audited facility (e.g., based on information obtained from the PAQ; documentation reviewed onsite; and discussions with staff and other inmates/residents/detainees).</p>	<p>The agency as a whole does not utilize segregated housing for vulnerable populations for reasons of PREA.</p>
<p>70. Provide any additional comments regarding selecting or interviewing targeted inmates/residents/detainees (e.g., any populations you oversampled, barriers to completing interviews):</p>	<p>No text provided.</p>
<p>Staff, Volunteer, and Contractor Interviews</p>	
<p>Random Staff Interviews</p>	
<p>71. Enter the total number of RANDOM STAFF who were interviewed:</p>	<p>12</p>

<p>72. Select which characteristics you considered when you selected RANDOM STAFF interviewees: (select all that apply)</p>	<p><input type="checkbox"/> Length of tenure in the facility</p> <p><input checked="" type="checkbox"/> Shift assignment</p> <p><input checked="" type="checkbox"/> Work assignment</p> <p><input type="checkbox"/> Rank (or equivalent)</p> <p><input type="checkbox"/> Other (e.g., gender, race, ethnicity, languages spoken)</p> <p><input type="checkbox"/> None</p>
<p>73. Were you able to conduct the minimum number of RANDOM STAFF interviews?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>74. Provide any additional comments regarding selecting or interviewing random staff (e.g., any populations you oversampled, barriers to completing interviews, barriers to ensuring representation):</p>	<p>No text provided.</p>
<p>Specialized Staff, Volunteers, and Contractor Interviews</p>	
<p>Staff in some facilities may be responsible for more than one of the specialized staff duties. Therefore, more than one interview protocol may apply to an interview with a single staff member and that information would satisfy multiple specialized staff interview requirements.</p>	
<p>75. Enter the total number of staff in a SPECIALIZED STAFF role who were interviewed (excluding volunteers and contractors):</p>	<p>13</p>
<p>76. Were you able to interview the Agency Head?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>
<p>77. Were you able to interview the Warden/Facility Director/Superintendent or their designee?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p>

78. Were you able to interview the PREA Coordinator?	<input checked="" type="radio"/> Yes <input type="radio"/> No
79. Were you able to interview the PREA Compliance Manager?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if the agency is a single facility agency or is otherwise not required to have a PREA Compliance Manager per the Standards)

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

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

	<input type="checkbox"/> Other
81. Did you interview VOLUNTEERS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of VOLUNTEERS who were interviewed:	1
b. Select which specialized VOLUNTEER role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Education/programming <input type="checkbox"/> Medical/dental <input type="checkbox"/> Mental health/counseling <input checked="" type="checkbox"/> Religious <input type="checkbox"/> Other
82. Did you interview CONTRACTORS who may have contact with inmates/residents/detainees in this facility?	<input checked="" type="radio"/> Yes <input type="radio"/> No
a. Enter the total number of CONTRACTORS who were interviewed:	2
b. Select which specialized CONTRACTOR role(s) were interviewed as part of this audit from the list below: (select all that apply)	<input type="checkbox"/> Security/detention <input type="checkbox"/> Education/programming <input checked="" type="checkbox"/> Medical/dental <input type="checkbox"/> Food service <input type="checkbox"/> Maintenance/construction <input checked="" type="checkbox"/> Other
83. Provide any additional comments regarding selecting or interviewing specialized staff.	Medical and mental health contractors were interviewed during the onsite review.

SITE REVIEW AND DOCUMENTATION SAMPLING

Site Review

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

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

<p>89. 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>Informal conversations with staff and inmates were conducted in more than 50% of housing units and other departments visited during the tour of the facility.</p>
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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.

<p>90. 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?</p>	<p><input checked="" type="radio"/> Yes <input type="radio"/> No</p>
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<p>91. Provide any additional comments regarding selecting additional documentation (e.g., any documentation you oversampled, barriers to selecting additional documentation, etc.).</p>	<p>No text provided.</p>
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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.

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

	# of sexual abuse allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual abuse	5	3	5	5
Staff-on-inmate sexual abuse	4	0	4	0
Total	9	3	9	5

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

	# of sexual harassment allegations	# of criminal investigations	# of administrative investigations	# of allegations that had both criminal and administrative investigations
Inmate-on-inmate sexual harassment	2	0	1	0
Staff-on-inmate sexual harassment	3	0	3	0
Total	5	0	4	0

Sexual Abuse and Sexual Harassment Investigation Outcomes

Sexual Abuse Investigation Outcomes

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

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

	Ongoing	Referred for Prosecution	Indicted/ Court Case Filed	Convicted/ Adjudicated	Acquitted
Inmate-on-inmate sexual abuse	3	0	0	0	0
Staff-on-inmate sexual abuse	0	0	0	0	0
Total	3	0	0	0	0

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual abuse	1	2	1	1
Staff-on-inmate sexual abuse	0	2	5	0
Total	1	4	6	1

Sexual Harassment Investigation Outcomes

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

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

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

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

	Ongoing	Unfounded	Unsubstantiated	Substantiated
Inmate-on-inmate sexual harassment	0	0	2	0
Staff-on-inmate sexual harassment	0	0	3	0
Total	0	0	5	0

Sexual Abuse and Sexual Harassment Investigation Files Selected for Review

Sexual Abuse Investigation Files Selected for Review

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

7

<p>99. Did your selection of SEXUAL ABUSE investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual abuse investigation files)</p>
<p>Inmate-on-inmate sexual abuse investigation files</p>	
<p>100. Enter the total number of INMATE-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>3</p>
<p>101. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>102. Did your sample of INMATE-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual abuse investigation files)</p>
<p>Staff-on-inmate sexual abuse investigation files</p>	
<p>103. Enter the total number of STAFF-ON-INMATE SEXUAL ABUSE investigation files reviewed/sampled:</p>	<p>4</p>
<p>104. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>

<p>105. Did your sample of STAFF-ON-INMATE SEXUAL ABUSE investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual abuse investigation files)</p>
<p>Sexual Harassment Investigation Files Selected for Review</p>	
<p>106. Enter the total number of SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>5</p>
<p>107. Did your selection of SEXUAL HARASSMENT investigation files include a cross-section of criminal and/or administrative investigations by findings/outcomes?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any sexual harassment investigation files)</p>
<p>Inmate-on-inmate sexual harassment investigation files</p>	
<p>108. Enter the total number of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:</p>	<p>1</p>
<p>109. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT files include criminal investigations?</p>	<p><input type="radio"/> Yes</p> <p><input checked="" type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>
<p>110. Did your sample of INMATE-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?</p>	<p><input checked="" type="radio"/> Yes</p> <p><input type="radio"/> No</p> <p><input type="radio"/> NA (NA if you were unable to review any inmate-on-inmate sexual harassment investigation files)</p>

Staff-on-inmate sexual harassment investigation files	
111. Enter the total number of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files reviewed/sampled:	4
112. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include criminal investigations?	<input type="radio"/> Yes <input checked="" type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
113. Did your sample of STAFF-ON-INMATE SEXUAL HARASSMENT investigation files include administrative investigations?	<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> NA (NA if you were unable to review any staff-on-inmate sexual harassment investigation files)
114. Provide any additional comments regarding selecting and reviewing sexual abuse and sexual harassment investigation files.	No text provided.
SUPPORT STAFF INFORMATION	
DOJ-certified PREA Auditors Support Staff	
115. Did you receive assistance from any DOJ-CERTIFIED PREA AUDITORS at any point during this audit? REMEMBER: the audit includes all activities from the pre-onsite through the post-onsite phases to the submission of the final report. Make sure you respond accordingly.	<input type="radio"/> Yes <input checked="" type="radio"/> No

Non-certified Support Staff

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

Yes

No

AUDITING ARRANGEMENTS AND COMPENSATION

121. Who paid you to conduct this audit?

The audited facility or its parent agency

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

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

Other

Standards	
Auditor Overall Determination Definitions	
<ul style="list-style-type: none"> • Exceeds Standard (Substantially exceeds requirement of standard) • Meets Standard (substantial compliance; complies in all material ways with the stand for the relevant review period) • Does Not Meet Standard (requires corrective actions) 	
Auditor Discussion Instructions	
<p>Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.</p>	

115.11	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Miami-Dade Corrections and Rehabilitation Department Organization Chart, not dated 4. Miami Dade County Memorandum, Subject: PREA Compliance Managers 115.11, dated 2.19.2024 5. Internal Inmate Movement Log, dated 10.24.2016 <p>Interviews:</p>

1. Random Inmates
2. Targeted Inmates
3. Correctional Officers
4. PREA Team
5. PREA Coordinator
6. Investigators
7. Captain
8. Agency Director

Through formal and informal interviews with inmates and personnel and review of inmate and personnel files, it is evident that this facility interweaves PREA in their daily protocols. Both inmates and personnel could speak to facility PREA practices and protocols being used as is described in the agency's Sexual Battery / Abuse / Harassment Prevention and Response Policy. Inmates also offered the following unsolicited comments regarding the facility and facility staff,

- Have good communication with our counselor, she comes in daily to check on us.
- Corporal 'F' is the best. He will correct other officers if they are wrong - he gives us second chances by making an analysis of our behaviors. He is making changes with inmates because they see he cares about us.
- This is a nice place
- Staff are very respectful
- Feel very, very safe! (no one's getting my kitty cat!)
- Officer gave male nurse a really hard time because he was near us during shower program.
- They don't mess around with PREA here.

Positive comments were received from staff during interviews.

- We all work together so we are on the same page. Good team here.
- We promote teamwork with all members of the team.
- Compliance team reports to Captain - we have a collaborative team here.
- Meeting quarterly to look at additional camera needs.

- We have a good classification team – they do their best to collaborate with us – they make whatever we need happen.
- Detailed Miami-Dade Police Department (MDPD) staff who work in our Internal Affairs department.
- Great relationship with MDPD
- MDPD Director is really involved.
- Many staff spoke to the primary goal is to make sure inmates feel safe and comfortable at the facility.
- We let inmates know we are here to protect them.
- PREA team at every facility and we see them often.
- Our Director is PREA minded, if you need it, it is yours.
- Our Director is all about succession planning.
- MDPD, Internal Affairs have weekly meetings to discuss investigations

Site Observation:

During the tour of the facility to include highly trafficked areas by personnel and inmates and the 22 housing units, the Auditor witnessed yellow Audit Notices and standardized postings, in three languages to include English, Spanish and Creole, with information on the agency zero tolerance policy, dialing instructions to the PREA hotline which rings directly into the Sex Crimes Unit at the Miami-Dade Police Department. Advocate postings were observed to be located throughout living units, placed on rolling telephones in the mental health units during the tour and throughout highly trafficked areas of the facility, also in three languages.

The facility has 22 living units, housing female and mental health offenders, with most cells equipped with toilets and sinks, single occupied although most have two beds, and shower areas, each shower being a single showering area. Individuals passing by inmate cells could not easily see in on an inmate while toileting.

The facility includes a Boot Camp program for young offenders. The Boot Camp program is two levels. The bottom level includes administrative offices, a multipurpose room, an inmate dorm, day room and bathroom equipped with shower curtains, and inmate phone bank and a kitchen area. The upper level is equipped with a kitchen area, phone bank, dayroom, open cubicles with two-man bunks, although the facility Captain stated inmates would primarily be housed alone due to the upper

floor being a status achievement. The bathroom urinals were observed to be open allowing viewing from the day room. (See corrective action plan in §115.15. Facility maintenance staff took immediate action to temporarily block urinals until a permanent solution could be installed.) PREA audit notices and PREA signage with agency zero tolerance, internal and external reporting information and advocate contact information was observed near phone banks on both levels.

During the tour facility cameras were observed in individual living units, all cameras appeared to be operable. (Cameras in observation cells were not observed to have toilets covered by pixelization. See corrective action plan in §115.15.) Cameras were observed in living units, hallways, kitchen, and storage areas throughout the facility. Cameras were not observed in stairwells; however, the facility was able to share communication logs demonstrating names of personnel and inmates, time of departure and arrival during foot transportation within the facility. In addition, the Agency Director was able to describe a plan in place to add additional cameras in stairwells.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency Safe Prisons/PREA Plan mandates zero-tolerance toward all forms of sexual abuse and sexual harassment in the facility it operates and those directly under contract.

MDCR and CHS Policy IP-001, page 1, section I. Policy, states, "It is the policy of the Miami-Dade Corrections and Rehabilitation Department (MDCR) and Corrections Health Services (CHS) to provide a safe and secure environment free from sexual battery/abuse/harassment. Pursuant to the Prison Rape Elimination Act of 2003 (PREA) and Florida Statutes (FS) 944.35 and 951.221, a zero tolerance policy for sexual activity is established. Any form of sexual misconduct between staff, contractors, or volunteers involving an inmate/patient shall be considered non-consensual, an abuse of authority. Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies.

MDCR and CHS Policy IP-001, page 1, section III. Prevention, states, "MDCR and CHS have established procedures to prevent, detect, and investigate all allegations of sexual battery/abuse/harassment. The PREA Coordinator is responsible for developing, implementing, and overseeing agency efforts (to include PREA Compliance Managers at each facility) to comply with PREA standards."

(b) The Turner Guilford Knight Correctional Center PAQ states the agency employs

or designates an upper-level, agency-wide PREA Coordinator. The position of the PREA Coordinator in the agency's organizational structure is the PREA Coordinator.

The facility provided a Miami-Dade Corrections and Rehabilitation Department organization chart. The organizational chart shows the PREA Coordinator reports directly to the Office of Compliance, Chief Compliance Officer reports directly to the MDCR Director.

(c) The Turner Guilford Knight Correctional Center PAQ states the facility has designated a PREA Compliance Manager. The PREA Compliance Manager has sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards.

The facility provided a Miami Dade County Memorandum, Subject: PREA Compliance Managers 115.11, addressed to 'All Staff', providing instruction that each facility PCM of the respective facility will collaborate with the departmental PREA Coordinator, Sergeant Linda Downs, of the Office of Compliance, on each incident. The memorandum provides a table listing PREA Compliance Manager names, titles, entity and contact phone number.

Through such reviews, the facility meets the standard requirements.

115.12	Contracting with other entities for the confinement of inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none">1. Turner Guilford Knight Correctional Center PAQ <p>Interviews:</p> <ol style="list-style-type: none">1. PREA Coordinator <p>During the pre-audit phase, the PREA Coordinator stated the agency does not have privatized contracts for the care of their inmate population.</p>

	<p>(a-b) The Turner Guilford Knight Correctional Center PAQ states the agency does not contract with a private agency for confinement services of their inmates.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.13	Supervision and monitoring
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Miami-Dade Corrections and Rehabilitation Department Staffing Plan, dated 5.23.2023 4. Supervisory Rounds <p>Interviews:</p> <ol style="list-style-type: none"> 1. Corporal 2. Agency Director <p>The interview with the Corporal demonstrated rounds are completed by security supervisors on each shift. The Corporal stated supervisors check each cell, detriments, talk to inmates, answers questions, make sure all inmates and staff are safe, addresses any concerns in all areas of the facility during staggered times and documents those checks in red logbooks, in red ink, stating when the unannounced round was completed.</p> <p>The interview with the Agency Director demonstrated her awareness of the staffing plan and she stated the facility has installed over 800 cameras for TGK and Boot Camp for purposes of keeping all safe, investigation purposes; however, the Director stated cameras are not a replacement for human supervision.</p>

Site Observation:

During the tour of the facility three logbooks were observed in each living unit, one logbook for each shift. Unannounced rounds were observed sporadically throughout the year in either red ink or under a red stamp stating, "Unannounced Rounds" or in a template with an area for unannounced rounds. Supervisors documented their names and the time of the rounds. Rounds were sporadic, at different times, throughout each shift.

Recommendation:

Place mirrors or cameras in the back of the kitchen warehouse to alleviate blind spots. Facility response during the onsite review. FMB will install a convex mirror on the wall in that corner that will display the area. This project will be completed by Thursday, September 10, 2024.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency requires the facility to develop, document and make its best efforts to comply on a regular basis with a staffing plan that provides for adequate levels of staffing, and, where applicable, video monitoring, to protect inmates against abuse. Since August 20, 2012, or last PREA audit, whichever is later, the average daily number of inmates is 1121. The average daily number of inmates on which the staffing plan was predicated is 4663.

MDCR and CHS Policy IP-001, page 8, section E.1., Staffing and Video Monitoring, states, "MDCR Facility/Bureau Supervisors, Division Chiefs, Deputy Directors, and the Director shall perform the following through the annual budget process:

- a. Complete a staffing assessment considering the number of sexual battery/abuse/harassment incidents and any other relevant factors (e.g., number of staff needed for transportation to/from medical and mental health units) when calculating adequate staffing levels.
- b. Consult with the PREA Coordinator annually to assess, determine, and document if adjustments are needed to the: 1) Staffing assessment, 2) Facility's deployment of video monitoring systems and other monitoring technologies;
- c. Develop, document, and make best efforts to comply with a plan that provides adequate levels of staffing and video monitoring to protect inmates/patients against sexual battery/abuse/harassment;
- d. Forward the proposed staffing assessments to the MDCR Director for review and approval of a comprehensive staffing analysis plan to be presented to the Office of Management and Budget during the annual budget/resource allocation process."

The facility provided a Miami-Dade Corrections and Rehabilitation Department Staffing Plan. The Staffing Plan documents the following information.

1. Generally accepted detention and correctional practices
2. Any judicial findings of inadequacy
3. Any findings of inadequacy from Federal investigative agencies
4. Any findings of inadequacy from internal or external oversight bodies
5. All components of the facility's physical plant (including blind spots or areas where staff or inmates may be isolated)
6. The composition of the inmate population
7. The number and placement of supervisory staff
8. Institution programs occurring on a particular shift
9. Any applicable State or local laws, regulations, or standards
10. The prevalence of substantiated and unsubstantiated incidents of sexual abuse
11. Any other relevant factors

The Staffing Plan is signed and dated 5.23.2023 by the Fiscal Resource Division Chief and the Departmental PREA Coordinator.

(b) The Turner Guilford Knight Correctional Center PAQ states each time the staffing plan is not complied with, the facility documents and justifies deviations. The most common reasons for deviations are staff shortages, call ins, unexpected detail i.e. hospital. The PAQ states, "Deviations from the staffing plan occur when and if a unit closes, an increase and/ or decrease in population within housing units, medical details, etc. All changes are indicated on the duty roster."

(c) The Turner Guilford Knight Correctional Center PAQ states at least once every year the facility/agency, in collaboration with the PREA coordinator, reviews the staffing plan to whether adjustments are needed in (a) the staffing, (b) the deployment of monitoring technology, or (c) the allocation of agency/facility resources to commit to the staffing plan to ensure compliance with the staffing plan. The facility completes a staffing plan annually to ensure continued compliance.

(d) The Turner Guilford Knight Correctional Center PAQ states facility requires that

	<p>intermediate level or higher-level staff conduct unannounced rounds to identify and deter staff sexual abuse and sexual harassment.</p> <p>MDCR and CHS Policy IP-001, page 8, section F. Unannounced Rounds, states, “Each Security Supervisor shall conduct unannounced rounds and physically enter every housing area, on each shift, to identify and deter sexual battery/abuse/harassment. Staff shall not alert inmates or others that such rounds are being conducted unless such an announcement is related to the legitimate operational functions of the facility. Staff alerting others regarding unannounced rounds shall be subject to discipline. Rounds shall be documented in the WTMS or on a Physical Sight Check Sheet when the WTMS is unavailable or inoperable. Rounds shall also be documented in the Red Logbook.”</p> <p>The facility provided unannounced round documentation for all housing units demonstrating a Sergeant or above has completed multiple rounds throughout the 24-hour shift.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.14	Youthful inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator 2. Captain <p>Interviews with the PREA Coordinator and the facility Captain demonstrate youthful inmates were moved to the Metro West facility at the beginning of the year and are no longer housed at Turner Guilford Knight Assessment Center.</p>

	<p>Site Observation:</p> <p>During the facility tour, formal and informal interviews with inmates and personnel demonstrated youthful inmates were not housed at the facility.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the facility prohibits placing youthful inmates in a housing unit in which a youthful inmate will have sight, sound, or physical contact with any adult inmate through use of a shared dayroom or other common space, shower area, or sleeping quarters. The facility does not house youthful inmates. The PAQ states, "Our policies do prohibit placing youthful offenders with adult offenders.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.15	Limits to cross-gender viewing and searches
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. MDCR-Inmate Profile System Incident Report, Cross Gender Strip Searches, dated 4.30.2024 4. Miami-Dade Corrections and Rehabilitation Department DSOP: 11-022, Frisk and Strip Search Procedures, dated 7.11.2012 5. Miami-Dade Corrections and Rehabilitation Department DSP: 18-017, Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates, dated 4.3.2023 6. Miami-Dade Corrections and Rehabilitation Department, Rules 2.2.000, General Conduct and Responsibilities, dated 2012 7. Miami-Dade Public Safety Training Institute – Cross Gender Search Training Logs 8. Prison Rape Elimination Act Inmate Battery / Abuse / Harassment Prevention and Response PowerPoint, dated 4.11.2022 9. On Site Corrective Action: Miami-Dade County Memorandum, Subject Corrective

Action, dated 9.11.2024

10. On Site Corrective Action: Photo of Partially Painted Shower Door

11. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concerns, dated 10.2.2024

12. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concerns, dated 10.2.2024

13. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concerns, dated 10.2.2024

Interviews:

1. Random Inmates
2. Targeted Inmates
3. Correctional Officers

Interviews with 30 of 30 inmates who were asked if searches of their bodies were conducted respectfully by staff yielded a yes answer. One transgender person interviewed stated he was fine with female staff searching him as he was comfortable with the same sex staffing doing his searches. 30 of 30 inmates were asked if they felt sexually safe in the facility. 28 of 30 inmates stated they felt safe. One male inmate stated he did not feel safe as female staff could see him while undressing in the shower. One female inmate in the mental health unit stated she thought a staff had come into her room during the night and other staff had allowed it; however, as she continued to talk it was apparent she may have dreamed the event had taken place.

Interviews with Correctional Officers demonstrated female staff were trained to conduct pat and strip searches of the opposite gender and cross gender strip searches. One Correctional Officer stated she was designated to conduct cross gender strip searches. The Correctional Officer stated transgender and intersex people are asked their search preference at intake at which time they complete a statement with that gender search preference and that preference is honored throughout the inmates stay.

Site Observation:

During the tour the intake area was observed, where searches are conducted. The search area is in the intake area, in a shower, clothing exchange area. The clothing exchange area is behind three walls and a staff member stands at the front of the

area in line of sight of a camera during the strip search clothing exchange. The camera is not able to view the inmate, only staff conducting the search. The facility is equipped with a body scanner that does not reveal the inmate's gender.

During the tour shower doors in the mental health living units and doors in the women's housing unit were observed to provide a view of inmates' genitals while showering and changing clothes. During the onsite review the facility provided a Miami-Dade County Memorandum from the facility Captain stating, "The shower doors in the MHTC bathrooms have 2 large windows on them that do not mask the inmates' private areas when they shower. Corrective action taken. The Facilities Management Bureau (FMB) will mask windows by painting a frosted paint to cover the inmates' private areas while they shower. This project will be completed by September 10, 2024. This picture below depicts how the frosted area will look on each shower." The facility provided a photo demonstrating the doors in question were partially painted to provide inmates privacy while showering, dressing and toileting.

During the tour of the Boot Camp program urinals on the second floor were observed to be visible in the dayroom. During the onsite review, maintenance staff took immediate action installing a temporary solution until a permanent solution could be installed.

Also, during the tour, it was observed that toilets in cells can be seen on cameras. Unit staff explained that when cameras go down pixelization goes away. Shower doors in mental health units and inmate rooms in 4210 and 4212 had a clear view of inmates during toileting and or undressing.

Action Plan:

- Showers to be frosted to block inmate genital areas. Inmate cells 4210 and 4212 be frosted to provide female inmates privacy while toileting and dressing.
- Upload photos of frosted windows or facetime auditor to walk through inmate shower and cell areas.
- Provide photos of boot camp upstairs bathroom demonstrating inmate urinals cannot be seen from the day room.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance providing a sustainable action plan ensuring camera pixelization remains in place when cameras are reset. Provide pictures of camera screens or facetime auditor to demonstrate this issue has been corrected. Memorandum must be dated, addressed

to DOJ PREA Auditor, author name and provision number. (Re: 115.15).

- Upload completed documentation to the online audit system in provision 115.15 (d).

Post audit the facility provided a memorandum from the Boot Camp Program Captain addressed to the DOJ PREA Auditor, providing the following text and photos of action taken. "Please see the corrective actions taken by the Boot Camp Program (BCP) in response to the items of concern noted in the September 10, 2024, PREA Audit.

1. Area of Concern: Standard 115.15 (d) - Corrective Action Taken: Service Request #102181 was generated for the placement of privacy partitions to separate the cadet urinals. Please see the attached photos of the completed requests."

Post audit the facility provided a memorandum from the Turner Guilford Knight Correctional Center Captain addressed to the DOJ PREA Auditor, providing the following text and photos of action taken. "Please find the corrective actions taken by Turner Guilford Knight Correctional Center (TGKCC) in response to the items of concern noted in the September 10-11, 2024, PREA Audit.

1. Area of Concern: Standard 115.15 (d) Corrective Action Taken: Unit K42 rooms 4210, 4211 and 4212 doors will be removed and replaced to match the other in the unit."

Post audit the facility provided a memorandum from the Turner Guilford Knight Correctional Center Captain addressed to the DOJ PREA Auditor, providing the following text and photos of action taken. "Please find the corrective actions taken by Turner Guilford Knight Correctional Center (TGKCC) in response to the items of concern noted in the September 10-11, 2024, PREA Audit.

1. Area of Concern: Standard 115.15 (c): Corrective Action Taken: Each Mental Health Treatment Center (MHTC) unit Corporal is responsible for conducting a security check on the surveillance monitors in their assigned units. These checks ensure that the cameras are functioning properly and that the sensitive areas within the housing units are pixelated. The checks will be documented in the Red logbook for each shift."
2. Miami-Dade Memorandum, Subject Daily Camera Check, from the TGKCC Lieutenant to All Staff, states, "Each MHTC unit Corporal is responsible for conducting a security check on the Video surveillance monitors located in their assigned units. This is to ensure that cameras are operable and that sensitive areas within housing units are pixelated in accordance with PREA standards. The check must be notated in the red logbook on each shift."
3. Photos of cameras demonstrating black boxes have been placed over toilets in

wet cells in the mental health units.

(a) Turner Guilford Knight Correctional Center PAQ states the facility does not conduct cross-gender strip or cross-gender visual body cavity searches of their inmates. In the past 12 months 73 cross-gender strip or cross-gender visual body cavity searches of inmates.

Miami-Dade Corrections and Rehabilitation Department DSOP: 11-022, Frisk and Strip Search Procedures, page 2, section IV. Procedures B. Frisk Search and C. Strip Search, state,

B. "All inmates will be frisk searched when entering a secure area of the facility to ensure they are not in possession of any contraband. Frisk searches shall be conducted in a professional, respectful, and discreet manner. An inmate shall be frisk searched by sworn staff of the same gender or same gender identity as the inmate. Sworn staff shall conduct frisk searches as follows:

1. Sworn male staff shall not frisk search female inmates, unless the inmate identifies as transgender or intersex and has requested to be searched by a male staff member. (Refer to III.L of this policy for additional information). If exigent circumstances exist, refer to section IV.D of this policy for additional information;

2. Sworn female staff may frisk search male inmates.

C. A strip search includes a visual body cavity search, not a physical body cavity search. There will be no physical contact with the inmate during a routine strip search.

1. During the intake process, a strip search shall be conducted of all inmates charged with a felony;

2. Sworn staff shall conduct all strip searches as follows:

a. Sworn male staff shall not strip search female inmates, unless the inmate identifies as transgender or intersex and has requested to be searched by a male staff member. (Refer to III.L of this policy for additional information). If exigent circumstances exist, refer to section IV.D of this policy for additional information;

b. Sworn female staff shall not strip search male inmates unless the inmate identifies as transgender or intersex and has requested to be searched by a female staff member. (Refer to III.L of this policy for additional information). If exigent circumstances exist, refer to section IV.D of this policy for additional information;

c. Strip search inmates one at a time to avoid passing or disposing of contraband;

- d. Conduct the search in a private area, out of the view of others not conducting the search, to include other inmates;
- e. Conduct the search with the minimum number of sworn staff necessary to safely conduct the strip search;
- f. Document each inmate strip searched on a Strip Search Authorization Log.”

MDCR and CHS Policy IP-001, page 8, section IV A-B. Transgender or Intersex Inmate Search, states, “All MDCR sworn staff shall ensure transgender and intersex inmates are searched in a professional and respectful manner utilizing the least intrusive method possible, consistent with the safety and security needs.

A. Transgender or intersex inmates/patients shall have an opportunity to express their preference to be frisk/strip-searched by a male or female officer.

B. If a transgender or intersex inmate/patient requests a cross-gender frisk/strip-search, a Subject/Victim statement shall be obtained prior to conducting the search. Upon completion of the search, the officer shall generate an MDCR Incident Report. Refer to DSOP 11-022 “Frisk and Strip Search Procedures” and DSOP 18-017 “Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates,” for additional information.”

The facility provided a MDCR-Inmate Profile System Incident Report, Cross Gender Strip Searches demonstrating reasons for cross gender searches are documented.

(b) Turner Guilford Knight Correctional Center PAQ states the facility does not permit cross-gender pat-down searches of female inmates, absent exigent circumstances. The facility does not restrict female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision.

(c) Turner Guilford Knight Correctional Center PAQ states the facility policy requires that all cross-gender strip searches, cross-gender visual body cavity searches, and cross-gender pat-down searches be documented and justified.

Miami-Dade Corrections and Rehabilitation Department DSOP: 11-022, Frisk and Strip Search Procedures, page 4, section D. 3. Cross-Gender Search, states, “If exigent circumstances exist, cross-gender searches shall be authorized by a supervisor, documented on an MDCR Incident Report with an MDCR Subject/Victim Statement completed by the inmate, and approved by the Shift Supervisor/Commander, in accordance with DSOP 10-003 “Major Incident Reporting Procedures.”

(d) Turner Guilford Knight Correctional Center PAQ states the facility has implemented policies and procedures that enable inmates to shower, perform bodily functions, and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks (this includes viewing via video camera). Policies and procedures require staff of the opposite gender to announce their presence when entering an inmate housing unit.

Miami-Dade Corrections and Rehabilitation Department DSP: 18-017, Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates, page 10, section VII. B-C., state,

B. Cross-Gender Viewing, states, "All inmates shall have the opportunity to shower, perform bodily functions, and change clothes without being viewed by the opposite gender, except in exigent circumstances (e.g. emergency response) or when such viewing is incidental to a routine cell check.

C. Transgender and intersex inmates shall have the opportunity to shower separately from other inmates, and whenever possible, shall have the opportunity to perform bodily functions, and change clothes separately from other inmates."

Miami-Dade Corrections and Rehabilitation Department, Rules 2.2.000, General Conduct and Responsibilities, page 8, section 2.2.037 Housing of Pretrial, Misdemeanants and Traffic Violation Inmates, states, "When a male is required to enter a female inmate housing area, he shall do so only after a verbal announcement is made to the female inmate population and only when accompanied by a female correctional officer or other female employee designated by the Shift Supervisor/Shift Commander, unless an emergency situation dictates otherwise. In addition, when a female is required to enter a male housing area, she shall do so only after a verbal announcement is made to the male inmate population."

(e) The Turner Guilford Knight Correctional Center PAQ states the facility has a policy prohibiting staff from searching or physically examining a transgender or intersex Inmate for the sole purpose of determining the Inmate's genital status. Such searches have not occurred in the past 12 months.

Miami-Dade Corrections and Rehabilitation Department DSP: 18-017, Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates, page 2, section B. Gender Identification During Intake, states, "MDCR or Corrections Health Services (CHS) staff shall not examine an inmate's genitals for the sole purpose of determining the inmate's gender status. The following shall be adhered to when an inmate's gender identity is

	<p>unknown, and the information is necessary to ensure proper processing and classification. 2. If the inmate is transgender or intersex, staff shall ask the inmate if they prefer to be searched by a male or female officer.”</p> <p>(f) The Turner Guilford Knight Correctional Center PAQ states 100% of security staff at each facility receive training on conducting cross-gender pat-down searches and searches of transgender and intersex inmates in a professional and respectful manner.</p> <p>The facility provided a Prison Rape Elimination Act Inmate Battery / Abuse / Harassment Prevention and Response PowerPoint. PowerPoint slides 75-77 speak to Frisk & Strip Search Procedures for LGBTI and Identified Victims of Sexual Violence.</p> <p>The facility provided staff training rosters demonstrating completion of ID-DOI Inmate Sexual Battery Abuse, Harassment, Prevention and Response, Limits to Cross-Gender, DSOP 18-017 training was completed.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.16	Inmates with disabilities and inmates who are limited English proficient
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Contract No. FB-01560-Onsite Interpretation Services, dated 2.1.2021 - 1.31.2026 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Targeted Inmates

2. Agency Director

Interviews with two LEP and four cognitive inmates demonstrated they were aware of the agency zero tolerance policy, how to report internally and externally through signage in their living units and their rights in relation to grievances by watching a PREA video, often. LEP inmates stated they received inmate handbooks during intake and or when they were removed from Level one status.

The interview with the Agency Director demonstrated PREA educational information is printed and provided in English, Spanish and Creole. The Agency Director stated each facility has 'I Speak Manuals' which assists personnel in offering interpretation in any language an inmate may require. Manuals are available at each Commander Desk, Unit offices and in visitation areas.

Site Observation:

During the pre-audit phase of the Metro West facility the Auditor viewed the inmate PREA video and found the video to be well done and very thorough. During the tour of the TGK facility, the video was observed to be constantly playing in the intake area with subtitles and although the Auditor did not believe the area to be conducive for listening to the video, inmates stated they did watch and learn from the video in the intake area and were able to read the subtitles.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has established procedures to provide disabled Inmates equal opportunities to be provided with and learn about the agency's efforts to prevent, detect and respond to sexual abuse and sexual harassment.

MDCR and CHS Policy IP-001, page 5, section B. 1-5. Inmate Orientation, states, "All inmates/patients shall receive an orientation that addresses MDCR's zero tolerance for sexual battery/abuse/harassment. The Classification Officer shall provide the orientation within 72 hours after intake unless exigent circumstances exist, e.g., inmates/patients requiring detox. Inmates/patients shall:

1. View a video presentation on how to report incidents or suspicions of sexual battery/abuse/harassment, and the right to be free from retaliation for reporting such incidents;
2. Receive the Sexual Battery/Abuse/Harassment Awareness Pamphlet;
3. Receive an Inmate Handbook that includes information regarding prohibited acts, violations, and sanctions; how inmates/patients can protect themselves from sexual battery/abuse/harassment; and how to report sexual acts, etc.

4. Be provided communication assistance, if the inmate has a hearing (deaf or hard of hearing), vision (blind or have low vision), or speech impairment; cognitive disabilities; as well as those who have limited reading skills or limited English proficiency that will prevent them from understanding MDCR's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Communication assistance includes, but is not limited to:

- a. Auxiliary aids,
- b. Large print materials,
- c. Qualified sign language interpreters,
- d. MDCR Point Book,
- e. Translation services for inmates with limited English proficiency;

5. The assistance provided shall be documented on an Incident Report.”

The facility provided Contract No. FB-01560-Onsite Interpretation Services. The contract is for sign language interpretation and translation services from 9.1.2020 through 8.31.2025.

(b) The Turner Guilford Knight Correctional Center PAQ states the agency has established procedures to provide Inmates with limited English 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. Policy compliance can be found in provision (a) of this standard.

(c) The Turner Guilford Knight Correctional Center PAQ states the agency prohibits the use of 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, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations. In the last 12 months the facility has had zero instances where inmates were used for interpreters.

MDCR and CHS Policy IP-001, page 5, section B. 6. Inmate Orientation, states, “MDCR staff shall not rely on inmate/patient interpreters, inmate/patient readers, or other types of inmate/patient assistants except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate/patient's safety or the performance of staff's responsibilities to act.”

Through such reviews, the facility meets the standard requirements.

115.17 Hiring and promotion decisions

Auditor Overall Determination: Exceeds Standard

Auditor Discussion

Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Division Chief Administrative Services

The interview with the Division Chief demonstrated background checks are completed every four years for personnel and contractors to ensure checks are completed timely, administrative adjudication questions are completed during the application process, annually and upon promotion, and modified criminal background checks are completed on all pending cases. The Division Chief stated institutional reference checks are completed during the hiring investigator process and the Administrative Services Department responds to all external institutional reference check requests. To date, the Division Chief has not had to overturn applicants who have disclosed past sexual harassment and affirmative duty must be disclosed within 24 hours.

Site Observation:

Through utilization of the PREA Audit Adult Prison & Jail Documentation Review Employee File/Records template, 26 of 26 employee files reviewed demonstrated each had background checks upon hire and within four years, thereafter. The facility was able to demonstrate administrative questions were asked during the application and promotion processes and institutional references are requested or attempted to be requested, during the hiring process. Contractor file review demonstrated each had a criminal background within four years and administrative adjudicated questions had been completed.

- (a) The Turner Guilford Knight Correctional Center PAQ states the agency policy

prohibits hiring or promoting anyone who may have contact with inmates and prohibits enlisting the services of any contractor who may have contact with inmates who: (1) 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); (2) 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 (3) Has been civilly or administratively adjudicated to have engaged in the activity described in paragraph (a)(2) of this section.

MDCR and CHS Policy IP-001, page 20, section XVII. Hiring, Promotions and Retention A. 1-3, states, "MDCR shall not hire or promote anyone who may have contact with inmates, or enlist the services of any contractor or volunteer who may have contact with inmates, who:

1. Has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institutions;
2. Has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, open or implied threats of force, or coercions, or if the victim did not consent or was unable to consent or refuse;
3. Has been civilly or administratively adjudicated to have engaged in the activity described in any paragraph in this section."

(b) The Turner Guilford Knight Correctional Center PAQ states agency policy requires the consideration of any incidents of sexual harassment when determining to hire and or promote anyone, or to enlist services of any contractor, who may have contact with inmates.

MDCR and CHS Policy IP-001, page 21, section XVII. Hiring, Promotions and Retention D., states, "MDCR will consider any incidents of sexual harassment when determining whether to hire or promote anyone or to enlist the services of any contractor, who may have contact with inmates."

(c/f) The Turner Guilford Knight Correctional Center PAQ states agency policy requires that before it hires any new employees who may have contact with inmates, it (a) conducts criminal background record checks, and (b) consistent with federal, state, and local law, makes 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. In the past 12 months, the number of persons hired who may have contact with inmates who have had criminal

background record checks was 90.

MDCR and CHS Policy IP-001, page 20-21, section XVII. Hiring, Promotions and Retention C 1.3., states, "Before hiring any new employees, who may have contact with inmates, MDCR shall:

1. Conduct criminal background record checks; and
2. 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, consistent with federal, state, and local law;
3. Criminal background records checks will be conducted on all current employees, volunteers, and contractors, who may have contact with inmates at least every five (5) years."

(d) The Turner Guilford Knight Correctional Center PAQ states the agency policy requires that a criminal background records check be completed before enlisting the services of any contractor who may have contact with inmates. In the past 12 months there were zero contracts for services where criminal background record checks were conducted on all contractors covered in the contract who might have contact with inmates.

MDCR and CHS Policy IP-001, page 20, section XVI. Hiring, Promotions and Retention B states, MDCR shall review all applicants, staff member, contractors or volunteers who may have contact with inmates directly about any previous allegations of sexual misconduct involving inmates as a part of the background review prior to hiring or promotional consideration for current staff members."

(e) The Turner Guilford Knight Correctional Center PAQ states the agency requires background checks to be completed every five years. Policy compliance can be found in provision (c) of this standard.

(g) The Turner Guilford Knight Correctional Center PAQ states that agency policy states that material omissions regarding such misconduct, or the provision of materially false information, shall be grounds for termination.

MDCR and CHS Policy IP-001, page 20, section XVII. Hiring, Promotions and Retention,

	<p>F., states, “Any material omission(s) regarding such misconduct, or the providing of materially false information, shall be grounds for termination.”</p> <p>(h) MDCR and CHS Policy IP-001, page 20, section XVI. Hiring, Promotions and Retention G., states, “MDCR shall provide other correctional agencies or prospective employers any information on substantiated allegations of sexual misconduct against a current or previous MDCR staff member, contractor, or volunteer who has applied for employment or to provide other services consistent with federal, state, and local law.”</p> <p>Through such reviews of the agency completing criminal background checks every four years for personnel and contractors and the completion of administrative adjudication questions upon hire, annually and during the promotion process, the facility exceeds the standard requirements.</p>
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115.18	Upgrades to facilities and technologies
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. Miami Dade County Memorandum – Surveillance Upgrades/Suicide Prevention Actions 2013-Present, dated 5.9.2024 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Director <p>Interviews with the Agency Director demonstrated the facility has installed over eight hundred cameras at the facility and plans were in place to add additional cameras. The Agency Director stated the facility and agency staff meet quarterly to assess the need for cameras to ensure the facility does not have blind spots.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the facility has not acquired a new facility or made substantial expansions or modifications to existing facilities since the last PREA audit.</p>

(b) The Turner Guilford Knight Correctional Center PAQ states the facility has installed electronic surveillance system since the last PREA audit.

The facility provided a Miami Dade County Memorandum – Surveillance Upgrades/ Suicide Prevention Actions 2013-Present providing information on a 5-year implementation schedule to modernize, increase and upgrade the surveillance and recording capabilities throughout each of their facilities.

Through such reviews, the facility meets the standard requirements.

115.21	Evidence protocol and forensic medical examinations
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Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023
3. Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol, not dated
4. Memorandum of Understanding, Roxcy Bolton Rape Treatment Center, dated 6.26.2024
5. Memorandum to File, Subject: PREA Standard 115.21 Evidence Protocol and Forensic Medical Examinations (Qualified Staff), dated 5.25.2023
6. Memorandum of Understanding, Miami-Dade Police Department, dated 6.22.2023

Interviews:

1. Contractor – Registered Nurse

The interview with the Registered Nurse demonstrated she is aware of signs and symptoms of sexual abuse and would immediately report allegations to the Shift Commander and contact the police department. The Registered Nurse stated all

victims of sexual abuse would be taken to the Roxy Bolten Rape Treatment Center based on her referral to facility personnel and the police department.

(a) The Turner Guilford Knight Correctional Center PAQ states the facility is responsible for conducting administrative sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct). The agency/facility is not responsible for conducting criminal sexual abuse investigations (including inmate-on-inmate sexual abuse or staff sexual misconduct).

If another agency has responsibility for conducting either administrative or criminal sexual abuse investigations, the name of the agency that has responsibility is the Miami-Dade Police Department.

MDCR and CHS Policy IP-001, page 17, section Investigation A., states, "MDPD - SVB shall conduct all criminal investigations involving allegations of sexual battery/abuse by inmate/patient or staff or sexual misconduct by staff, contractor, or volunteer. Upon completion of criminal investigations, SIAB shall conduct administrative investigations for alleged staff sexual misconduct and sexual harassment, if warranted, in accordance with DSOP 4-015 "Complaints, Investigations and Dispositions"; SIAB Staff shall also conduct investigations for inmate-on-inmate allegations of sexual battery/abuse/harassment, if warranted."

(b) The Turner Guilford Knight Correctional Center PAQ states the protocol is developmentally appropriate for youth.

Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol, page 2, section 1. The Sexual Assault Response Team Overview, first paragraph states, "The Sexual Assault Response Team (SART) model is widely recognized as the most effective approach for responding to sexual violence. The Miami-Dade Corrections and Rehabilitation Department (MDCR) SART Protocol is a guide for an effective response to sexual assault in any MDCR facility. This protocol will also assist the department to comply with the provisions of the Department of Justice's National Standards to Prevent, Detect, and Respond to Prison Rape, as required by the Prison Rape Elimination Act (PREA) of 2003."

(c) The Turner Guilford Knight Correctional Center PAQ states the facility offers all inmates who experience sexual abuse access to forensic medical examinations. Forensic examinations are offered at no cost to the victim. Where possible, all examinations are conducted by SAFE or SANE examiners. There have been zero forensic medical exams performed by SAFE/SANE in the last 12 months.

MDCR and CHS Policy IP-001, page 1, section Policy, fourth sentence, states, "MDCR and CHS shall ensure access to medical and mental health services, free of charge, to inmate/patient victims of sexual abuse."

The facility provided a Memorandum of Understanding, Roxcy Bolton Rape Treatment Center. Page one of the memorandum states, "The purpose of this Memorandum of Understanding is to comply with the Prison Rape Elimination Act (PREA) standards established by the U.S. Department of Justice. Specifically, the agreement established an operational understanding among the parties to facilitate crisis intervention services to incarcerated victims of sexual assault by providing a process for victim advocacy and qualifying sexual assault forensic exams 24 hours a day, 7 days a week (24/7)." The memorandum is signed by the Roxcy Bolton RTC Executive Director and the Miami Dade Corrections and Rehabilitation Department Interim Director on 6.27.2017.

(d) The Turner Guilford Knight Correctional Center PAQ states the facility attempts to make a victim advocate from a rape crisis center available to the victim, in person or by other means. All efforts are documented. If a rape crisis center is not available to provide victim advocate services, the facility provides a qualified staff or community member. Please note the Memorandum of Understanding with the Roxcy Bolton Rape Treatment Center is for both forensic exams and emotional support services.

MDCR and CHS Policy IP-001, page 22, section XIX. Inmates Access to Outside Confidential Support Services A.1., states, "Inmates who are alleged to have been the victim of sexual abuse will be provided with: 1. Access to outside victim advocates for emotional support services related to sexual abuse by contacting the Roxcy Bolton Rape Treatment Center via telephone at *9025# or via mail to 1611 N.W. 12th Avenue, 1st floor, room 116A, Miami, FL, 33136."

The facility provided a Memorandum of Understanding with the Roxcy Bolton Rape Treatment Center. The memorandum appears to be current and was signed on 6.26.2024 by the Public Health Trust of Miami-Dade County, Jackson Health System Chief Executive Officer and the Miami-Dade Corrections and Rehabilitation Department, Department Director.

(e) The Turner Guilford Knight Correctional Center PAQ states a qualified staff or community member accompanies and supports the victim through the forensic

medical examination process and investigatory interviews and provides emotional support, crisis intervention, information and referrals.

MDCR and CHS Policy IP-001, page 22, section XIX. Inmates Access to Outside Confidential Support Services B., states, "Inmates will be informed by a responding certified victim advocate, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, medical confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to medical confidentiality under the law."

The facility provided a Memorandum to File, Subject: PREA Standard 115.21 Evidence Protocol and Forensic Medical Examinations (Qualified Staff), from AVP & CHS Corporate Director, Corrections Health Services Jackson Health Systems. The memorandum states, "As it relates to the Prison Rape Elimination Act (PREA) Standard 115.21(d), Jackson Memorial Hospital Roxy Bolton Rape Treatment Center, provides victim advocacy 24 hours a day 7 days a week. However, if a rape crisis center is not available to provide advocacy services to a victim, the following staff members are qualified to provide assistance." The document lists the name, classification, facility and shift of 29 staff.

(f, g, h) The Turner Guilford Knight Correctional Center PAQ states the agency is responsible for investigating administrative or criminal allegations of sexual abuse and relies on another agency to conduct these investigations, the agency has requested that the responsible agency follow the requirements of paragraphs §115.21 (a) through (e) of the standards.

The facility provided a Memorandum of Understanding, Miami-Dade Police Department. The memorandum states "This Memorandum of Understanding outlines the collaboration and partnership of MDCR and MDPD to coordinate the investigation of criminal offense as defined by F.S.S 775.08, within MDCR facilities. MDPD agrees to respond to all MDCR facilities to investigate allegations of felonies and narcotics offenses within or adjoining the facilities and shall conduct any investigations as required by Florida law, Prison Rape Elimination Act (PREA), and this MOU. Adhere to PREA standards 115.21, 115.22, 115.71, 115.72 (Exhibit A) when investigating PREA-related allegations."

Through such reviews, the facility meets the standard requirements.

115.22	Policies to ensure referrals of allegations for investigations
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy DSOP: 4-015, Complaints, Investigations and Dispositions, dated 6.1.2022 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Correctional Officers 2. Correctional Sergeant Security Internal Affairs / PREA Investigator 3. PREA Compliance Manager 4. PREA Coordinator 5. Captain <p>Staff interviews demonstrated each would immediately report allegations of sexual abuse and sexual harassment to their immediate supervisor and or up the chain, regardless of the source of the allegation.</p> <p>Interviews with personnel demonstrated each allegation of sexual harassment or sexual abuse would be investigated regardless of the timeline of the report, if the report was received from an inmate transferred from another facility and or if the source of the allegation was verbal, through a grievance or inmate request form, anonymous or a third party.</p> <p>Site Observation:</p> <p>In the past 12 months the facility has completed five sexual harassment and 17 sexual abuse investigations. Of those 29 investigations 16 were referred to law enforcement and seven are ongoing sexual abuse investigations internally and externally with law enforcement.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency ensures that an administrative or criminal investigation is completed for all allegations of</p>

sexual abuse and sexual harassment (including inmate-on-inmate sexual abuse and staff sexual misconduct). In the past 12 months the facility has had 29 allegations of sexual abuse and sexual harassment that were received. In the past 12 months, the number of allegations resulting in an administrative investigation was 29. In the past 12 months, the number of allegations referred for criminal investigation was 25.

MDCR and CHS Policy DSOP: 4-015, Complaints, Investigations and Dispositions, page 11, section XIX: Reporting to Inmates Regarding PRA Related To Allegations, a-c., states, "PREA investigations and allegations require that MDCR ensures the following: A. Inform the inmate as to whether the allegation(s) has been substantiated, unsubstantiated, or unfounded. B. Request or inform the inmate of relevant information from the MDPD conducting the initial investigation. C. Inform the inmate of the following if the allegation was that a staff member committed sexual abuse against him/her (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 with the facility; or 4. The agency learns that the staff member has been convicted related to sexual abuse within the facility."

(b) The Turner Guilford Knight Correctional Center PAQ states if the agency is responsible for conducting administrative or criminal investigations of alleged sexual abuse, and another state entity has that responsibility, this other entity has a policy governing how such investigations are conducted is applicable.

The agency policy is available on the agency website at:
<https://www.miamidade.gov/global/corrections/corrections-reports.page>

(d) The Turner Guilford Knight Correctional Center PAQ states if the agency is not responsible for conducting administrative or criminal investigations of alleged sexual abuse, and another state entity has that responsibility, this other entity has a policy governing how such investigations are conducted.

Through such reviews, the facility meets the standard requirements.

115.31	Employee training
	Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.17.2023
3. Miami-Dade Corrections and Rehabilitating Department PREA 2023 Annual and Refresher PowerPoint Training
4. Miami Dade Corrections and Rehabilitation Department Refresher Training - Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 5.30.2023

Interviews:

1. Correctional Officers
2. PREA Coordinator

Formal and informal interviews with Correctional Officers demonstrated each were aware of and received initial, annual and refresher PREA trainings through email notifications reminding them to complete annual training in the agency learning management system and in person by the PREA team. When asking Correctional Officers questions regarding mandatory reporting laws, a notable percentage were unsure of mandatory reporting laws in the State of Florida.

Site Observation:

Through utilization of the PREA Audit Adult Prison & Jail Documentation Review Employee File / Records Review template, 20 of 27 employee training files demonstrated annual training and refresher training had been completed in 2023 and 2024. Seven of the 27 employees needed to complete either annual or refresher education.

Recommendation:

Train employees on mandatory reporting laws in the State of Florida. Facility response: This will be completed during annual refresher training.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency trains all employees who may have contact with inmates in all required provisions of this standard.

MDCR and CHS Policy IP-001, page 27, section XX, Training A., states, "MDCR staff, contractors, and volunteers who may have inmate/patient contact shall be trained and receive educational information on the prevention and detection of sexual battery/abuse/harassment. PREA training shall be conducted with new staff during orientation and all staff shall receive PREA refresher training every year (annually). Educational information and information on policy updates shall be provided to staff in between refresher training. Copies of the sign-off sheets or electronic verification documenting the training shall be forwarded to the Training Bureau and the PREA Coordinator. Refer to the Training Requirements for specific training topics. Training shall also be tailored to the gender of the inmates at the staff member's facility."

The facility provided a Miami-Dade Corrections and Rehabilitating Department PREA 2023 Annual and Refresher PowerPoint Training. Training slides 27-41 contain the following learning objectives.

a. Prevention:

- Intake screening
- Frisk/Strip search of LGVTI intimates during and after Intake Screening
- Classification Screening
- Prevention through Inmate Orientation
- Inmates' Right to be Free from Sexual Abuse/Harassment

b. Detection:

- Staff Observation
- Contributing Factors to Sexual Abuse
- Where does Sexual Abuse & Harassment Occur?
- Potential Sexual Abuse Victims
- Signs of Sexual Abuse

c. The Dynamics of Victimization

- Vulnerable Populations
- The Dynamics of Victimization
- Dynamics of Sexual Abuse in Confinements Settings

d. Reporting and Responding

- Verbally
 - In writing (e.g.: grievances, notes, letters)
 - Anonymously
 - From third parties (e.g.: family call)
 - How we respond to a PREA Incident
- e. Effective Communication with Victims of Sexual Abuse
- f. Avoiding and Identifying Inappropriate Relationships with Inmates
- g. Effective Communication with Lesbian, Gay, Bisexual, Transgender, Intersex (LGBTI) Inmates/Patients
- h. Inmate Sanctions
- i. Retaliation
- j. Confidentiality and the Law
- k. Your PREA Team

(b) The Turner Guilford Knight Correctional Center PAQ states training is tailored to the unique needs and attributes and gender of Inmates at the facility. Employees who are reassigned from facilities housing the opposite gender are given additional training. Procedure compliance can be found in the agency PowerPoint training.

(c) The Turner Guilford Knight Correctional Center PAQ states between trainings the agency provides employees who may have contact with inmates with refresher information about current policies regarding sexual abuse and sexual harassment.

The facility provided a Miami Dade Corrections and Rehabilitation Department Refresher Training - Inmate Sexual Battery/Abuse/Harassment Prevention and Response training course curriculum. The lesson goal states the following. "This course covers the provisions set forth in the Prison Rape Elimination Act (PREA) of 2003 and Florida Statutes 944.35 and 951.22. Miami-Dade Corrections and Rehabilitation Department (MDCR) along with Corrections Health Services (CHS) has established a "Zero Tolerance" stance for sexual misconduct incidents between inmates/patients, staff, contractors, and volunteers. These incidents shall be considered non-consensual, an abuse of authority, and is a violation of Florida Statutes, and MDCR/CHS Departmental Standard Operating Procedures/Interagency Policy.

	<p>This course will also address the prevention, intervention, treatment, investigation, tracking and reporting of inmate/patient on inmate/patient and staff on inmate sexual battery/abuse/harassment. MDCR/CHS shall make every effort to provide all inmates/patients with a safe, humane, and secure environment, free from the threat of sexual battery/abuse/harassment.”</p> <p>(d) The Turner Guilford Knight Correctional Center PAQ states the agency documents that employees who may have contact with inmates, understand the training they have received through employee signature or electronic verification.</p> <p>During the pre-audit phase the PREA Coordinator explained acknowledgements of understanding of education is completed in the learning management system.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.32	Volunteer and contractor training
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Miami Dade Corrections and Rehabilitation Department Orientation Video Checklist, not dated 4. Miami-Dade Corrections and Rehabilitation Department Volunteers and Contractual Personnel Regulations and Application, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Volunteer - Aftercare Worker 2. Contractor - Registered Nurse

3. Contractor – Licensed Clinical Social Worker

Interviews with the volunteer demonstrated he first received education on the agency zero tolerance policy and reporting requirements six years ago and again two years ago. The volunteer had a clear understanding of the agency policy and his duties to report to a certified officer.

Interviews with the contract medical and mental health providers demonstrated all members of their departments complete PREA education through an in-depth PowerPoint presentation inclusive of agency zero tolerance and specialized training for medical and mental health personnel. Both contractors stated they would immediately report to their supervisors and facility security personnel.

Site Observation:

Through utilization of the PREA Audit Adult Prison & Jail Documentation Review Employee File / Records Review template, three of three contractor and volunteer training files demonstrate each has completed education requirements before having access to inmates.

(a) The Turner Guilford Knight Correctional Center PAQ states all volunteers and contractors who have contact with Inmates have been trained on their responsibilities under the agency's policies and procedures regarding sexual abuse and harassment prevention, detection, and response. 103 total contract staff and volunteers who have contact with Inmates, have completed the required training.

MDCR and CHS Policy IP-001, page 23, section XXII. Training A., states, "MDCR and CHS staff, medical and mental health care practitioners, contractors, and volunteers with inmate/patient contact shall be trained and/or receive educational information on prevention and detection of sexual battery/abuse/harassment. The training shall be conducted upon new employee orientation and a refresher training every two years (every other year). Educational information and information on policy updates shall be provided to staff between refresher trainings. Copies of the sign-off sheets or electronic verification documenting the training shall be forwarded to the Training Bureau and the PREA Coordinator. Refer to the Training Requirements for specific training topics. Training shall also be tailored to the gender of the inmates at the employee's facility."

The facility provided a Miami-Dade Corrections and Rehabilitation Department Volunteers and Contractual Personnel Regulations and Application. Volunteers and

contractors attest to the following by printing, signing and dating the following on the application. "I have been informed that Miami Dade Corrections and Rehabilitation Department's has a zero tolerance policy regarding: sexual assault, sexual harassment, "consensual sex" with correctional staff, and inmate-inmate sexual assault, in accordance with Prison Rape Elimination Act (PREA) Standards 115.32, 115.132, 115.232, 115.332 "Volunteer and Contractor Training" and FS 944.35 "Authorized use of force; malicious battery and sexual misconduct prohibited; reporting required; penalties." I have been provided a copy of the MDCR PREA Response Card. I will abide by all policies, directives, rules, and regulations including those that address preserving the confidentiality of records and other privileged information."

(b) The Turner Guilford Knight Correctional Center PAQ states 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.

All volunteers and contractors who have contact with inmates have been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents.

(c) The Turner Guilford Knight Correctional Center PAQ states the agency maintains documentation confirming that the volunteers and contractors understand the training they have received.

The facility provided a Miami Dade Corrections and Rehabilitation Department Orientation Video Checklist demonstrating each have been informed of Inmate sexual abuse/assault awareness, prevention, response, and reporting procedures and inmate sexual abuse /assault confidentiality requirements. The checklist is affirmed through signature and date verifying viewing the MDCR Orientation Video, having been oriented on the aforementioned topics and understanding their contents.

Through such reviews, the facility meets the standard requirements.

115.33	Inmate education
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023
3. PREA Comprehensive Education – Information Session Handout, not dated
4. Miami-Dade Corrections and Rehabilitation PREA Comprehensive Education Acknowledgement, dated 10.13.2023
5. Reporting Posting, English, Spanish and Creole, not dated

Interviews:

1. Random Inmates
2. Targeted Inmates
3. Inmate Services Administrator Captain

Interviews with 30 random and 30 targeted inmates demonstrated PREA education of their rights, the agency sexual harassment and sexual abuse policy and reporting options were provided to them within the first week upon arriving to the facility, most on the day of arrival, which included options to report incidents of sexual abuse and sexual harassment through dialing the PREA hotline number, verbally reporting to a trusted staff, report through a third party, report anonymously, or report through grievances and or an inmate request form.

The interview with the Inmate Services Administrator Captain demonstrated when inmates arrive, they are given an inmate handbook and PREA pamphlet. The documents provide inmates information on how to keep free from sexual harassment and sexual assault, how to report internally and externally, facility rules and expectations, all personally explained to inmates. Once the inmate acknowledges s/he understands the PREA information personnel request they sign an Inmate PREA acknowledgment statement. The Inmate Services Administrator Captain then stated each morning at 4:45 am a report is generated with inmates who are pending comprehensive education when a team member visits the inmate in his or her unit and talks to them personally regarding their right to report, options for internal and external reporting, information regarding the facility PREA Compliance Manager and request the inmate sign an acknowledgement of their understanding of the information they have received.

Site Observation:

Utilizing the PREA Audit Adult Prison & Jail Documentation Review Inmate File /

Records Review template demonstrated, at first glance, that one inmate had received intake PREA education outside of the intake requirement and 12 inmates had completed comprehensive education after the required 30 days of intake. A member of the PREA team kindly explained the agency experienced a system error in May of 2024 which deleted information on PREA education to inmates. Since, all inmates were reeducated on PREA, and the facility was able to provide a dashboard report demonstrating all comprehensive education was delivered to inmates within two to 14 days of admission. Final review of inmate files demonstrated 22 of 30 inmates had been admitted into the facility within the past 12 months and each had received intake and comprehensive PREA education, timely.

(a) The Turner Guilford Knight Correctional Center PAQ states Inmates receive information at time of intake about the zero-tolerance policy and how to report incidents or suspicions of sexual abuse or sexual harassment. The number of inmates admitted in the past 12 months who were given this information at intake was 45,596.

MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, page 5, section B. Inmate Orientation, states, "All inmates/patients shall receive an orientation that addresses MDCR's zero tolerance for sexual battery/abuse/harassment. The Classification Officer shall provide the orientation within 72 hours after intake unless exigent circumstances exist, e.g., inmates/patients requiring detox. Inmates/patients shall:

1. View a video presentation on how to report incidents or suspicions of sexual battery/abuse/harassment, and the right to be free from retaliation for reporting such incidents;
2. Receive the Sexual Battery/Abuse/Harassment Awareness Pamphlet;
3. Receive an Inmate Handbook that includes information regarding prohibited acts, violations, and sanctions; how inmates/patients can protect themselves from sexual battery/abuse/harassment; and how to report sexual acts, etc.;
4. Be provided communication assistance, if the inmate has a hearing (deaf or hard of hearing), vision (blind or have low vision), or speech impairment; cognitive disabilities; as well as those who have limited reading skills or limited English proficiency that will prevent them from understanding MDCR's efforts to prevent, detect and respond to sexual abuse and sexual harassment. Communication assistance includes, but is not limited to:
 - a. Auxiliary aids,
 - b. Large print materials,
 - c. Qualified sign language interpreters,

d. MDCR Point Book,

e. Translation services for inmates with limited English proficiency;

5. The assistance provided shall be documented on an Incident Report;

6. MDCR staff shall not rely on inmate/patient interpreters, inmate/patient readers, or other types of inmate/patient assistants except in limited circumstances where an extended delay in obtaining an MDCR contracted interpreter could compromise the inmate/patient's safety or the performance of staff's responsibilities to act;

7. Sign the Inmate Orientation Statement form to acknowledge receipt and understanding of the information provided. The Classification Officer shall place the signed Inmate Orientation Statement form in the inmate/patient's Inmate Profile System folder;

8. Within 30 days of intake, inmates shall receive in person comprehensive education regarding their rights to be free from sexual abuse and sexual harassment and their right to be free from retaliation for reporting incidents, and regarding policies for responding to such incidents. All inmates shall receive the PREA Comprehensive Education - Information Session Handout."

(b) The Turner Guilford Knight Correctional Center PAQ states the number of those inmates admitted during the past 12 months (whose length of stay in the facility was for 30 days or more) who received comprehensive education on their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents within 30 days of intake was 2047.

(c) The Turner Guilford Knight Correctional Center PAQ states of those who were not educated during 30 days of intake, all inmates have been subsequently educated. Agency policy requires that inmates who are transferred from one facility to another be educated regarding their rights to be free from both sexual abuse and sexual harassment and retaliation for reporting such incidents and on agency policies and procedures for responding to such incidents, to the extent that the policies and procedures of the new facility differ from those of the previous facility.

(d) The Turner Guilford Knight Correctional Center PAQ states Inmate PREA education is available in accessible formats for all inmates including those who are limited English proficient, deaf, visually impaired, otherwise disabled or have limited reading skills. Policy compliance can be found in provision (a) of this standard.

(e) The Turner Guilford Knight Correctional Center PAQ states the facility maintains documentation of inmate participation in PREA education sessions.

The facility provided a Miami-Dade Corrections and Rehabilitation PREA Comprehensive Education Acknowledgment. The acknowledgment documents the following information.

- Facility Name
- Date
- Your signature below is a verification of the following:
 - o You have viewed the PREA Education Video and understand its contents
 - o You were afforded an opportunity to ask questions and Your questions were answered.
 - o You received a copy of the PREA comprehensive Education Information Session Handout, Sexual Batter/Abuse/Harassment Awareness Pamphlet and the Inmate Handbook.
- Name / Jail Number / Unit - Cell / Signature / Status - Completed-Refused
- Print MDCR Staff Name / Signature

(f) The Turner Guilford Knight Correctional Center PAQ states the agency ensures that key information about the agency's PREA policies is continuously and readily available or visible through posters, inmate handbooks, or other written formats.

The facility provided a Reporting Poster, in English, Spanish and Creole, providing the following information.

Miami-Dade Corrections & Rehabilitation Department Reporting Sexual Battery/Abuse/ Harassment

- If you become a victim of sexual abuse or you suspect abuse is taking place, you MUST do the following:
 - o Notify a staff member immediately!
 - o This means any Officer, Supervisor, Nurse, Counselor, Chaplain, Volunteer, or Contractor.
 - o You can also call the Miami Dade Police Department by dialing *9022#

	<ul style="list-style-type: none"> o Medical and mental health services will be provided to victims of sexual battery/ abuse free of charge. o *All calls made to this number are confidential. You may also wish to remain anonymous when reporting <p>Through such reviews, the facility meets the standard requirements.</p>
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115.34	Specialized training: Investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. Miami-Dade Corrections and Rehabilitation Department DSOP: 4-015, Complaints, Investigations and Dispositions, dated 2022 3. NIC PowerPoint Investigator Training Curriculum, not dated 4. PREA: Investigating Sexual Abuse in a Confinement Setting, Advanced Investigations Training Records <p>Interviews and on-site file review:</p> <ol style="list-style-type: none"> 1. Security and Internal Affairs Bureau (SIAB) PREA Investigator <p>The interview with investigators and personnel file review demonstrated investigators complete multiple specialized trainings to include face to face, computer based, Miami-Dade Police Department criminal classes, National Institution of Corrections education and agency zero tolerance policy training, annually.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency policy requires that investigators are trained in conducting sexual abuse investigations in confinement settings.</p> <p>Miami-Dade Corrections and Rehabilitation Department DSOP: 4-015, Complaints, Investigations and Dispositions, page 12, section XXI. Training A.-B., states,</p>

	<p>A. “Investigators who conduct sexual abuse investigations shall receive training on conducting investigations in confinement settings. Refer to IP 001 “inmate Sexual Battery / Abuse / Harassment Prevention and Response” For specific training topics. The Training Bureau shall maintain a copy of each employee’s training documentation for recordkeeping.</p> <p>B. Investigative: Investigators shall receive specialized investigative training on appropriate investigation policies and procedures, the investigation tracking process, interviewing techniques, and confidentiality requirements.”</p> <p>(b) The Turner Guilford Knight Correctional Center PAQ states investigator training has been completed on the National Institute for Corrections Specialized Investigator training website, which 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.</p> <p>(c) The Turner Guilford Knight Correctional Center PAQ states the agency shall maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations. The facility has 15 employees who have completed investigator training.</p> <p>The facility provided an Investigating Sexual Abuse Training Record demonstrating 60 agency personnel have completed PREA: Investigating Sexual Abuse in a Confinement Setting Training and 37 personnel have completed PREA: Investigating Sexual in a Confinement Setting Advanced Investigations.</p> <p>Through such reviews of agency assigning a PREA investigator on the Internal Affairs team and agency investigators completing multiple annual specialized trainings, the facility exceeds the standard requirements.</p>
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115.35	Specialized training: Medical and mental health care
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	Document Review:
	1. Turner Guilford Knight Correctional Center PAQ

2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023
3. Corrections Health Services PREA PowerPoint Training, dated 5.8.2024
4. Medical Training Records
5. PREA Clinical Health Services PREA Training Report, dated 6.6.2023

Interviews:

1. Contractor – Licensed Mental Health Counselor
2. Contractor – Director of Patient Care Services

Interviews with medical and mental health staff demonstrated each had completed specialized medical and mental health training to include the proper protocols of reporting, separating victims from abusive situations, acute and follow up care in accordance with their department responsibilities and agency zero tolerance policy education via PowerPoint presentation, annually.

Site Observation:

Medical and mental health staff certifications were uploaded to the online audit system during the pre-audit phase.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy related to the training of medical and mental health practitioners who work regularly in its facilities. 278 staff, 100% of medical and mental health staff who work at the facility who have received training required by agency policy.

MDCR and CHS Policy IP-001, page 23-24, section C. states, “CHS medical and mental health care staff who work regularly in the facilities are trained on the following:

1. How to prevent, detect, and assess signs of sexual abuse/harassment;
2. How to preserve evidence;
3. How to respond professionally to victims of sexual abuse/harassment;
4. How and when to report allegations or suspicions of sexual abuse/harassment;
5. CHS shall document completion of the training through employee’s signature or electronic verification.”

The facility provided Corrections Health Services PREA PowerPoint Training. Training components consist of the following.

In accordance with PREA Standards 115.31 Employee Training and 115.35 Specialized Training: Medical and Mental Health Care, all Medical and Mental Health Staff must be trained prior to contact with the inmate population.

- The Creation of the PREA Rape Elimination Act (PREA)
- Miami-Dade Corrections & Rehabilitation (MDCR) and Corrections Health Services (CHS) stance on PREA
- Prevention
- Detection
- Potential Sexual Abuse Victims
- The Dynamics of Victimization
- Reporting and Responding to PREA Related Incidents
- Effective Communications with Lesbian, Gay, Bisexual, transgender, Intersex (LGBTI) inmates/patients
- Avoiding Inappropriate Relationships with Inmates
- Inmate Sanctions
- Retaliation
- Confidentiality and the Law

(b) The Turner Guilford Knight Correctional Center PAQ states their medical staff do not conduct forensic medical exams.

(c) The Turner Guilford Knight Correctional Center PAQ states the agency maintains documentation showing that medical and mental health practitioners have completed the required training.

The facility provided Medical Training Records demonstrating 89 agency personnel have completed PREA Biennial Training. During the pre-audit phase, the PREA Coordinator stated Biennial Training consisted of the PowerPoint training for medical and mental health personnel initially and again, every two years.

	<p>The facility provided a PREA Clinical Health Services PREA Training Report with the facility medical and mental health six staff names highlighted to demonstrate each had successfully completed PREA Biennial training during the time period of 2023-2024.</p> <p>Through such reviews of medical and mental health personnel completing specialized training annually, facility exceeds the standard requirements.</p>
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115.41	Screening for risk of victimization and abusiveness
	<p>Auditor Overall Determination: Meets Standard</p>
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Inmate Information and Risk Screening Screen Prints 4. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concern - Standard 115.41 (j), dated 10.4.2024 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Inmates 2. Targeted Inmates 3. Classification Training Officer <p>Interviews with inmates demonstrated most had remembered being asked risk screening questions during the intake process and every one to two months thereafter. Inmates could speak to being asked risk screening questions during booking, by their counselors and by medical staff.</p> <p>The interview with the Classification Officer demonstrated risk screening questions are asked within 72 hours of intake; however, mental health, detox, high profile, public officials and transgender inmates are asked questions within one hour. The</p>

Classification Training Officer stated assessments are done in a private one on one interview area in intake and in each unit for reassessments where inmates are assessed for statute, current charge, sexual offense against a child or adult, weight, first time offenders, LGBTQI, aggression, past sexual abuse in or out of custody and if so, each are offered mental health, that offer being notated in the agency system with notes of declined or accepted offer being forwarded to Medical and Mental Health personnel. The Classification Officer stated reassessments are completed every 30, 60 and 90 days for all inmates.

Site Observation:

Utilization of the PREA Audit Adult Prison & Jail Documentation Review Inmate File / Records Review template demonstrated 22 of 30 inmates interviewed were admitted into the facility in the past 12 months. 21 of 22 initial assessments were completed within 72 hours and 22 of 22 reassessments were completed within 30 days of intake.

During the tour, four questions were observed to be printed on the intake officers window where the intake officer asked intakes questions regarding prior sexual abuse and how each identifies in front of all intakes in the intake area.

Action Plan:

- Ensure inmates are asked sensitive questions in a private one on one setting.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance providing sustainable action plan ensuring inmates are not asked sensitive questions outside of a private one on one setting. Memorandum must be dated, addressed to DOJ PREA Auditor, author name and provision number. (Re: 115.41).
- Upload completed documentation to the online audit system in provision 115.41(i).

Post audit the facility provided a memorandum from the Intake and Release Captain addressed to the PREA Auditor stating the following and photos to demonstrate the changes that have occurred. "Please find the corrective actions that the Intake and Release Bureau (IRB) has taken regarding the items of concern noted in the October 10th PREA Audit.

1. Area of Concern: Ensure inmates are asked sensitive questions in a private one-on-one setting. Corrective Action Taken: Maintenance Staff installed a barrier on to ensure privacy when answering sensitive questions."

(a) The Turner Guilford Knight Correctional Center PAQ states the facility has a policy that requires screening, upon admission or transfer, for risk of sexual abuse victimization or sexual abusiveness toward other Inmates.

MDCR and CHS Policy IP-001, page 2, section A. Inmate Assessments, states, “

All inmates/patients shall be assessed within 72 hours upon arrival into MDCR custody and upon transfer to another facility to determine their risk of becoming a victim and/or committing sexual battery/abuse/harassment. The assessment shall be used in determining the inmate/patient’s permanent classification and housing assignment, prior to being placed into general population or housed with another inmate/patient.

1. Assessment Criteria Screening criteria to assess inmates for risk of sexual victimization and abusiveness shall include, but not be limited to the inmate/patient’s:

- Disability status (mental, physical, developmental or no disability);
- Age;
- Limited English Proficiency (individuals who do not speak English as their primary language and who have a limited ability to read, speak, write, or understand English can be limited English proficient);
- Physical build;
- History of incarceration, criminal history of violence or exclusively nonviolent;
- History of sexual offenses;
- Gender identity expression, i.e., LGBTI and gender nonconforming;
- History of sexual victimization;
- Perception of vulnerability to victimization; and
- Charging status, e.g., being detained solely for immigration holds”

(b) The Turner Guilford Knight Correctional Center PAQ states the number of inmates entering the facility (either through intake or transfer) within the past 12 months (whose length of stay in the facility was for 72 hours or more) who were screened for risk of sexual victimization or risk of sexually abusing other inmates with 72 hours of their entry into the facility was 5029, 100% of inmates. Policy compliance can be found in provision (a) of this standard.

(c-e) The Turner Guilford Knight Correctional Center PAQ states the facility conducts risk assessments by using an objective screening instrument. The facility does not house inmates solely for civil immigration purposes.

The facility provided a PREA Risk Assessment comprised of the following components.

Inmate Name / Intake Date

Employee Name / Assessment Date

Screening Type: New Admission

Possible Victim Factors:

1. Victims of sexual assault in an institutional setting
2. Experienced prior sexual victimization in community
3. Youthful age (24 or younger in adult facility; 14 or younger in youth units)
4. Elderly (65 or older)
5. Small physical stature
6. Developmental disability / mental disability / physical disability
7. First time incarcerated
8. Lesbian/gay/bisexual/transgender/intersex/gender nonconforming/ (admitted or perceived)
9. Inmate has current or prior convictions for sex offenses against a child or adult
10. The inmate's criminal history is exclusively nonviolent
11. Does the inmate consider themselves vulnerable

Possible Predator Factors:

1. Previously perpetrated sexual abuse in an institutional setting
2. Prior acts of sexual abuse in community
3. Current or prior adjudication or convictions for violent offenses
4. History of prior institutional violence

Inmate signature and date

Victim Designation Process:

- If 'yes' to item #1, enter inmate as "Known Victim"
- If 'yes' to three or more items other than item #1, enter inmate as a "Potential Victim"
- Otherwise, designate inmate as a "Non-Victim"
- Scored Designation: (Check One) Known Victim / Potential Victim / Non-Victim
- Victim Over-ride (Check-One): No / Yes- "Potential victim to non-victim / Yes - "Non-victim to potential victim
- Basis for override:

Predator Designation Process:

- If 'yes' to item #1, enter inmate as "Known Predator"
- If 'yes' to two or more other than item #1, enter inmate as a "Potential Predator"
- Otherwise, designate inmate as "Non-Predator"
- Scored Designation: (Check One) Known Predator / Potential Predator / Non-Predator
- Predator Over-ride (Check-One): No / Yes- "Potential predator to non-predator / Yes - "Non-predator to potential predator
- Basis for override:

The facility provided screen print information to demonstrate inmate age is documented within the agency software database. During the pre-audit phase, the PREA Coordinator stated inmates are not detained in JDCR solely for immigration purposes.

(f) The Turner Guilford Knight Correctional Center PAQ states the policy requires that the facility reassess each inmate's risk of victimization or abusiveness within a set time period, not to exceed 30 days after the inmate's arrival at the facility, based upon any additional, relevant information received by the facility since the intake screening. The number of inmates entering the facility (either through intake or

transfer) within the past 12 months (whose length of stay in the facility was for 30 days or more) who were reassessed for their risk of sexual victimization or of being sexually abusive with 30 days after their arrival at the facility based upon any additional relevant information received since intake was 2103.

MDCR and CHS Policy IP-001, page 6, section D. PREA Reassessment 1. a., states, "The PREA reassessment shall be conducted within 30 days for all inmates as follows:

a. IRB Classification Unit shall:

1) Review the compiled report daily, containing the name and demographic information of identified inmates/patients that:

a. Remain in custody for 25 days,

b. Transferred to a new facility within the last 25 days

2) Distribute the report, on a daily basis, to each PCM via email;

3) Determine if a housing reassignment is needed for inmates/patients identified at risk."

(g) The Turner Guilford Knight Correctional Center PAQ states the policy requires that an inmate's risk level be reassessed 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.

MDCR and CHS Policy IP-001, page 6, section D. PREA Reassessment 1. a.-e., states, "Within a set time frame not to exceed 30 days from the inmate arrival at the facility, the facility will reassess all Inmates/patients risk of sexual victimization or abusiveness, and when warranted due to:

a. A referral, e.g., from CHS, Classification Unit, MDCR staff;

b. A request from the inmate/patient;

c. An incident of sexual abuse, activity, etc., while in custody;

d. Receipt of additional information, e.g., anonymous call received that impacts the inmate/patient's risk of sexual victimization or abuse;

e. A transfer to another MDCR facility."

	<p>(h) The Turner Guilford Knight Correctional Center PAQ states the policy prohibits disciplining inmates for refusing to answer (or for not disclosing complete information related to) questions regarding: (a) whether or not the inmate has a mental, physical, or developmental disability; (b) whether or not the inmate is or is perceived to be gay, lesbian, bisexual, transgender, intersex, or gender non-conforming; (c) whether or not the inmate has previously experienced sexual victimization; and (d) the inmate's own perception of vulnerability.</p> <p>MDCR and CHS Policy IP-001, page 5, section A. Inmate Assessments, 5. Inmates/ Patient’s Refusal to Disclose, states, “Inmates/patients shall not be disciplined for refusing to answer questions or not disclosing complete information in response to questions related to mental, physical, or developmental disability; inmate/patient sexual orientation; previous history of sexual victimization; or perception of vulnerability.”</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.42	Use of screening information
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Miami-Dade Corrections and Rehabilitation Department DSP: 18-017, Lesbian, Gay, Bisexual, Transgender, and Intersex Inmates, not dated <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Inmates 2. Targeted Inmates 3. Classification Training Officer 4. PREA Compliance Manager

5. PREA Coordinator

6. Captain

Interviews with two LEP, two gay, two bisexual, four cognitive, two transgender, two vulnerable, one inmate who reported sexual abuse in the facility and 15 random inmates demonstrated each was comfortable with their housing units. Both transgender and LGBTI inmates stated the units are mostly locked down during showers and they can shower alone in the individual showers. All inmates in the LGBTI categories stated they feel safe in their living units and got along well with their peers.

Interviews with Classification Training Officer, the PREA Compliance Manager and the PREA Coordinator demonstrated the medical, mental health and supervisory staff are the only staff who have access to completed risk assessments.

The interview with the PREA Compliance Manager demonstrated most vulnerable and aggressive inmates are assigned a room to themselves, closer to staff desks and the floor is closed during showers to ensure privacy.

Extensive discussions with the Captain demonstrated the Transgender Committee meets within three days of each transgender intake and every 30 days thereafter. Through discussion regarding inmate placement, the Captain was able to demonstrate through reports that victims and aggressors are placed in different housing units and any inmate who has been deemed 'known' aggressor is not allowed to work throughout the facility ensuring victims and aggressors are never isolated with one another.

Site Observation:

During the tour of 22 living unit's inmate cells were observed and inmates appeared to be housed alone, showers had privacy doors, and the mental health unit shower doors were frosted during the onsite review to provide privacy while showering and changing.

(a) The Turner Guilford Knight Correctional Center PAQ states the facility uses information from the risk screening required by §115.41 to inform 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.

MDCR and CHS Policy IP-001, page 2. Section A., Inmate Assessments, states, "All inmates/patients shall be assessed within 72 hours upon arrival into MDCR custody and upon transfer to another facility to determine their risk of becoming a victim and/or committing sexual battery/abuse/harassment. The assessment shall be used in determining the inmate/patient's permanent classification and housing assignment, prior to being placed into general population or housed with another inmate/patient."

MDCR and CHS Policy IP-001, page 4, section 3. Programs, states, "When assigning housing for an inmate/patient identified as a potential victim or perpetrator, the Classification Officer shall use information from the Victim and/or Predator Screening Instrument with the goal of keeping potential victims from perpetrators.

a. Classification Officers shall consider the following as possible overrides of the initial classification:

1. Inmate/Patient's history (self-reported, documented, or both) of sexual victimization in MDCR custody, and/or any other adult or juvenile detention facility;
2. Inmate/Patient's history (self-reported, documented, or both) of committing sexual battery/abuse/harassment;
3. Inmate/Patient's prior conviction for violent offense(s), and/or history of prior institutional violence or sexual abuse;
4. Inmates/patients identified by QMHP as at risk, e.g., previous victimization as related to PREA, transgender and/or intersex."

(b) The Turner Guilford Knight Correctional Center PAQ states the agency/facility makes individualized determinations about how to ensure the safety of each inmate. Policy compliance can be found in provision (a) of this standard.

(c) The Turner Guilford Knight Correctional Center PAQ states the agency/facility makes housing and program assignments for transgender, or intersex inmates in the facility on a case-by-case bases. Policy compliance can be found in provision (a) of this standard.

Through such reviews of the facility placing inmates in cells alone with the forethought of ensuring vulnerable inmates are placed near correctional officer desks and the facility meeting three days and every 30 days thereafter to ensure transgender inmates have their needs met, the facility exceeds the standard requirements.

115.43	Protective Custody
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 264 544 297">Auditor Discussion</p> <p data-bbox="256 340 523 374">Document Review:</p> <ol data-bbox="256 412 1347 562" style="list-style-type: none"> <li data-bbox="256 412 991 445">1. Turner Guilford Knight Correctional Center PAQ <li data-bbox="256 483 1347 562">2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p data-bbox="256 669 416 703">Interviews:</p> <ol data-bbox="256 741 715 846" style="list-style-type: none"> <li data-bbox="256 741 453 775">1. Corporal <li data-bbox="256 813 715 846">2. PREA Compliance Manager <p data-bbox="256 884 1437 1084">The interview with the Corporal demonstrated he had been in his position for three months. The Corporal could attest he had been instructed by supervisory staff that inmates placed in protective custody are to be allowed all privileges and or documentation must exist explaining why offerings are not available directly to the inmate.</p> <p data-bbox="256 1196 432 1229">Site Review:</p> <p data-bbox="256 1267 1481 1384">During the tour the Corporal provided information that one transgender person was in segregation; however, the inmate was present due to behavior issues, and nothing related to reasons involving PREA.</p> <p data-bbox="256 1496 1481 1778">(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy prohibiting the placement of inmates at high risk for sexual victimization in involuntary segregated housing unless and an assessment of all available alternatives has been made and a determination has been made that there is not available alternative means of separation from likely abusers. The number of inmates at risk of sexual victimization who were held in involuntary segregated housing for the past 12 months for one to 24 hours awaiting completion of assessment was zero.</p> <p data-bbox="256 1890 1481 2089">MDCR and CHS Policy IP-001, page 6, C. Protective Custody 2., states, "Inmates/ patients that have been a victim of sexual victimization or those who have been identified as being a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been conducted, and a determination has been made that there is no available</p>

alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/patient in involuntary segregated housing for less than 24 hours while completing the assessment.

1. Inmates/patients placed in segregated housing for this purpose shall have access to programs, privileges, education, and work opportunities to the extent possible. If an inmate/patient has restricted access to programs, privileges, education, or work opportunities, the following shall be documented on an MDCR Incident Report:

- a. The opportunities that have been limited;
- b. The duration of the limitation; and
- c. Reasons for such limitations.”

(c) The Turner Guilford Knight Correctional Center PAQ states the number of inmates at risk of sexual victimization who were assigned to involuntary segregated housing in the past 12 months, for longer than 30 days while awaiting alternative placement was zero.

(d) The Turner Guilford Knight Correctional Center PAQ states from a review of case files of inmates at risk of sexual victimization who were held in involuntary segregated housing in the past 12 months, the number of case files that include BOTH (a) a statement of the basis for facilities concern for the inmate’s safety, and (b) the reason or reason why alternative means of separation could not be arranged was zero.

(e) The Turner Guilford Knight Correctional Center PAQ states if an involuntary segregated housing assignment is made, the facility affords each such inmate a review every 30 days to determine whether there is a continuing need for separation from the general population. Policy compliance can be found in provision (a) of this standard.

MDCR and CHS Policy IP-001, pages 6, C. Protective Custody 3., states, “If an involuntary segregated housing assignment is made, the facility shall:

- a. Clearly document:
 - 1) The basis for the facility’s concern for the inmate’s safety, and
 - 2) The reason why no alternative means of separation can be arranged;
- b. Reassess the inmate/patient every 30 days to determine whether there is a

	<p>continuing need for separation from the general population.”</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.51	Inmate reporting
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Memorandum of Understanding, Miami-Dade Police Department, dated 6.2.2023 4. Miami-Dade Corrections & Rehabilitation Department – Reporting Sexual Battery / Abuse / Harassment Posting in English and Spanish Flyer 5. Miami-Dade Corrections and Rehabilitation Inmate Handbook, not dated 6. On Site Corrective Action: Miami-Dade County Memorandum, Subject: Corrective Action, dated 9.11.2024 7. On Site Corrective Action: Photo of Reporting Information on Rolling Phones <p>Interviews:</p> <ol style="list-style-type: none"> 1. Random Inmates 2. Targeted Inmates 3. Correctional Officers <p>Interviews with the 30 inmates demonstrated they were comfortable and aware they could report PREA by phone through the speed dial number posted near phones, report verbally to staff, through a grievance or telling a trusted adult in the community.</p> <p>Correctional Officers stated they would accept, and report allegations personally reported to them, through a note, grievance or through a third party.</p>

Site Observations:

Standardized PREA Reporting Sexual Battery / Abuse / Harassment PREA postings with the agency speed dial *9022# were witnessed throughout inmate housing units and throughout facility hallways and departmental areas. During the tour it was observed the mental health inmate housing units did not have the hotline posters available to them due to limited access outside of their cells.

During the onsite review the facility provided a corrective action memorandum, from the facility Captain, stating, "Inmates that are housed in the Mental Health Treatment Center (MHTC) and staged in the Intake and Release Bureau's (IRB) Rear Lobby Holding Cells use the rolling telephones so that the inmates can easily access the numbers. Corrective Action Taken: The Facilities Management Bureau (FMB) will affix signs with the PREA telephone contact numbers to MHTC's 16 rolling telephones and IRB's 2 rolling telephones. This project will be completed on Thursday, September 10, 2024. The picture below depicts how the signs will be affixed to the 18 rolling phones." During the onsite review the facility provided photo proof of reporting information, in three languages, affixed to rolling phones utilized in mental health living units.

During the onsite review the Auditor dialed *9022# from inmate phones in the Boot Camp and TGK inmate phones. A recording was available stating the caller had reached the Miami-Dade Police Departments' Sexual Crimes Unit and a message could be left confidentially and anonymously. The Auditor left a message explaining the reason for the call with instructions for a return call explaining what the agency does when a call is received from an inmate. The following day a message was retrieved on the Auditor personal cell phone stating a Miami-Dade investigator would come to the facility and begin an investigation regarding the allegation reported.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has established procedures allowing for multiple internal ways for inmates to report privately to agency officials about: (a) sexual abuse or sexual harassment; (b) retaliation by other inmates or staff for reporting sexual abuse and sexual harassment; and (c) staff neglect or violation of responsibilities that may have contributed to such incidents.

MDCR and CHS Policy IP-001, page 9, section V. Reports of Sexual Battery / Abuse / Harassment A. - B., states,

A. "All MDCR staff, contractors, and volunteers are required to immediately report

verbally and in writing any knowledge, suspicion, or information they receive regarding an incident of sexual abuse, sexual harassment, retaliation, or neglect resulting in retaliation that occurred in a facility, even if that facility is not a MDCR detention facility. Reports of sexual abuse and sexual harassment of inmates may be submitted privately to any MDCR Supervisor or any other facility supervisor.

B. Inmates/patients may report verbally, in writing, or through a third party to any MDCR/CHS staff, contractor, or volunteer at any time, regardless of when the incident may have occurred or if it occurred while in the custody of MDCR.”

The facility provided a Miami-Dade Corrections & Rehabilitation Department – Reporting Sexual Battery/Abuse/Harassment posting in English and Spanish. The posting provides the following information.

REPORTING SEXUAL BATTERY/ABUSE/HARASSMENT

If you become a victim of sexual abuse or you suspect abuse is taking place, you MUST do the following:

- Notify a staff member IMMEDIATELY! This means any Officer, Supervisor, Nurse, Counselor, Chaplain, Volunteer, or Contractor.
- You can also call the Miami Dade Police Department by dialing *9022#
- Medical and mental health services will be provided to victims of sexual battery/abuse free of charge.
- *All calls made to this number are confidential. You may also wish to remain anonymous when reporting.

(b) The Turner Guilford Knight Correctional Center PAQ states facility 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 the agency. The agency does not have a policy requiring inmates detained solely for civil immigration purposes be provided information on how to contact relevant consular officials and relevant officials of the Department of Homeland Security.

The facility provided a Memorandum of Understanding between the Miami-Dade Corrections and Rehabilitation Department and Miami-Dade Police Department. The purpose of this agreement is to report any allegations of any felonies or narcotics violations within this facility. This agreement appears to be current without a termination date unless provided by either party in writing. The agreement is signed on 6.22.2023.

	<p>The facility provided a Miami-Dade Corrections Inmate Handbook demonstrating external hotline information is provided on page 2.</p> <p>(c) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy mandating that staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties. Staff are required to document verbal reports. Policy compliance can be found in provision (a) of this standard.</p> <p>(d) The Turner Guilford Knight Correctional Center PAQ states the agency has established procedures for staff to privately report sexual abuse and sexual harassment of inmates. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.52	Exhaustion of administrative remedies
	<p>Auditor Overall Determination: Meets Standard</p> <hr/> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Miami-Dade Corrections and Rehabilitation Department DSOP: 15.001, Inmate Complaint / Grievance Process, dated 2020 4. Miami-Dade Corrections and Rehabilitation Department Inmate Grievances by Type, dated 5.1.2023 - 4.30.2024 5. Miami-Dade Corrections and Rehabilitation Department Grievance Response Time, dated 4.14.2024 - 5.14.2024 6. Miami-Dade Corrections and Rehabilitation Inmate Handbook, not dated <p>Interviews:</p>

1. Random Inmates
2. Targeted Inmates
3. PREA Compliance Manager

Interviews with inmates demonstrated most were aware of the grievance procedures, stated grievances can be completed on the kiosk or they are easily obtained through a verbal request to a Correctional Officer. Inmates stated they have access to or have writing utensils at all times unless they are in a mental health unit, an officer would help them complete the grievance.

The interview with the PREA Compliance Manager demonstrated grievances could be handed to staff or placed in grievance boxes located in each unit. The PREA Compliance Manager stated grievance boxes are checked twice daily.

Site Observation:

During the tour grievance boxes were observed in each living unit. Grievance boxes are clearly labeled and at an accessible height for all inmates.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has an administrative procedure for dealing with Inmate grievances regarding sexual abuse.

MDCR and CHS Policy IP-001, page 9, section V. Reports of Sexual Battery/Abuse/ Harassment D. 1-2., states, "Inmate/patient reports may be submitted verbally, or in writing, through the Inmate Grievance process, anonymously, or from third parties, e.g., outside agencies, family, volunteers, etc.

1. If a grievance is filed by a third party, the inmate/patient may decline in writing to have the complaint investigated. MDCR staff must document via incident report the inmate decision to decline;
2. If the inmate agrees to have the allegation processed on his/her behalf MDCR staff must initiate the PREA Protocol, which is outlined in this policy."

Miami-Dade Corrections and Rehabilitation Department DSOP: 15.001, Inmate Complaint / Grievance Process, page 4, section VIII. Emergency Complaint/Grievance B. states, "An emergency complaint/grievance includes, but is not limited to the following: Sexual battery, sexual abuse, and/or sexual harassment."

(b) The Turner Guilford Knight Correctional Center PAQ states agency policy or procedure allows an inmate to submit a grievance regarding an allegation of sexual abuse at any time, regardless of when the incident is alleged to have occurred.

Miami-Dade Corrections and Rehabilitation Department DSOP: 15.001, Inmate Complaint / Grievance Process, page 2, section V. Access to The Grievance Process, B., states, "There is no time limit for inmates to submit a grievance for alleged sexual battery, sexual abuse, and/or sexual harassment Inmate request drop boxes are secured a maintained by MDCR."

(c) The Turner Guilford Knight Correctional Center PAQ states the agency's policy and procedure allows an inmate to submit a grievance alleging sexual abuse without submitting it to the staff member who is the subject of the complaint. The agency's policy and procedure require that an inmate grievance alleging sexual abuse not be referred to the staff member who is the subject of the complaint. Policy compliance can be found in provision (a) of this standard.

MDCR and CHS Policy IP-001, page 18, section XIII. Inmate Grievances Alleging Sexual Abuse/Harassment, B., states, "Inmates are not required to use an informal grievance process, to resolve an alleged incident of sexual abuse with any staff, volunteer, or contractor."

(d) The Turner Guilford Knight Correctional Center PAQ states the agency's policy and procedures that require a decision on the merits of any grievance or portion of a grievance alleging sexual abuse be made within 90 days of the filing of the grievance. In the past 12 months there have been 46 grievances filed alleging sexual abuse. In the past 12 months, the number of grievances alleging sexual abuse that reached final decision within 90 days after being filed was 46.

MDCR and CHS Policy IP-001, page 19, section Inmate Grievances Alleging Sexual Abuse/Harassment, G. 2., states, "A final decision on the merits of any portion of a grievance alleging sexual abuse shall be issued within 90 days of the initial filing of the grievance even when the inmate is out of the care, custody, and control of MDCR."

The facility provided a Miami-Dade Corrections and Rehabilitation Department Inmate Grievances by Type, through the period of 5.1.2023 - 4.30.2024. The grievance log documents the following information.

- Facility
- Grievance Type
- Grievance SUB-T
- Control Number
- Inmate Name
- EMRG
- DOC Input By
- Part VI Input By
- Entity Staff
- IMP Follow UP Comp
- IA
- ACPT
- Griev Date
- APLD
- Date Offered to Inmate
- Griev Closed Date
- # of workdays Inmate received response

The grievance log demonstrates each grievance was responded to in one to 14 days.

(e) The Turner Guilford Knight Correctional Center PAQ states agency policy and procedure permits third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse and to file such requests on behalf of inmates. Agency policy and procedure requires that if an inmate declines to have third-party assistance in filing a grievance alleging sexual abuse, the agency documents the inmate's decision to decline. The number of grievances alleging sexual abuse filed by inmates in the past 12 months in which the inmate declined third-party assistance, containing documentation of the inmate's decision to decline was zero.

MDCR and CHS Policy IP-001, page 19, section Inmate Grievances Alleging Sexual Abuse/Harassment, D., states, "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 agrees 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.”

(f) The Turner Guilford Knight Correctional Center PAQ states the facility has a policy and established procedures for filing an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse. The facilities policy and procedures for emergency grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours. The facilities policy and procedure for emergency grievances alleging substantial risk of imminent sexual abuse require that a final agency decision be issued within five days. 46 grievances were received alleging substantial risk of imminent sexual abuse, which were filed in the past 12 months.

The number of those grievances in 115.52(e)-3 that had an initial response within 48 hours was two. The number of grievances alleging substantial risk of imminent sexual abuse filed in the past 12 months that reached final decisions within 5 days was four. During the pre-audit phase the PREA Coordinator provided the following information. “The responsibility of a Correctional Counselor is to identify an emergency grievance from the inmate(s) housing location and immediately deliver the emergency grievance to the Jail Operations Shift Commander to address immediately. As of September 07, 2023, once the emergency grievance is provided to the Shift Commander, a copy of the grievance will be given to the Classification Inmate Management Inmate Services Technician for processing in the Inmate Grievance System.

All 46 grievances were taken to the Shift Commander as soon as a Correctional Counselor received an emergency grievance. However, all 46 grievances were initiated for the Jail Operations Shift Commander to address. The documentation of this process is updated and indicated in the Grievance System.”

MDCR and CHS Policy IP-001, page 19, section Inmate Grievances Alleging Sexual Abuse/Harassment, G. 1., states, “Grievances alleging substantial risk of imminent sexual abuse require an initial response within 48 hours, and a final response will be issued within five (5) days.”

(g) The Turner Guilford Knight Correctional Center PAQ states the facility has a written policy that limits its ability to discipline an inmate for filing a grievance alleging sexual abuse to occasions where the agency demonstrates that the Inmate filed the grievance in bad faith. In the past 12 months, there have been zero grievances alleging sexual abuse to occasions where the agency demonstrated that

	<p>the Inmate filed the grievance in bad faith.</p> <p>MDCR and CHS Policy IP-001, page 19, section Inmate Grievances Alleging Sexual Abuse/Harassment, F., states, “An inmate will not be disciplined for filing a grievance or making a report related to alleged sexual abuse, unless it is DEMONSTRATED that the inmate filed the grievance in bad faith.”</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.53	Inmate access to outside confidential support services
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Memorandum of Understanding, Roxcy Bolton Rape Treatment Center, dated 6.26.2024 4. On Site Corrective Action: Miami-Dade County Memorandum, Subject: Corrective Action, dated 9.11.2024 5. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concern, dated 10.2.2024 <p>Interviews:</p> <ol style="list-style-type: none"> 2. Random Inmates 3. Targeted Inmates 4. PREA Coordinator <p>Interviews with 30 random and 30 targeted inmates demonstrated most were aware of the Roxy Bolton Rape Center and the advocacy services they provide. Inmates could speak to postings “all over the facility” with outside reporting information and dialing directions.</p>

The interview with the PREA Coordinator demonstrated inmates who were not allowed handbooks, which provide inmates with reporting information to advocacy information, are primarily in the mental health unit and are not allowed an inmate handbook, until those mental health or detox inmates are removed from Level 1 status to Level 2 status.

Site Observation:

During the tour advocate postings with phone number information were observed with the advocate's name and a speed dial number of *9025#.

During the tour the Auditor contacted the advocacy agency through an inmate payphone. The operator stated the agency would take inmate information and provide crisis intervention services; however, the agency would not report the allegations of abuse but would instruct the inmate to call the Miami-Dade Police Department. The operator stated an advocate would meet victims at the hospital during a forensic exam and provide ongoing phone emotional support services via the telephone. The operator stated advocates complete initial 40-hour advocate training and annual eight-hour trainings or more depending on current grant requirements.

On Site Corrective Action: The facility provided a memorandum from the facility Captain addressed to the DOJ PREA Auditor stated, "The Office of Compliance and Policy and Planning Bureau (PPB) will order the advocacy signs in English, Spanish and Creole that include the Roxy Bolton Rape Treatment Center's address. FMB will hang the signs on a wall in front of the units' observation chairs so that the MHTC inmates will have access to the address. This project will be completed by Friday, October 4, 2024."

Action Plan:

- Facility to provide all inmates advocate telephone and address information.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance providing sustainable action plan ensuring inmates are consistently provided advocate address and telephone information. Memorandum must be dated, addressed to DOJ PREA Auditor, author name and provision number. (Re: 115.53 (a)).
- Upload completed documentation to the online audit system in provision 115.53(a).

Post audit the facility provided a memorandum from the TGKCC Captain addressed to the DOJ PREA Auditor with the following text and photos to demonstrate implementation has occurred. "Please find the corrective actions taken by Turner Guilford Knight Correctional Center (TGKCC) in response to the items of concern noted in the September 10-11, 2024, PREA Audit.

1. Area of Concern: Standard 115.53 (a): Corrective Action Taken: Inmates assigned to the Mental Health Treatment Center Units are provided access to the Roxy Bolton advocate's telephone and address information. Signage is posted on the pillars in front of the observation chairs and rolling phones in units. The unit supervisor, along with line staff assigned to the units, will ensure that signage is visible and properly posted."

(a) The Turner Guilford Knight Correctional Center PAQ states the facility provides inmates with access to outside victim advocates for emotional support services related to sexual abuse by:

- The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for local, state, or national victim advocacy or rape crisis organizations.
- The facility provides inmates with access to such services by giving inmates mailing addresses and telephone numbers (including toll-free hotline numbers where available) for immigrant services agencies for persons detained solely for civil immigration purposes.
- The facility provides inmates with access to such services by enabling reasonable communication between inmates and these organizations in as confidential a manner as possible.

MDCR and CHS Policy IP-001, page 22, section XIX. Inmates Access to Outside Confidential Support Services, A. 1-3., states, "Inmates who are alleged to have been the victim of sexual abuse will be provided with:

2. Access to outside victim advocates for emotional support services related to sexual abuse by contacting the Roxcy Bolton Rape Treatment Center via telephone at *9025# or via mail to 1611 N.W. 12th Avenue, 1st floor, room 116A, Miami, FL, 33136;
3. Providing mailing addresses and telephone numbers of victim advocacy or rape crisis organizations;
4. Opportunities for reasonable communication between inmate victims and outside victim advocates in as confidential a manner as possible."

(b) The Turner Guilford Knight Correctional Center PAQ states the facility informs inmates, prior to giving them access to outside support services, the extent to which such communications will be monitored. The facility informs inmates, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to confidentiality under relevant Federal, State, or local law.

MDCR and CHS Policy IP-001, page 22, section XIX. Inmates Access to Outside Confidential Support Services, B., states, "Inmates will be informed by a responding certified victim advocate, prior to giving them access to outside support services, of the mandatory reporting rules governing privacy, medical confidentiality, and/or privilege that apply for disclosures of sexual abuse made to outside victim advocates, including any limits to medical confidentiality under the law.

(c) The Turner Guilford Knight Correctional Center PAQ states the facility maintains memoranda of understanding with community service providers that are able to provide inmates with emotional support services related to sexual abuse.

The facility provided a Memorandum of Understanding, Roxcy Bolton Rape Treatment Center. Page one of the memorandum states, "The purpose of this Memorandum of Understanding is to comply with the Prison Rape Elimination Act (PREA) standards established by the U.S. Department of Justice. Specifically, the agreement established an operational understanding among the parties to facilitate crisis intervention services to incarcerated victims of sexual assault by providing a process for victim advocacy and qualifying sexual assault forensic exams 24 hours a day, 7 days a week (24/7)."

Through such reviews, the facility meets the standard requirements.

115.54	Third-party reporting
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. Agency Standardized PREA Postings in English, Spanish and Creole

Interviews:

1. Random Inmates
2. Targeted Inmates
3. Correctional Officers

Interviews with inmates demonstrated many were aware of third-party reporting to a trusted adult in the community.

Interviews with Correctional Officers demonstrated they were aware of third-party reporting, and each stated they would report any allegation reported through a third party or otherwise.

Site Observation:

During the tour standardized PREA postings with the agency zero tolerance notice, internal and external reporting options were observed.

(a) The Turner Guilford Knight Correctional Center PAQ states the facility provides a method to receive third-party reports of inmate sexual abuse or sexual harassment. The agency publicly distributes information on how to report Inmate sexual abuse or sexual harassment on behalf of inmates. The PAQ states, "Internally we distribute information via pamphlet and inmate handbook that advises the population that they can file a report. We also have a prompt in the video visitation screen that advises of our zero-tolerance policy and instructs visitors on how to report. We also have the see something say something hotline number and the number to Internal Affairs published on the agency website."

The facility provided an 'Attention All Visitors / Professionals' posting providing two reporting entities and phone numbers.

Through such reviews, the facility meets the standard requirements.

115.61	Staff and agency reporting duties
	<p data-bbox="256 188 959 221">Auditor Overall Determination: Meets Standard</p> <hr/> <p data-bbox="256 266 544 300">Auditor Discussion</p> <p data-bbox="256 344 523 378">Document Review:</p> <ol data-bbox="256 412 1347 562" style="list-style-type: none"> <li data-bbox="256 412 991 445">1. Turner Guilford Knight Correctional Center PAQ <li data-bbox="256 479 1347 562">2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p data-bbox="256 669 416 703">Interviews:</p> <ol data-bbox="256 736 1289 848" style="list-style-type: none"> <li data-bbox="256 736 620 770">1. Correctional Officers <li data-bbox="256 815 1289 848">2. Correctional Sergeant Security Internal Affairs Bureau - Investigator <p data-bbox="256 882 1442 1005">Interviews with the facility personnel demonstrated each actively practices and understood the importance of immediately reporting all allegations of sexual abuse and sexual harassment to their immediate supervisor or supervisory staff.</p> <p data-bbox="256 1106 517 1140">Site Observations:</p> <p data-bbox="256 1173 1453 1386">The facility has had 28 investigations in the past 12 months of which 12 of those investigations were reviewed during the onsite review. Of the 12 investigations the reporting source of those allegations were received through hotline calls, third party reports from law enforcement, grievances, verbally to facility personnel and victim statements.</p> <p data-bbox="256 1487 1481 1868">(a/c) The Turner Guilford Knight Correctional Center PAQ states the agency requires all staff to report immediately and according to agency policy any knowledge, suspicion, or information they receive regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency. The agency requires all staff to report immediately and according to agency policy any retaliation against inmates or staff who reported such an incident. The agency requires all staff to report immediately and according to agency policy any staff neglect or violation of responsibilities that may have contributed to an incident or retaliation.</p> <p data-bbox="256 1968 1449 2092">MDCR and CHS Policy IP-001, page 9, section V. Reports of Sexual Battery/Abuse/Harassment, A., states, "All MDCR staff, contractors, and volunteers are required to immediately report verbally and in writing any knowledge, suspicion, or information</p>

they receive regarding an incident of sexual abuse, sexual harassment, retaliation, or neglect resulting in retaliation that occurred in a facility, even if that facility is not a MDCR detention facility. Reports of sexual abuse and sexual harassment of inmates may be submitted privately to any MDCR Supervisor or any other facility supervisor.”

(b) The Turner Guilford Knight Correctional Center PAQ states, apart from reporting to designated supervisors or official and designated state or local service agencies, agency policy prohibits staff from revealing any information related to a sexual abuse report to anyone other than to the extent necessary to make treatment, investigation, and other security and management decisions.

MDCR and CHS Policy IP-001, page 9, section V. Reports of Sexual Battery/Abuse/ Harassment, G. 3., states, “Staff shall not disclose any information regarding an inmate/patient’s report of allegations of sexual battery/abuse/harassment to anyone other than those required to provide treatment, conduct investigations, and/or make security and management decisions.”

(d) MDCR and CHS Policy IP-001, page 9, section V. Reports of Sexual Battery/Abuse/ Harassment, F., states, “All allegations of sexual abuse of victims under the age of 18 or who are considered a vulnerable adult under Florida law shall be reported by the PREA Compliance Manager to the Florida Department of Children and Families, as required under Florida law.

Through such reviews, the facility meets the standard requirements.

115.62	Agency protection duties
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>Interviews:</p>

	<ol style="list-style-type: none"> 1. Correctional Officers 2. PREA Coordinator 3. Captain 4. Agency Director <p>Interviews with administrative staff demonstrated the facility staff act promptly at the discovery of any incident involving sexual harassment or sexual abuse regardless of the reporting source.</p> <p>Site Observation:</p> <p>Investigation file review demonstrated inmates who reported sexual harassment or sexual abuse were separated from their abuser on the day the allegation was reported.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states when the agency or facility learns that an inmate is subject to a substantial risk of imminent sexual abuse, it takes immediate action to protect the Inmate. In the past 12 months, the facility reports zero inmates were subject to substantial risk of imminent sexual abuse. Upon discovery of inmates being subject to substantial risk, the facility immediately separates the victim from the perpetrator, made notification and completed incident reporting requirements.</p> <p>MDCR and CHS Policy IP-001, page 4, section 3. b., states, "Inmates/patients determined to be at risk of becoming a victim or committing sexual battery/abuse/harassment shall be housed in direct supervision housing to ensure their safety and safety of other inmates/patients."</p> <p>Through such reviews the facility meets the standard requirements.</p>
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115.63	Reporting to other confinement facilities
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Captain

The interview with the Captain demonstrated that she was aware that upon receiving an allegation that an inmate was sexually abused, while the inmate had been confined at another facility, she would reach out to the head of the facility within 72 hours, complete an incident report and ensure Turner Guilford Knight staff assist the facility completing the investigation.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy requiring that, upon receiving an allegation that an inmate was sexually abused while confined at another facility, the head of the facility must notify the head of the facility or appropriate office of the agency or facility where sexual abuse is alleged to have occurred. The agency's policy also requires that the head of the facility notify the appropriate investigative agency. In the past 12 months the facility has received zero allegations that an inmate was abused while in confinement at another facility. The PAQ states, "In the event, an allegation is received that an inmate was abused while confined at another agency, we initiate the PREA Protocol here internally, generate an incident report, contact the affected agency, and document such notification. If the allegation occurs outside of normal business hours, the facility supervisor must contact the affected facility/bureau supervisor or the appropriate office."

MDCR and CHS Policy IP-001, page 10, section G. 4., states, "If an allegation is received that an inmate/patient was sexually assaulted or abused while confined at another correctional facility or by an employee of a law enforcement agency, the Facility/Bureau Supervisor informed of this information shall ensure:

- a. The facility/agency head is notified as soon as possible but no later than 72 hours after receiving the allegation;
- b. The notification is documented;
- c. The MDCR PREA Coordinator is notified."

(b) The Turner Guilford Knight Correctional Center PAQ states agency policy requires that the facility head provides such notification as soon as possible, but no later than

	<p>72 hours after receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p>(c) The Turner Guilford Knight Correctional Center PAQ states the facility documents that it has not had a need to provide such notification within 72 hours of receiving the allegation. Policy compliance can be found in provision (a) of this standard.</p> <p>(d) The Turner Guilford Knight Correctional Center PAQ states facility policy requires that allegations received from other agencies or facilities are investigated in accordance with the PREA standards. In the last 12 months, there have been zero allegations of sexual abuse. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.64	Staff first responder duties
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Correctional Officers <p>Interviews with Correctional Officers demonstrated they were aware of their first responder responsibilities. If sexual abuse occurred, Correctional Officers stated they would separate victims and aggressors to an area where they did not have access to water, ensure neither eats, drinks, changes clothes or otherwise disturbs evidence on their bodies and or in the area where the incident had taken place. Each stated they would immediately notify supervisory staff upon receiving, hearing or if they had a suspicion of sexual harassment or sexual abuse with an inmate and or personnel.</p>

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a first responder policy for allegations of sexual abuse. The policy requires that, upon learning of an allegation that an inmate was sexually abused, the first security staff member to respond to the report shall be required to separate, preserve, protect, collect 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. 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.

In the past 12 months, 17 allegations occurred where an inmate was sexually abused. Of these allegations, the number of times the first security staff member to respond to the report separated the alleged victim and abuser was 17. In the past 12 months, there were 17 allegations where staff were notified within a time period that allowed for the collection of evidence. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report preserved and protected any crime scene until appropriate steps could be taken to collect any evidence was 17. Of these allegations in the past 12 months where staff were notified within a time period that still allowed for the collection of physical evidence, the number of times the first security staff member to respond to the report requested 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 was 17.

MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, page 10-11, section VI. Response to Reports of Inmate-On-Inmate Sexual Battery/Abuse, A. 1.-2., states, "When staff receives a report of an inmate/patient's being at imminent risk or an alleged victim of inmate-on-inmate sexual battery/abuse, the following procedures shall be adhered to:

1. Sworn staff shall:

- a. Immediately separate the alleged victim from the alleged perpetrator;
- b. If the abuse occurred within a time period that still allows for the collection of physical evidence, request that the alleged victim and alleged perpetrator not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating;
- c. Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence;

	<p>d. Notify the Area Supervisor and Shift Supervisor/Commander immediately;</p> <p>e. Initiate an Incident Report (staff shall not input any victim’s information or assault details into the Criminal Justice Information System, in accordance with FS 119 and 794.024) and Physical Sight Check Sheet;</p> <p>f. Initiate disciplinary process in accordance with DSOP 16-001 “Inmate Disciplinary Procedures.”</p> <p>2. Non-Sworn staff shall:</p> <p>a. Immediately separate the alleged victim from the alleged perpetrator;</p> <p>b. 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, drinking, or eating;</p> <p>c. Notify a sworn staff member and the Shift Supervisor/Commander immediately;</p> <p>d. Document and submit a written statement to the Shift Supervisor/Commander prior to the end of the shift that the incident occurred on. Initiate an Incident Report (staff shall not input any victim’s information or assault details into the Criminal Justice Information System, in accordance with FS 119 and 794.024) and Physical Sight Check Sheet.”</p> <p>(b) The Turner Guilford Knight Correctional Center PAQ states the facility’s’ policy requires that if the first staff responder is not a security staff member, that responder shall be required to request that the alleged victim not take any actions that could destroy physical evidence and notify security staff. Of the allegations that an inmate was sexually abused made in the past 12 months, the number of times a non-security staff member was the first responder was zero. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.65	Coordinated response
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023
3. Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol, not dated

Interviews:

1. Captain

The interview with the Captain demonstrated the Coordinated Response is available on the agency mainframe and very easy for all staff to access.

Site Observation:

Review of the facilities Coordinated Response Plan demonstrates clear direction is provided to staff to ensure first responder duties are fulfilled.

(a) The Turner Guilford Knight Correctional Center PAQ states the facility developed a written institutional 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 facility provided a Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol. Components of the protocol include the following.

- Sexual Assault Response Team
- Goal of the SART
- Leadership Role of the MDCR SARTs
- MDCR SARTG Structure
- Initiating the SART Response
- Facility-SART Process Timeline
- SART Competencies and Training Requirements
- Sexual Assault Incident Reviews

	Through such reviews, the facility meets the standard requirements.
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115.66	Preservation of ability to protect inmates from contact with abusers
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. Collective Bargaining Agreement Between Miami-Dade County, Florida and The South Florida Police Benevolent Association Law Enforcement Supervisory Unit, dated 10.1.2023 - 9.30.2026 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Agency Director <p>The interview with the Captain demonstrated the agency is responsible for collective bargaining. The Director stated the contract allows the agency to remove alleged staff from the alleged victims.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency, facility, or any other governmental entity responsible for collective bargaining on the agency's behalf has entered into or renewed any collective bargaining agreement or other agreement since August 20, 2012, or since the last PREA audit, whichever is later.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.67	Agency protection against retaliation
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023
3. Memorandum, Subject: PREA Compliance Managers (PCM), dated 5.2.2023
4. Miami-Dade Corrections and Rehabilitation Department Protection Against Retaliation Form, dated 4.17.2017
5. Post Audit: Miami-Dade Memorandum, Subject: Corrective Actions Regarding Areas of Concern, dated 10.2.2024

Interviews:

1. Correctional Security Lieutenant

The interview with the Correctional Security Lieutenant demonstrated retaliation monitoring begins when an allegation of sexual abuse is received. The Lieutenant stated periodic checks are documented on the Protection Against Retaliation form for 90 days unless unfounded. The Lieutenant stated monitoring includes checking in on victim to see how he or she is adjusting, if victim is experiencing any backlash from staff or other inmates, if the victim needs to see mental health and if the victim has had any unwarranted disciplinary actions.

Site Observation:

Of the 12 investigations reviewed, seven were sexual abuse, two had missing retaliation monitoring, three inmates had been discharged before retaliation monitoring could begin, and two investigations had one month of retaliation monitoring.

Action Plan:

- Retaliation monitoring to continue for 90 days unless the victim discharges or the allegation is unfounded.
- Appropriate personnel to complete documented training on the requirements of §115.67.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.67. Memorandum must be dated, addressed to DOJ PREA Auditor, author name and provision number. (Re: §115.67 (c))
- Upload required documentation to the online audit system in §115.67 (c)

Post audit the facility provided a memorandum from the TGKCC Captain addressed to the DOJ PREA Auditor stating, "Please find the corrective actions taken by Turner Guilford Knight Correctional Center (TGKCC) in response to the items of concern noted in the September 10-11, 2024, PREA Audit.

1. Area of Concern: Standard 115.67: Corrective Action Taken: "The PREA Compliance Manager will oversee retaliation monitoring to ensure it continues for 90 days and extends beyond this period if initial monitoring indicates a need for further oversight. Additionally, training will be completed and documented for the appropriate staff regarding the requirements of standard §115.67 (c). this will include a policy review and training sign-off sheet."

2. Miami-Dade Corrections and Rehabilitation Department Turner Guilford Knight (TGK) Sign-Off Reference, Inmate Sexual Battery/Abuse/Harassment/Prevention and Response IP-001 Section X Retaliation. The sign off sheet documents the distribution date, return date, rank, name, signature and date of completion for three facility employees.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has 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. The facility designates the PREA Compliance Manager as the Retaliation Monitor.

MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, page 17, section X. Retaliation, A-C, states,

A. "MDCR/CHS staff, contractors, and volunteers are prohibited from retaliating against inmates/patients and/or staff reporting or cooperating with investigations of allegations regarding sexual battery/abuse/harassment allegations. Staff having knowledge of retaliation shall report the information to the Shift Supervisor/Commander and facility PCM, and document the incident on an MDCR Incident Report in accordance with DSOP 11-003 "Incident Report Procedures".

B. The PCM shall monitor the conduct and treatment of inmates/patients or staff (e.g., inmate disciplinary reports, housing changes, negative performance reviews or reassignment of staff) who reported incidents of sexual battery/abuse/harassment or cooperated with investigations. The monitoring shall be conducted for at least 90 days or more, if necessary, to ensure that no retaliation occurs. If retaliation occurs, it shall be referred to the SIAB for investigation and/or the Facility/Bureau Supervisor for disciplinary review.

C. PCMs shall document the findings of the period monitored on the Protection Against Retaliation form. A copy of the form shall be submitted to the PREA

Coordinator for each monitoring period with the Monthly PREA Memorandum. Upon completion of the 90-day monitoring period, a copy shall be forwarded to the Classification Unit's Shift Supervisor via email to be placed in the inmate/patient's file. The original form shall be forwarded to the PREA Coordinator. The obligation to monitor shall terminate if the allegation is determined to be "unfounded" by MDPD - SVB or SIAB. "

(c-e) The Turner Guilford Knight Correctional Center PAQ states the facility monitors the conduct or treatment of inmates or staff who reported sexual abuse and of inmates who were reported to have suffered sexual abuse to see if there are any changes that may suggest possible retaliation by inmates or staff. The length of time that the facility monitors the conduct of treatment is 90 days. The facility acts promptly to remedy any such retaliation. The agency/facility continues such monitoring beyond 90 days if the initial monitoring indicates a continuing need. In the past 12 months, the facility has had zero incidents of retaliation. Policy compliance can be found in provision (c) of this standard.

The facility provided a Miami-Dade Corrections and Rehabilitation Department Protection Against Retaliation Form. The form documents the following information.

- Inmate Name / Jail Number
- Incident Date
- Monitoring Begin Date / Monitoring End Date
- Allegation outcome
 - o The inmate reported sexual abuse.
 - o The inmate reported sexual harassment
 - o The inmate cooperated with a sexual abuse investigation.
 - o The inmate cooperated with a sexual harassment investigation.
- PCM Checklist / 30 Days / 60 Days / 90 Days / 120 Days / 150 Days
 - o Housing unit change
 - o Facility Transfer
 - o Removal of alleged staff abuser from contact with victim
 - o Removal of alleged abuser from contact with victim
 - o Emotional support services offered inmate
 - o Other

	<ul style="list-style-type: none"> · Inmate reported concerns related to: <ul style="list-style-type: none"> o Disciplinary report(s) o Housing unit change(s) o Program change(s) o Other · Date/Time/Comments/Initials of check in's <p>Through such reviews the facility meets the standard requirements.</p>
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115.68	Post-allegation protective custody
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Corporal <p>The interview with the Corporal demonstrated he had been in his position for three months. The Corporal could attest he had been instructed by supervisory staff that inmates placed in protective custody are to be allowed all privileges and or documentation must exist explaining why offerings are not available directly to the inmate.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy prohibiting the placement of inmates who allege to have suffered sexual abuse 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. The number of inmates who alleged to have suffered sexual abuse who were held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of assessment</p>

	<p>was zero.</p> <p>MDCR and CHS Policy IP-001, page 6, section C. Protective Custody, states, “Inmates/ patients that have been a victim of sexual victimization or those who have been identified as being a high risk for sexual victimization shall not be placed in involuntary segregated housing unless an assessment of all available alternatives has been conducted, and a determination has been made that there is no available alternative means of separation from likely abusers. If a facility cannot conduct such an assessment immediately, the facility may hold the inmate/patient in involuntary segregated housing for less than 24 hours while completing the assessment.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.71	Criminal and administrative agency investigations
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Internal Affairs Investigation 4. Onsite Review Action Plan: Miami-Dade Memorandum, dated 7.3.2023 5. PREA SIAB Investigation Checklist, dated 2.27.2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Correctional Sergeant Security Internal Affairs / PREA Investigator 2. Investigator Supervisor / Internal Affairs <p>The interview with the Investigators demonstrated the Correctional Sergeant is the agency designated PREA investigator who has a clear understanding of criminal and administrative duties. The investigators were able to articulate steps taken in an investigation beginning when the allegation is received, separation of parties to dry holding cells where neither are allowed access to food or water, medical and or a</p>

hospital for appropriate medical services, the scene is preserved, evidence is collected, law enforcement is involved when applicable, video footage is reviewed, all parties involved in the allegation are interviewed, review of personnel actions are reviewed and an investigation is completed by following the investigation checklist used by facility PREA teams and investigators to ensure all areas of each investigation are completed in a consistent manner.

Site Observation:

Review of 12 investigations demonstrated seven sexual abuse allegations were referred to law enforcement. Administrative investigations were completed for each of the 12 investigations reviewed. Of those investigations reviewed, each were found to include records retention as required of this standard.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency/facility has a policy related to criminal and administrative agency investigations.

MDCR and CHS Policy IP-001, page 17, section XI. Investigations, section A., states, "MDCR - SVB shall conduct all criminal investigations involving allegations of sexual battery/abuse by inmate/patient or staff or sexual misconduct by staff, contractor, or volunteer. Upon completion of criminal investigations, SIAB shall conduct administrative investigations for alleged staff sexual misconduct and sexual harassment, if warranted, in accordance with DSOP 4-015 "Complaints, Investigations and Dispositions"; SIAB Staff shall also conduct investigations for inmate-on-inmate allegations of sexual battery/abuse/harassment, if warranted."

(h) The Turner Guilford Knight Correctional Center PAQ states there has been zero allegations of conduct that appears to be criminal that was referred for prosecution, since the last audit date.

MDCR and CHS Policy IP-001, page 1, section Policy, second paragraph, states, "Staff who commits sexual battery/abuse/harassment involving an inmate/patient shall be subject to disciplinary action, including termination, and/or criminal prosecution. Staff failing to report an incident of staff sexual battery/abuse/harassment shall receive corrective or disciplinary action up to and including termination and/or criminal prosecution in accordance with FS 944.35. Criminal background records check of MDCR staff, contractors (CHS staff), and volunteers are conducted at least every five years."

	<p>(i) The Turner Guilford Knight Correctional Center PAQ states the agency retains all written reports pertaining to administrative or criminal investigation of alleged sexual abuse or sexual harassment for as long as the alleged abuser is incarcerated or employed by the agency, plus five years. Policy compliance can be found in provision (h) of this standard.</p> <p>(l) MDCR and CHS Policy IP-001, page 18, section XI. Investigations, section G., states, "The release or removal of the alleged abuser, or victim of abuse, from employment or the custody of MDCR shall not be a basis for terminating an investigation of allegations of sexual abuse."</p> <p>Through such reviews of the agency designating a PREA investigator who works collaboratively with facility personnel following a detailed investigation checklist ensuring all aspects of each investigation are completed timely and accurately, the facility exceeds the standard requirements.</p>
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115.72	Evidentiary standard for administrative investigations
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Correctional Sergeant Security Internal Affairs / PREA Investigator <p>The interview with the Investigator demonstrated the facility shall impose no standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>Site Observation:</p> <p>During the onsite review 12 investigations were reviewed demonstrating preponderance of evidence was applied and documented in each completed</p>

	<p>investigation.</p> <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency imposes a standard of a preponderance of the evidence or a lower standard of proof for determining whether allegations of sexual abuse or sexual harassment are substantiated.</p> <p>MDCR and CHS Policy IP-001, page 17, section XI. Investigations, D., states, “A Disposition Panel shall impose no standard higher than a preponderance of the evidence in determining if allegations of sexual battery/abuse/harassment by staff are substantiated.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.73	Reporting to inmates
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Post Audit: Miami-Dade County Memorandum, Subject: Corrective Actions Regarding Areas of Concerns, dated 10.2.2024 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Correctional Sergeant Security Internal Affairs / PREA Investigator 2. Investigator Supervisor / Internal Affairs <p>The interview with the Investigator demonstrated notification requirements to victims were delivered verbally and documented within the investigation documentation and notifications of investigation outcomes are mailed to victims who have discharged. The investigator stated if a staff member is involved in the investigation, there is no contact with the victim; however, documentation of staff movements is documented</p>

within the investigation.

Site Observation:

Through utilization of the PREA Audit – Adult Prisons & Jails Documentation Review – Investigations template demonstrated seven of the 12 investigations were sexual abuse allegations, five of those investigations were staff on inmate, two inmates had discharged before the allegations were received, one did not name an aggressor, and three did not have notifications to victims of staff movements.

Action Plan:

- Appropriate personnel to complete documented training on the requirements of §115.73.
- Appropriate facility personnel to provide a memorandum with a sustainable action plan stating which facility position will monitor continued quality assurance with each element of §115.73. Memorandum must be dated, addressed to DOJ PREA Auditor, author name and provision number. (Re: §115.73 (c))
- Upload required documentation to the online audit system in §115.73 (c)

Post audit the facility provided a memorandum from the TGKCC Captain addressed to the DOJ PREA Auditor stating, “Please find the corrective actions taken by Turner Guilford Knight Correctional Center, (TGKCC) in response to the items of concern noted in September 10-11, 2024, PREA Audit.

1. Area of Concern: Standard 115.73 (c): Corrective Action Taken: “The PREA Compliance Manager will ensure that proper notifications are made to staff and will complete and document training for the appropriate staff regarding the requirements of standard §115.73 (c). This will include a policy review and training sign-off sheet.”

2. Miami-Dade Corrections and Rehabilitation Department Turner Guilford Knight (TGK) Sign-Off Reference, Inmate Sexual Battery/Abuse/Harassment/Prevention and Response IP-001 Section XIII Reporting to Inmates. The sign off sheet documents the distribution date, return date, rank, name, signature and date of completion for three facility employees.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy requiring that any inmate who makes an allegation that he or she suffered sexual abuse in an agency facility is informed, verbally or in writing, as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded following an investigation by the agency. The number of criminal and/or

administrative investigations of alleged inmate sexual abuse that were completed by the agency/facility in the past 12 months was 25 Of the alleged sexual abuse investigations that were completed in the past 12 months, the number of inmates who were notified, verbally or in writing, of the results of the investigations was 15.

MDCR and CHS Policy IP-001, page 17, section XII. Reporting to Inmates, A. 1., states, "Following an investigation related to sexual battery/abuse/harassment allegations, SIAB shall report the following to the inmate/patient:

1. If the allegations are substantiated, unsubstantiated, or unfounded as determined by MDPD."

(b) The Turner Guilford Knight Correctional Center PAQ states If an outside entity conducts such investigations, the agency requests the relevant information from the investigative entity to inform the inmate as to the outcome of the investigation. The number of investigations of alleged inmate sexual abuse in the facility that were completed by an outside agency in the past 12 months was 15. Of the outside agency investigations of alleged sexual abuse that were completed in the past 12 months, the number of inmates alleging sexual abuse in the facility who were notified verbally or in writing of the results of the investigation was 15. The PAQ states, "MDPD provide their report to MDCR. Once that report is received information from this report is utilized to close out the investigation by MDCR Investigators"

(c) The Turner Guilford Knight Correctional Center PAQ states following an inmate's allegation that a staff member has committed sexual abuse against the inmate, the agency/facility subsequently informs the Inmate (unless the agency has determined that the allegation is unfounded) whenever:

- The staff member is no longer posted within the inmate's unit;
- The staff member is no longer employed at the facility;
- The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or
- The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility."

MDCR and CHS Policy IP-001, page 18, section XII. Reporting to Inmates, A. 2.-3., states,

2. "When the allegation involves staff sexual misconduct (unless the agency has determined that the allegation is unfounded), when:

	<p>a. The staff member is no longer assigned to the inmate/patient’s unit</p> <p>b. The staff member is no longer assigned to the facility;</p> <p>c. The agency learns that the staff member has been indicted on a charge related to sexual abuse within the facility; or</p> <p>d. The agency learns that the staff member has been convicted related to sexual abuse within the facility.</p> <p>3. When the allegation involves inmate-on-inmate sexual battery/abuse, if:</p> <p>a. The alleged perpetrator has been indicted on a charge related to sexual abuse within the facility;</p> <p>b. The agency learns that the alleged perpetrator has been convicted on a charge related to sexual abuse within the facility.”</p> <p>(d) The Turner Guilford Knight Correctional Center PAQ states following an inmate’s allegation that he or she has been sexually abused by another inmate in an agency facility, the agency subsequently informs the alleged victim whenever: the agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility; or the agency learns that the alleged abuser has been convicted on a charge related to sexual abuse within the facility. Policy compliance can be found in provision (c) of this standard.</p> <p>(e) The Turner Guilford Knight Correctional Center PAQ states the agency has a policy that all notifications to inmates described under this standard are documented. In the past 12 months, there has been 15 notifications to an inmate, pursuant to this standard. Of those notifications, in the past 12 months, 15 notifications were documented. Policy compliance can be found in provision (b) of this standard.</p> <p>Through such reviews the facility meets the standard requirements.</p>
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115.76	Disciplinary sanctions for staff
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review:
	1. Turner Guilford Knight Correctional Center PAQ

2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

3. Miami-Dade County Memorandum, Subject: 115.76 Disciplinary Sanctions for Staff, dated 5.14.2024

4. Miami-Dade Corrections and Rehabilitation Department DSOP: 6-013, Employee Counseling and Discipline Procedures, dated 11.30.2012

Interviews:

1. Captain

Interview with the Captain demonstrated personnel would be removed from the facility during the investigation. The allegation would be reported to police and referred for prosecution. A notice would be posted notifying all staff that the employee would no longer be allowed on any Miami-Dade facility grounds. If the employee had a license to do his or her job, the proper agency department head would notify any applicable licensing entities.

Site Observation:

In the last 12 months, the facility had one staff member who was alleged to be involved in a sexual abuse investigation which was substantiated.

(a) The Turner Guilford Knight Correctional Center PAQ states staff is subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies.

MDCR and CHS Policy IP-001, page 1, section Policy, second paragraph states, "Staff who commits sexual battery/abuse/harassment involving an inmate/patient shall be subject to disciplinary action, including termination, and/or criminal prosecution. Staff failing to report an incident of staff sexual battery/abuse/harassment shall receive corrective or disciplinary action up to and including termination and/or criminal prosecution in accordance with FS 944.35. Criminal background records check of MDCR staff, contractors (CHS staff), and volunteers are conducted at least every five years."

(b) The Turner Guilford Knight Correctional Center PAQ states in the last 12 months, there has been one staff from the facility that had violated agency sexual abuse or sexual harassment policies. In the past 12 months, the number of those staff from the

facility who have been terminated (or resigned prior to termination) for violating agency sexual abuse or sexual harassment policies was one.

The facility provided a Miami-Dade County Memorandum, Subject: 115.76 Disciplinary Sanctions for Staff, from the Labor Management Unit Lieutenant, stating, "Regarding §115.76 - Disciplinary Sanctions for Staff at the Turner Guilford Knight Correctional Center (1) staff member violated MDCR policy regarding sexual abuse or harassment in the first 12 months. The staff member was terminated. The staff member was a civilian employee; therefore, the employee was not reported to FDLE."

(c) The Turner Guilford Knight Correctional Center PAQ states 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. In the past 12 months, the number of staff from the facility who have been disciplined, short of termination, for violation of agency sexual abuse or sexual harassment policies (other than actually engaging in sexual abuse) is zero.

Miami-Dade Corrections and Rehabilitation Department DSOP: 6-013, Employee Counseling and Discipline Procedures, page 6-7, section V. Disciplinary Action, A. Level of Discipline, states, "Staff may be reprimanded, suspended, demonstrated or dismissed in accordance with AO 7-3, "Disciplinary Action," for any good and sufficient reason which shall promote the efficiency of the County Service. The level of discipline recommended for a particular infraction shall depend on a variety of factors. Formal counseling should normally precede disciplinary action; however, staff who commit a serious offense(s) shall receive appropriate disciplinary action, which may be applied in a progressive fashion. The level of disciplinary action to be recommended depends on the totality of factors associated with each incident and/or violation or sustained complaint. The LMU shall provide the proposed level of discipline consistent with discipline imposed for recent similar violations. The proposed level may be increased or decreased by the chain of command accordingly. Any deviations from the proposed level must be justified in writing."

(d) The Turner Guilford Knight Correctional Center PAQ states 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 agencies, unless the activity was clearly not criminal, and to any relevant licensing bodies. In the past 12 months, one staff member has been terminated for sexual abuse or harassment.

MDCR and CHS Policy IP-001, page 1, section Policy, last sentence states, "Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies."

Through such reviews, the facility meets the standard requirements.

115.77 Corrective action for contractors and volunteers

Auditor Overall Determination: Meets Standard

Auditor Discussion

Document Review:

1. Turner Guilford Knight Correctional Center PAQ
2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Captain

The interview with the Captain demonstrated any volunteer or contractor would be prohibited from coming into the facility with notification to the Miami-Dade Police Department, their place of business and any applicable licensing entities.

Site Observation:

During the last audit cycle, the facility did not have any volunteers or contractors subject to disciplinary action due to violating sexual abuse or sexual harassment policies.

(a) The Turner Guilford Knight Correctional Center PAQ states agency policy requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies. agency policy requires that any contractor or volunteer who engages in sexual abuse be prohibited from contact with inmates. In the past 12

months, there have been zero contractors or volunteers reported to law enforcement or relevant licensing bodies for engaging in sexual abuse of inmates.

MDCR and CHS Policy IP-001, page 1, section Policy, first paragraph states, "It is the policy of the Miami-Dade Corrections and Rehabilitation Department (MDCR) and Corrections Health Services (CHS) to provide a safe and secure environment free from sexual battery/abuse/harassment. Pursuant to the Prison Rape Elimination Act of 2003 (PREA) and Florida Statutes (FS) 944.35 and 951.221, a zero-tolerance policy for sexual activity is established. Any form of sexual misconduct between staff, contractors, or volunteers involving an inmate/patient shall be considered non-consensual, an abuse of authority. Contractors or volunteers who engage in sexual abuse shall be prohibited from contact with inmates and shall be reported to law enforcement agencies, unless the activity was clearly not criminal, and to relevant licensing bodies."

(b) The Turner Guilford Knight Correctional Center PAQ states the facility takes appropriate remedial measures and considers 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.

MDCR and CHS Policy IP-001, page 20, section XV. Corrective Actions For Contractors and Volunteers, B., states, "Remedial measures will be taken to prohibit further contact with inmates in the case of any other violation of MDCR's sexual abuse or sexual harassment policies by a contractor or volunteer."

Through such reviews, the facility meets the standard requirements.

115.78 Disciplinary sanctions for inmates	
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	Document Review: 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Captain

The interview with the Captain demonstrated the facility would contact the Miami-Dade Police Department to press charges, the inmate would be considered a PREA aggressor at which time he or she would have limitations on where they would be allowed in the facility and agency disciplinary action would be followed.

(a)-c The Turner Guilford Knight Correctional Center PAQ states inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. Inmates are subject to disciplinary sanctions only pursuant to a formal disciplinary process following a criminal finding of guilt for inmate-on-inmate sexual abuse. In the past 12 months there have been four administrative findings of inmate-on-inmate sexual abuse. In the past 12 months there have been zero criminal findings of guilt for inmate-on-inmate sexual abuse.

MDCR and CHS Policy IP-001, page 19-20, section XIV. Inmate Sanctions, A.-D., states, "An inmate/patient forcing another inmate to engage in sexual activity with another inmate/patient or subjecting staff, visitors, contractors, and volunteers to lewd exhibitionism and/or masturbation shall be subject to any of the following:

A. Formal disciplinary action. (The disciplinary process shall consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior when determining if disciplinary sanctions will be imposed).

B. Administrative confinement, e.g., protection, investigation, pre-hearing segregation pending the inmate/patient disciplinary hearing.

C. Disciplinary confinement, e.g., found guilty during the disciplinary hearing:

1. Sanctions shall be comparable with the nature and circumstances of the abuse committed;

2. The inmate disciplinary history; and

3. Sanctions imposed for comparable offenses by other inmates with similar histories.

D. Criminal prosecution, e.g., sexual battery/assault, lewd exhibitionism and/or masturbation.

Refer to DSOP 12-002 "Inmate Administrative and Disciplinary Confinement" and DSOP 16-001 "Inmate Disciplinary Procedures" for additional information.

	<p>(d) The Turner Guilford Knight Correctional Center PAQ states the facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse. The facility offers therapy, counseling, or other interventions designed to address and correct the underlying reasons or motivations for abuse, the facility considers whether to require the offending inmate to participate in such interventions as a condition of access to programming or other benefits.</p> <p>(e) The Turner Guilford Knight Correctional Center PAQ states the agency disciplines inmates for sexual contact with staff only upon finding that the staff member did not consent to such contact. Policy compliance can be found in provision (a-c) of this standard.</p> <p>(f) The Turner Guilford Knight Correctional Center PAQ states the agency prohibits disciplinary action for a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred, even if an investigation does not establish evidence sufficient to substantiate the allegation.</p> <p>(g) The Turner Guilford Knight Correctional Center PAQ states the agency prohibits all sexual activity between inmates. If the agency prohibits all sexual activity between inmates and disciplines inmates for such activity, the agency deems such activity to constitute sexual abuse only if it determines that the activity is coerced. Policy compliance can be found in provision (a) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.81	Medical and mental health screenings; history of sexual abuse
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Contracted Registered Nurse
2. Contracted Licensed Clinical Social Worker

The interview with the medical and mental health contract personnel demonstrated each would receive a system notification and or custody staff would notify them of disclosures of past sexual abuse and of sexual abuse allegations that have been alleged in the facility. All medical and mental health case notes are placed in a separate PSWP database and patients are evaluated and assessed, typically in a couple hours of the notification once the inmate has accepted medical and or mental health services. Medical and mental health personnel stated they ensure inmates have a clear understanding and knowledge of the medical and mental health services provided at the facility.

Site Observation:

During the onsite review the facility was able to provide documentation demonstrating dates vulnerable or aggressive inmates were referred and seen for medical or mental health services, resulting in each being seen within one to five days of a medical and mental health referral.

(a, c) The Turner Guilford Knight Correctional Center PAQ states all inmates at this facility who have disclosed any prior sexual victimization during a screening pursuant to §115.41 are offered a follow-up meeting with a medical or mental health practitioner. Follow up meetings are offered within 14 days of the intake screening. In the past 12 months 1.66 % (900) disclosed prior victimization during the intake screening. Medical and mental health staff maintain secondary materials, documenting compliance with the above required services.

MDCR and CHS Policy IP-001, page 2, section Inmate Assessments, 3. "Refer inmates who discloses that they have experienced prior sexual victimization or have been charged/convicted of sexual abuse, for a follow-up meeting with the medical or mental health practitioner within 14 days whether it occurred in the community or in an institutional setting."

(b) The Turner Guilford Knight Correctional Center PAQ states this provision is not applicable as the facility is a jail.

(d) The Turner Guilford Knight Correctional Center PAQ states, Information related to

	<p>sexual victimization or abusiveness that occurred in an institutional setting is strictly limited to medical and mental health practitioners.</p> <p>MDCR and CHS Policy IP-001, page 10, section H. 3., states, “Staff shall not disclose any information regarding an inmate/patient’s report of allegations of sexual battery/abuse/harassment to anyone other than those required to provide treatment, conduct investigations, and/or make security and management decisions.”</p> <p>(e) The Turner Guilford Knight Correctional Center PAQ states, Medical and mental health practitioners do not obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institution setting unless the inmate is under the age of 18.</p> <p>MDCR and CHS Policy IP-001, page 9, section F., states, “All allegations of sexual abuse of victims under the age of 18 or who are considered a vulnerable adult under Florida law shall be reported by the PREA Compliance Manager to the Florida Department of Children and Families, as required under Florida law.</p> <p>(Page 3, last paragraph) Note: Medical and mental health practitioners shall 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.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.82	Access to emergency medical and mental health services
	Auditor Overall Determination: Meets Standard
	<p>Auditor Discussion</p> <p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. Contracted Registered Nurse
2. Contracted Licensed Clinical Social Worker

Interviews with medical and mental health staff demonstrated each are aware of access to emergency medical and mental health services upon receipt of an allegation of sexual abuse. Both departments stated they would provide immediate medical and mental health services, based on their scope of service and the facility consistently approves of their recommendations for any type of ongoing care.

Site Observation:

Of the seven sexual abuse investigations reviewed, three warranted a forensic exam where two took place immediately following the receipt of the allegation and one inmate was discharged and drove herself to the exam.

(a) The Turner Guilford Knight Correctional Center PAQ states inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services. The nature and scope of such services are determined by medical and mental health practitioners according to their professional judgment. Medical and mental health staff maintain secondary materials (e.g., form, log) documenting the timeliness of emergency medical treatment and crisis intervention services that were provided; the appropriate response by non-health staff in the event health staff are not present at the time the incident is reported; and the provision of appropriate and timely information and services concerning contraception and sexually transmitted infection prophylaxis

(b) The Turner Guilford Knight Correctional Center PAQ states inmate if no qualified medical or mental health practitioners are on duty at the time a report of recent abuse is made, security staff first responders shall take preliminary steps to protect the victim pursuant to § 115.62 and shall immediately notify the appropriate medical and mental health practitioners.

(c) The Turner Guilford Knight Correctional Center PAQ states 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.

	<p>(d) The Turner Guilford Knight Correctional Center PAQ states treatment services are provided to every victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident.</p> <p>MDCR and CHS Policy IP-001, page 1, section Policy, last sentence states, “MDCR and CHS shall ensure access to medical and mental health services, free of charge, to inmate/patient victims of sexual abuse, regardless of whether the alleged victim cooperates with the investigation.”</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.83	Ongoing medical and mental health care for sexual abuse victims and abusers
	Auditor Overall Determination: Exceeds Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>Interviews:</p> <ol style="list-style-type: none"> 1. Contracted Registered Nurse 2. Contracted Licensed Clinical Social Worker <p>Interviews with medical and mental health staff demonstrated a continuum of medical and mental health treatment and an evaluation of care would commence within one hour of a victim returning from a forensic exam and an aggressor once victims were seen and the situation is safe to do so, typically within one hour of the sexual abuse incident.</p> <p>Site Observation:</p> <p>In the past 12 months the facility had three victims who received forensic exams, two of those inmates were currently in the facility at the time of the exam and the exam</p>

demonstrated evidence of sexual abuse. The third forensic exam took place after a victim was discharged where no follow up medical or mental health could be offered as the victim provided insufficient information.

(a-c) The Turner Guilford Knight Correctional Center PAQ states the facility offers 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.

MDCR and CHS Policy IP-001, page 14, section 7. c) i., states, "Evaluate the alleged victim and assess the need for crisis intervention counseling and long-term follow-up care."

(d) The Turner Guilford Knight Correctional Center PAQ states female victims of sexual abusive vaginal penetration while incarcerated are offered pregnancy tests.

MDCR and CHS Policy IP-001, page 21, section XVIII. Ongoing Medical and Mental Health Care for Sexual Abuse Victims and Abusers D., states, "Victims of sexually abusive vaginal penetration while incarcerated shall be offered pregnancy tests. If pregnancy results from the conduct described, such victims shall receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services.

(e) The Turner Guilford Knight Correctional Center PAQ states this If pregnancy results from sexual abuse while incarcerated, victims receive timely and comprehensive information about, and timely access to, all lawful pregnancy-related medical services. Policy compliance can be found in provision (d) of this standard.

(f) The Turner Guilford Knight Correctional Center PAQ states inmate victims of sexual abuse while incarcerated are offered tests for sexually transmitted infections as medically appropriate.

MDCR and CHS Policy IP-001, page 14, section 7. b), states, "Provide follow-up testing and counseling for sexually transmitted diseases, and post- exposure prophylactic treatment, as necessary."

	<p>(g) The Turner Guilford Knight Correctional Center PAQ states treatment services are 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.</p> <p>MDCR and CHS Policy IP-001, page 1, section Policy, last sentence, states, “MDCR and CHS shall ensure access to medical and mental health services, free of charge, to inmate/patient victims of sexual abuse, regardless of whether the alleged victim cooperates with the investigation.”</p> <p>(h) The Turner Guilford Knight Correctional Center PAQ states this standard is not applicable.</p> <p>Through such reviews of the facility evaluating victims returning from a forensic exam and aggressors of sexual abuse within one hour of the incident, the facility exceeds the standard requirements.</p>
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115.86	Sexual abuse incident reviews
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. Memorandum, Subject: Committee Meeting Case Closures, dated 12.28.2023 4. Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol Table of Contents <p>Interviews:</p> <ol style="list-style-type: none"> 1. PREA Coordinator <p>The interview with the PREA Coordinator demonstrated the incident review team comprised of the PREA Compliance Team who report to the Captain. The team reviews staffing levels, prior incidents, video footage, group dynamics, areas of opportunity,</p>

the presented group action plan and oversight of sustainable recommendations.

Site Observation:

Utilization of the PREA Audit – Adult Prisons & Jails Documentation Review – Investigations template demonstrated of the seven sexual abuse investigations reviewed, three were unfounded and the remaining four had sexual abuse incident reviews completed within 30 days of the investigation.

(a) The Turner Guilford Knight Correctional Center PAQ states the facility conducts a sexual abuse incident review at the conclusion of every criminal or administrative sexual abuse investigation, unless the allegation has been determined to be unfounded. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility, excluding only "unfounded" incidents was three.

MDCR and CHS Policy IP-001, page 22, section XX. Documentation and Review, A. 1., states, "The PCM shall:

1. Coordinate a sexual abuse incident review with the SART at the conclusion of every sexual abuse investigation, including unsubstantiated allegations, unless the allegation has been determined to be unfounded. The SART includes PCM, SIAB investigators, Facility/Bureau Supervisors, and CHS medical/mental health staff;
2. Conduct the sexual abuse incident review within 30 days of the conclusion of the investigation."

(b) The Turner Guilford Knight Correctional Center PAQ states sexual abuse incident reviews are ordinarily conducted within 30 days of concluding the criminal or administrative investigation. In the past 12 months, the number of criminal and/or administrative investigations of alleged sexual abuse completed at the facility which were followed by a sexual abuse incident review within 30 days, excluding only "unfounded" incidents were three. Policy compliance can be found in provision (a) of this standard.

The facility provided a SART Committee Meeting memorandum documenting the following information.

- Recommendations
- Questions, comments, Concerns

- PREA Number
- Incident Report
- Inmate Name
- Jail Number
- Type
- Outcome/Date Closed
- Change Policy/Practice
- Motivational Factors
- Physical Barriers
- Staffing
- Video Monitoring

(c) The Turner Guilford Knight Correctional Center PAQ states the sexual abuse incident review team includes upper-level management officials and allows for input from line supervisors, investigators, and medical or mental health practitioners.

(d) The Turner Guilford Knight Correctional Center PAQ states the facility prepares a report of its findings from sexual abuse incident reviews, including but not necessarily limited to determinations made pursuant to paragraphs (d)(1) -(d)(5) of this section, and any recommendations for improvement and submits such report to the facility head and PREA Compliance Manager.

The agency provided a Miami-Dade Corrections and Rehabilitation Department Sexual Assault Response Team Protocol Table of Contents demonstrating the following occurs during a sexual assault review.

- i. Sexual Assault Response Team Overview
- ii. Goal of the SART
- iii. Leadership Role of the MDCR SARTs
- iv. MDCR SART Structure
- v. Initiating the SART Response
- vi. Facility-SART Process/Timeline

	<p>A. Immediately following an allegation of a sexual assault.</p> <p>B. During transport to the exam.</p> <p>C. During the medical forensic exam.</p> <p>D. If a forensic exam is not necessary/not wanted.</p> <p>E. Following the exam or after acute care is provided.</p> <p>F. Long-term facility SART Duties</p> <p>SART Competencies and Training Requirements</p> <p>Sexual Assault Incident Reviews</p> <p>Appendix 1: Definitions</p> <p>Appendix 2: Prison Rape Elimination Act (PREA) Standards</p> <p>Appendix 3: Sexual Assault Incident Review Checklist</p> <p>Appendix 4: MDCR Sexual Assault Response Team Evaluation Form</p> <p>Appendix 5: Sexual Assault Survivors’ Rights</p> <p>Appendix 6: Additional Suggestions for Further Consideration</p> <p>(e) The Turner Guilford Knight Correctional Center PAQ states, the facility implements the recommendations for improvement or documents its reasons for not doing so. Policy compliance can be found in provision (d) of this standard.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.87	Data collection
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023

Interviews:

1. PREA Coordinator

The interview with the PREA Coordinator demonstrated the agency reviews all incident reports of sexual harassment and sexual abuse, staff and inmates involved in allegations, compile year end reports from each facility. The PREA Coordinator stated the agency focuses on the implementation of recommendations throughout the year.

(a) The Turner Guilford Knight Correctional Center PAQ states the agency collects accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions.

MDCR and CHS Policy IP-001, page 23, section XIX. Documentation and Reviews, B. 1-5., states, "The PREA Coordinator shall:

1. Collect, maintain, and report sexual battery/abuse/harassment data to the Survey of Sexual Victimization (SSV). MDCR shall provide all pertinent data for every allegation of sexual abuse from the previous calendar year to the SSV;
2. Review data to assess and improve sexual abuse prevention, detection and response policies, practices, training;
3. Collect data from PCMs monthly;
4. Meet monthly with MDPD - SVB and SIAB to follow up the status of open cases;
5. Prepare a status report of the previous calendar year for submission to the Director annually. The report shall consist of information collected from each entity. The Director's Office shall publish the information on the MDCR's public website, annually."

(b) The Turner Guilford Knight Correctional Center PAQ states the agency aggregates the incident-based sexual abuse data at least annually. Policy compliance can be found in provision (a) of this standard.

(c) The Turner Guilford Knight Correctional Center PAQ states the standardized instrument includes, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence (SSV) conducted by the Department of Justice.

	<p>(d) The Turner Guilford Knight Correctional Center PAQ states the agency maintains, reviews, and collects data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews. Policy compliance can be found in provision (a) of this standard.</p> <p>(e) The Turner Guilford Knight Correctional Center PAQ states the agency does not obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates as the agency does not have private contracts.</p> <p>(f) The Turner Guilford Knight Correctional Center PAQ states the Department of Justice has requested agency data for the previous calendar year.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.88	Data review for corrective action
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 3. 2023 Miami-Dade Corrections and Rehabilitation Department PREA Annual Report, dated 8.20.2024 <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency reviews 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, and training, including:</p> <ul style="list-style-type: none"> · Identifying problem areas; · Taking corrective action on an ongoing basis; and · Preparing an annual report of its findings from its data review and any

corrective actions for each facility, as well as the agency as a whole.

The facility provided a 2023 Miami-Dade Corrections and Rehabilitation Department PREA Annual Report which documents the following information.

- History
- Current Efforts
- PREA Investigations
 - o Inmate-on-Inmate Sexual Victimization
 - o Staff-on-Inmate Sexual Abuse
- Comparative Data Analysis 2021 through 2023
 - o Inmate on Inmate
 - o Staff on Inmate
- Ongoing Efforts
- Conclusion

The report is signed by the Director on 8.24.2024

(b) The Turner Guilford Knight Correctional Center PAQ states the annual report includes a comparison of the current year's data and corrective actions to those from prior years. The annual report provides an assessment of the agency's progress in addressing sexual abuse.

(c) The Turner Guilford Knight Correctional Center PAQ states the agency makes its annual report readily available to the public, at least annually, through its website. Annual reports are approved by the agency head.

The annual report is available to the public at [prea-annual-report.pdf](#) (miamidade.gov)

(d) The Turner Guilford Knight Correctional Center PAQ states when the agency redacts material from an annual report for publication, the redactions are limited to specific materials where publication would present a clear and specific threat to the safety and security of the facility. The agency indicates the nature of material

	<p>redacted.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.89	Data storage, publication, and destruction
	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>Document Review:</p> <ol style="list-style-type: none"> 1. Turner Guilford Knight Correctional Center PAQ 2. MDCR and CHS Policy IP-001, Inmate Sexual Battery/Abuse/Harassment Prevention and Response, dated 6.1.2023 <p>(a) The Turner Guilford Knight Correctional Center PAQ states the agency ensures that incident-based and aggregate data are securely retained.</p> <p>MDCR and CHS Policy IP-001, page 23, section XXI. Data Storage, Publication and Destruction of PREA Records A-C., state,</p> <ol style="list-style-type: none"> A. "PREA incident documents and aggregate data shall be securely retained. B. All personal identifiers will be removed before making aggregated sexual abuse data publicly available. C. Sexual abuse data collected pursuant to PREA section 115.87 shall be maintained for at least 10 years after the date of initial collection." <p>(b) The Turner Guilford Knight Correctional Center PAQ states agency policy requires that aggregated sexual abuse data from facilities under its direct control and private facilities with which it contracts be made readily available to the public at least annually through its website.</p> <p>The annual report is available to the public at https://www.miamidade.gov/corrections/library/prea-annual-report.pdf</p>

	<p>(c-d) The Turner Guilford Knight Correctional Center PAQ states before making aggregated sexual abuse data publicly available, the agency removes all personal identifiers. The agency maintains sexual abuse data collected pursuant to §115.87 for at least 10 years after the date of initial collection, unless federal, state, or local law requires otherwise.</p> <p>Through such reviews, the facility meets the standard requirements.</p>
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115.401	Frequency and scope of audits
	<p>Auditor Overall Determination: Meets Standard</p> <p>Auditor Discussion</p> <p>(a) During the prior three-year audit period, the agency ensured that each facility operated was audited, once.</p> <p>(b) This is the fourth audit cycle for Turner Guilford Knight Correctional Center and the third year of the fourth audit cycle.</p> <p>(h) The Auditor was granted complete access to, and the ability to observe, all areas of the facility.</p> <p>(i) The Auditor was permitted to request and receive copies of any relevant documents (including electronically stored information).</p> <p>(m) The Auditor was permitted to conduct private interviews with residents.</p> <p>(n) Residents were permitted to send confidential information or correspondence to the Auditor in the same manner as if they were communicating with legal counsel.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

115.403	Audit contents and findings
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	Auditor Overall Determination: Meets Standard
	Auditor Discussion
	<p>(b) The agency has posted the current 2021 PREA audit report, on the agency website.</p> <p>Through such reviews, the facility meets the standard requirements.</p>

Appendix: Provision Findings		
115.11 (a)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Does the agency have a written policy mandating zero tolerance toward all forms of sexual abuse and sexual harassment?	yes
	Does the written policy outline the agency's approach to preventing, detecting, and responding to sexual abuse and sexual harassment?	yes
115.11 (b)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	Has the agency employed or designated an agency-wide PREA Coordinator?	yes
	Is the PREA Coordinator position in the upper-level of the agency hierarchy?	yes
	Does the PREA Coordinator have sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards in all of its facilities?	yes
115.11 (c)	Zero tolerance of sexual abuse and sexual harassment; PREA coordinator	
	If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.)	yes
	Does the PREA compliance manager have sufficient time and authority to coordinate the facility's efforts to comply with the PREA standards? (N/A if agency operates only one facility.)	yes
115.12 (a)	Contracting with other entities for the confinement of inmates	
	If this agency is public and it contracts for the confinement of its inmates with private agencies or other entities including other government agencies, has the agency included the entity's obligation to comply with the PREA standards in any new contract or contract renewal signed on or after August 20, 2012? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	na
115.12 (b)	Contracting with other entities for the confinement of inmates	
	Does any new contract or contract renewal signed on or after August 20, 2012 provide for agency contract monitoring to ensure	na

	that the contractor is complying with the PREA standards? (N/A if the agency does not contract with private agencies or other entities for the confinement of inmates.)	
115.13 (a)	Supervision and monitoring	
	Does the facility have a documented staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Generally accepted detention and correctional practices?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any judicial findings of inadequacy?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from Federal investigative agencies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any findings of inadequacy from internal or external oversight bodies?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: All components of the facility's physical plant (including "blind-spots" or areas where staff or inmates may be isolated)?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The composition of the inmate population?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The number and placement of supervisory staff?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The institution programs occurring on a particular shift?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into	yes

	consideration: Any applicable State or local laws, regulations, or standards?	
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: The prevalence of substantiated and unsubstantiated incidents of sexual abuse?	yes
	In calculating adequate staffing levels and determining the need for video monitoring, does the staffing plan take into consideration: Any other relevant factors?	yes
115.13 (b)	Supervision and monitoring	
	In circumstances where the staffing plan is not complied with, does the facility document and justify all deviations from the plan? (N/A if no deviations from staffing plan.)	yes
115.13 (c)	Supervision and monitoring	
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The staffing plan established pursuant to paragraph (a) of this section?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The facility's deployment of video monitoring systems and other monitoring technologies?	yes
	In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan?	yes
115.13 (d)	Supervision and monitoring	
	Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment?	yes
	Is this policy and practice implemented for night shifts as well as day shifts?	yes
	Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility?	yes

115.14 (a)	Youthful inmates	
	Does the facility place all youthful inmates in housing units that separate them from sight, sound, and physical contact with any adult inmates through use of a shared dayroom or other common space, shower area, or sleeping quarters? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (b)	Youthful inmates	
	In areas outside of housing units does the agency maintain sight and sound separation between youthful inmates and adult inmates? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	In areas outside of housing units does the agency provide direct staff supervision when youthful inmates and adult inmates have sight, sound, or physical contact? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.14 (c)	Youthful inmates	
	Does the agency make its best efforts to avoid placing youthful inmates in isolation to comply with this provision? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Does the agency, while complying with this provision, allow youthful inmates daily large-muscle exercise and legally required special education services, except in exigent circumstances? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
	Do youthful inmates have access to other programs and work opportunities to the extent possible? (N/A if facility does not have youthful inmates (inmates <18 years old).)	na
115.15 (a)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting any cross-gender strip or cross-gender visual body cavity searches, except in exigent circumstances or by medical practitioners?	yes
115.15 (b)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from conducting cross-gender pat-down searches of female inmates, except in exigent circumstances? (N/A if the facility does not have female inmates.)	yes
	Does the facility always refrain from restricting female inmates' access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A if the	yes

	facility does not have female inmates.)	
115.15 (c)	Limits to cross-gender viewing and searches	
	Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?	yes
	Does the facility document all cross-gender pat-down searches of female inmates (N/A if the facility does not have female inmates)?	yes
115.15 (d)	Limits to cross-gender viewing and searches	
	Does the facility have policies that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility have procedures that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?	yes
	Does the facility require staff of the opposite gender to announce their presence when entering an inmate housing unit?	yes
115.15 (e)	Limits to cross-gender viewing and searches	
	Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate's genital status?	yes
	If an inmate's genital status is unknown, does the facility determine genital status during conversations with the inmate, by reviewing medical records, or, if necessary, by learning that information as part of a broader medical examination conducted in private by a medical practitioner?	yes
115.15 (f)	Limits to cross-gender viewing and searches	
	Does the facility/agency train security staff in how to conduct cross-gender pat down searches in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes
	Does the facility/agency train security staff in how to conduct searches of transgender and intersex inmates in a professional and respectful manner, and in the least intrusive manner possible, consistent with security needs?	yes

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

	with inmates with disabilities including inmates who: Have intellectual disabilities?	
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills?	yes
	Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: are blind or have low vision?	yes
115.16 (b)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency's efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient?	yes
	Do these steps include providing interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary?	yes
115.16 (c)	Inmates with disabilities and inmates who are limited English proficient	
	Does the agency always refrain from relying on inmate interpreters, inmate readers, or other types of inmate assistance except in limited circumstances where an extended delay in obtaining an effective interpreter could compromise the inmate's safety, the performance of first-response duties under §115.64, or the investigation of the inmate's allegations?	yes
115.17 (a)	Hiring and promotion decisions	
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the hiring or promotion of anyone who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the hiring or promotion of anyone who	yes

	may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has engaged in sexual abuse in a prison, jail, lockup, community confinement facility, juvenile facility, or other institution (as defined in 42 U.S.C. 1997)?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been convicted of engaging or attempting to engage in sexual activity in the community facilitated by force, overt or implied threats of force, or coercion, or if the victim did not consent or was unable to consent or refuse?	yes
	Does the agency prohibit the enlistment of services of any contractor who may have contact with inmates who has been civilly or administratively adjudicated to have engaged in the activity described in the two bullets immediately above?	yes
115.17 (b)	Hiring and promotion decisions	
	Does the agency consider any incidents of sexual harassment in determining whether to hire or promote anyone who may have contact with inmates?	yes
	Does the agency consider any incidents of sexual harassment in determining whether to enlist the services of any contractor who may have contact with inmates?	yes
115.17 (c)	Hiring and promotion decisions	
	Before hiring new employees who may have contact with inmates, does the agency perform a criminal background records check?	yes
	Before hiring new employees who may have contact with inmates, does the agency, consistent with Federal, State, and local law, make its best efforts to contact all prior institutional employers for information on substantiated allegations of sexual abuse or any resignation during a pending investigation of an allegation of sexual abuse?	yes
115.17 (d)	Hiring and promotion decisions	
	Does the agency perform a criminal background records check before enlisting the services of any contractor who may have contact with inmates?	yes

115.17 (e)	Hiring and promotion decisions	
	Does the agency either conduct criminal background records checks at least every five years of current employees and contractors who may have contact with inmates or have in place a system for otherwise capturing such information for current employees?	yes
115.17 (f)	Hiring and promotion decisions	
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions?	yes
	Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in any interviews or written self-evaluations conducted as part of reviews of current employees?	yes
	Does the agency impose upon employees a continuing affirmative duty to disclose any such misconduct?	yes
115.17 (g)	Hiring and promotion decisions	
	Does the agency consider material omissions regarding such misconduct, or the provision of materially false information, grounds for termination?	yes
115.17 (h)	Hiring and promotion decisions	
	Does the agency provide information on substantiated allegations of sexual abuse or sexual harassment involving a former employee upon receiving a request from an institutional employer for whom such employee has applied to work? (N/A if providing information on substantiated allegations of sexual abuse or sexual harassment involving a former employee is prohibited by law.)	yes
115.18 (a)	Upgrades to facilities and technologies	
	If the agency designed or acquired any new facility or planned any substantial expansion or modification of existing facilities, did the agency consider the effect of the design, acquisition, expansion, or modification upon the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not acquired a new facility or made a substantial expansion to existing facilities since August 20, 2012, or since the last PREA audit, whichever is later.)	no
115.18 (b)	Upgrades to facilities and technologies	

	If the agency installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology, did the agency consider how such technology may enhance the agency's ability to protect inmates from sexual abuse? (N/A if agency/facility has not installed or updated a video monitoring system, electronic surveillance system, or other monitoring technology since August 20, 2012, or since the last PREA audit, whichever is later.)	yes
115.21 (a)	Evidence protocol and forensic medical examinations	
	If the agency is responsible for investigating allegations of sexual abuse, does the agency follow a uniform evidence protocol that maximizes the potential for obtaining usable physical evidence for administrative proceedings and criminal prosecutions? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (b)	Evidence protocol and forensic medical examinations	
	Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
	Is this protocol, as appropriate, adapted from or otherwise based on the most recent edition of the U.S. Department of Justice's Office on Violence Against Women publication, "A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents," or similarly comprehensive and authoritative protocols developed after 2011? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.)	yes
115.21 (c)	Evidence protocol and forensic medical examinations	
	Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidentiarily or medically appropriate?	yes
	Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible?	yes
	If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)?	yes

	Has the agency documented its efforts to provide SAFEs or SANEs?	yes
115.21 (d)	Evidence protocol and forensic medical examinations	
	Does the agency attempt to make available to the victim a victim advocate from a rape crisis center?	yes
	If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? (N/A if the agency always makes a victim advocate from a rape crisis center available to victims.)	na
	Has the agency documented its efforts to secure services from rape crisis centers?	yes
115.21 (e)	Evidence protocol and forensic medical examinations	
	As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews?	yes
	As requested by the victim, does this person provide emotional support, crisis intervention, information, and referrals?	yes
115.21 (f)	Evidence protocol and forensic medical examinations	
	If the agency itself is not responsible for investigating allegations of sexual abuse, has the agency requested that the investigating agency follow the requirements of paragraphs (a) through (e) of this section? (N/A if the agency/facility is responsible for conducting criminal AND administrative sexual abuse investigations.)	yes
115.21 (h)	Evidence protocol and forensic medical examinations	
	If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? (N/A if agency always makes a victim advocate from a rape crisis center available to victims.)	yes
115.22 (a)	Policies to ensure referrals of allegations for investigations	

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

	Does the agency train all employees who may have contact with inmates on the common reactions of sexual abuse and sexual harassment victims?	yes
	Does the agency train all employees who may have contact with inmates on how to detect and respond to signs of threatened and actual sexual abuse?	yes
	Does the agency train all employees who may have contact with inmates on how to avoid inappropriate relationships with inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to communicate effectively and professionally with inmates, including lesbian, gay, bisexual, transgender, intersex, or gender nonconforming inmates?	yes
	Does the agency train all employees who may have contact with inmates on how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities?	yes
115.31 (b)	Employee training	
	Is such training tailored to the gender of the inmates at the employee's facility?	yes
	Have employees received additional training if reassigned from a facility that houses only male inmates to a facility that houses only female inmates, or vice versa?	yes
115.31 (c)	Employee training	
	Have all current employees who may have contact with inmates received such training?	yes
	Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures?	yes
	In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies?	yes
115.31 (d)	Employee training	
	Does the agency document, through employee signature or electronic verification, that employees understand the training they have received?	yes
115.32 (a)	Volunteer and contractor training	

	Has the agency ensured that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency's sexual abuse and sexual harassment prevention, detection, and response policies and procedures?	yes
115.32 (b)	Volunteer and contractor training	
	Have all volunteers and contractors who have contact with inmates been notified of the agency's zero-tolerance policy regarding sexual abuse and sexual harassment and informed how to report such incidents (the level and type of training provided to volunteers and contractors shall be based on the services they provide and level of contact they have with inmates)?	yes
115.32 (c)	Volunteer and contractor training	
	Does the agency maintain documentation confirming that volunteers and contractors understand the training they have received?	yes
115.33 (a)	Inmate education	
	During intake, do inmates receive information explaining the agency's zero-tolerance policy regarding sexual abuse and sexual harassment?	yes
	During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment?	yes
115.33 (b)	Inmate education	
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from sexual abuse and sexual harassment?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Their rights to be free from retaliation for reporting such incidents?	yes
	Within 30 days of intake, does the agency provide comprehensive education to inmates either in person or through video regarding: Agency policies and procedures for responding to such incidents?	yes
115.33 (c)	Inmate education	
	Have all inmates received the comprehensive education referenced in 115.33(b)?	yes

	Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate's new facility differ from those of the previous facility?	yes
115.33 (d)	Inmate education	
	Does the agency provide inmate education in formats accessible to all inmates including those who are limited English proficient?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are deaf?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are visually impaired?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who are otherwise disabled?	yes
	Does the agency provide inmate education in formats accessible to all inmates including those who have limited reading skills?	yes
115.33 (e)	Inmate education	
	Does the agency maintain documentation of inmate participation in these education sessions?	yes
115.33 (f)	Inmate education	
	In addition to providing such education, does the agency ensure that key information is continuously and readily available or visible to inmates through posters, inmate handbooks, or other written formats?	yes
115.34 (a)	Specialized training: Investigations	
	In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators receive training in conducting such investigations in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (b)	Specialized training: Investigations	
	Does this specialized training include techniques for interviewing sexual abuse victims? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include proper use of Miranda and	yes

	Garrity warnings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	
	Does this specialized training include sexual abuse evidence collection in confinement settings? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
	Does this specialized training include the criteria and evidence required to substantiate a case for administrative action or prosecution referral? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.34 (c)	Specialized training: Investigations	
	Does the agency maintain documentation that agency investigators have completed the required specialized training in conducting sexual abuse investigations? (N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.35 (a)	Specialized training: Medical and mental health care	
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
	Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or	yes

	suspicious 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.)	
115.35 (b)	Specialized training: Medical and mental health care	
	If medical staff employed by the agency conduct forensic examinations, do such medical staff receive appropriate training to conduct such examinations? (N/A if agency medical staff at the facility do not conduct forensic exams or the agency does not employ medical staff.)	yes
115.35 (c)	Specialized training: Medical and mental health care	
	Does the agency maintain documentation that medical and mental health practitioners have received the training referenced in this standard either from the agency or elsewhere? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners who work regularly in its facilities.)	yes
115.35 (d)	Specialized training: Medical and mental health care	
	Do medical and mental health care practitioners employed by the agency also receive training mandated for employees by §115.31? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners employed by the agency.)	yes
	Do medical and mental health care practitioners contracted by or volunteering for the agency also receive training mandated for contractors and volunteers by §115.32? (N/A if the agency does not have any full- or part-time medical or mental health care practitioners contracted by or volunteering for the agency.)	yes
115.41 (a)	Screening for risk of victimization and abusiveness	
	Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
	Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates?	yes
115.41 (b)	Screening for risk of victimization and abusiveness	
	Do intake screenings ordinarily take place within 72 hours of arrival at the facility?	yes
115.41 (c)	Screening for risk of victimization and abusiveness	
	Are all PREA screening assessments conducted using an objective	yes

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

	Whether the inmate is detained solely for civil immigration purposes?	
115.41 (e)	Screening for risk of victimization and abusiveness	
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior acts of sexual abuse?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: prior convictions for violent offenses?	yes
	In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, as known to the agency: history of prior institutional violence or sexual abuse?	yes
115.41 (f)	Screening for risk of victimization and abusiveness	
	Within a set time period not more than 30 days from the inmate's arrival at the facility, does the facility reassess the inmate's risk of victimization or abusiveness based upon any additional, relevant information received by the facility since the intake screening?	yes
115.41 (g)	Screening for risk of victimization and abusiveness	
	Does the facility reassess an inmate's risk level when warranted due to a referral?	yes
	Does the facility reassess an inmate's risk level when warranted due to a request?	yes
	Does the facility reassess an inmate's risk level when warranted due to an incident of sexual abuse?	yes
	Does the facility reassess an inmate's risk level when warranted due to receipt of additional information that bears on the inmate's risk of sexual victimization or abusiveness?	yes
115.41 (h)	Screening for risk of victimization and abusiveness	
	Is it the case that inmates are not ever disciplined for refusing to answer, or for not disclosing complete information in response to, questions asked pursuant to paragraphs (d)(1), (d)(7), (d)(8), or (d)(9) of this section?	yes
115.41 (i)	Screening for risk of victimization and abusiveness	
	Has the agency implemented appropriate controls on the dissemination within the facility of responses to questions asked pursuant to this standard in order to ensure that sensitive	yes

	information is not exploited to the inmate's detriment by staff or other inmates?	
115.42 (a)	Use of screening information	
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Housing Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Bed assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Work Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Education Assignments?	yes
	Does the agency use information from the risk screening required by § 115.41, with the goal of keeping separate those inmates at high risk of being sexually victimized from those at high risk of being sexually abusive, to inform: Program Assignments?	yes
115.42 (b)	Use of screening information	
	Does the agency make individualized determinations about how to ensure the safety of each inmate?	yes
115.42 (c)	Use of screening information	
	When deciding whether to assign a transgender or intersex inmate to a facility for male or female inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would present management or security problems (NOTE: if an agency by policy or practice assigns inmates to a male or female facility on the basis of anatomy alone, that agency is not in compliance with this standard)?	yes
	When making housing or other program assignments for transgender or intersex inmates, does the agency consider, on a case-by-case basis, whether a placement would ensure the inmate's health and safety, and whether a placement would	yes

	present management or security problems?	
115.42 (d)	Use of screening information	
	Are placement and programming assignments for each transgender or intersex inmate reassessed at least twice each year to review any threats to safety experienced by the inmate?	yes
115.42 (e)	Use of screening information	
	Are each transgender or intersex inmate's own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments?	yes
115.42 (f)	Use of screening information	
	Are transgender and intersex inmates given the opportunity to shower separately from other inmates?	yes
115.42 (g)	Use of screening information	
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: lesbian, gay, and bisexual inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: transgender inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing solely for the placement of LGBT or I inmates pursuant to a consent decree, legal settlement, or legal judgement.)	yes
	Unless placement is in a dedicated facility, unit, or wing established in connection with a consent decree, legal settlement, or legal judgment for the purpose of protecting lesbian, gay, bisexual, transgender, or intersex inmates, does the agency always refrain from placing: intersex inmates in dedicated facilities, units, or wings solely on the basis of such identification or status? (N/A if the agency has a dedicated facility, unit, or wing	yes

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

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

	anonymous upon request?	
	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
115.51 (c)	Inmate reporting	
	Does staff accept reports of sexual abuse and sexual harassment made verbally, in writing, anonymously, and from third parties?	yes
	Does staff promptly document any verbal reports of sexual abuse and sexual harassment?	yes
115.51 (d)	Inmate reporting	
	Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates?	yes
115.52 (a)	Exhaustion of administrative remedies	
	Is the agency exempt from this standard? NOTE: The agency is exempt ONLY if it does not have administrative procedures to address inmate grievances regarding sexual abuse. This does not mean the agency is exempt simply because an inmate does not have to or is not ordinarily expected to submit a grievance to report sexual abuse. This means that as a matter of explicit policy, the agency does not have an administrative remedies process to address sexual abuse.	yes
115.52 (b)	Exhaustion of administrative remedies	
	Does the agency permit inmates to submit a grievance regarding an allegation of sexual abuse without any type of time limits? (The agency may apply otherwise-applicable time limits to any portion of a grievance that does not allege an incident of sexual abuse.) (N/A if agency is exempt from this standard.)	yes
	Does the agency always refrain from requiring an inmate to use any informal grievance process, or to otherwise attempt to resolve with staff, an alleged incident of sexual abuse? (N/A if agency is exempt from this standard.)	yes
115.52 (c)	Exhaustion of administrative remedies	
	Does the agency ensure that: An inmate who alleges sexual abuse may submit a grievance without submitting it to a staff member who is the subject of the complaint? (N/A if agency is exempt from	yes

	this standard.)	
	Does the agency ensure that: Such grievance is not referred to a staff member who is the subject of the complaint? (N/A if agency is exempt from this standard.)	yes
115.52 (d)	Exhaustion of administrative remedies	
	Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.)	yes
	If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.)	yes
	At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.)	yes
115.52 (e)	Exhaustion of administrative remedies	
	Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Are those third parties also permitted to file such requests on behalf of inmates? (If a third party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.)	yes
	If the inmate declines to have the request processed on his or her behalf, does the agency document the inmate's decision? (N/A if agency is exempt from this standard.)	yes
115.52 (f)	Exhaustion of administrative remedies	

	Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.)	yes
	After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.)	yes
	Does the initial response and final agency decision document the agency's determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.)	yes
	Does the initial response document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
	Does the agency's final decision document the agency's action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.)	yes
115.52 (g)	Exhaustion of administrative remedies	
	If the agency disciplines an inmate for filing a grievance related to alleged sexual abuse, does it do so ONLY where the agency demonstrates that the inmate filed the grievance in bad faith? (N/A if agency is exempt from this standard.)	yes
115.53 (a)	Inmate access to outside confidential support services	
	Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations?	yes
	Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers,	na

	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.)	
	Does the facility enable reasonable communication between inmates and these organizations and agencies, in as confidential a manner as possible?	yes
115.53 (b)	Inmate access to outside confidential support services	
	Does the facility inform inmates, prior to giving them access, of the extent to which such communications will be monitored and the extent to which reports of abuse will be forwarded to authorities in accordance with mandatory reporting laws?	yes
115.53 (c)	Inmate access to outside confidential support services	
	Does the agency maintain or attempt to enter into memoranda of understanding or other agreements with community service providers that are able to provide inmates with confidential emotional support services related to sexual abuse?	yes
	Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements?	yes
115.54 (a)	Third-party reporting	
	Has the agency established a method to receive third-party reports of sexual abuse and sexual harassment?	yes
	Has the agency distributed publicly information on how to report sexual abuse and sexual harassment on behalf of an inmate?	yes
115.61 (a)	Staff and agency reporting duties	
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment?	yes
	Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual	yes

	abuse or sexual harassment or retaliation?	
115.61 (b)	Staff and agency reporting duties	
	Apart from reporting to designated supervisors or officials, does staff always refrain from revealing any information related to a sexual abuse report to anyone other than to the extent necessary, as specified in agency policy, to make treatment, investigation, and other security and management decisions?	yes
115.61 (c)	Staff and agency reporting duties	
	Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section?	yes
	Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services?	yes
115.61 (d)	Staff and agency reporting duties	
	If the alleged victim is under the age of 18 or considered a vulnerable adult under a State or local vulnerable persons statute, does the agency report the allegation to the designated State or local services agency under applicable mandatory reporting laws?	yes
115.61 (e)	Staff and agency reporting duties	
	Does the facility report all allegations of sexual abuse and sexual harassment, including third-party and anonymous reports, to the facility's designated investigators?	yes
115.62 (a)	Agency protection duties	
	When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate?	yes
115.63 (a)	Reporting to other confinement facilities	
	Upon receiving an allegation that an inmate was sexually abused while confined at another facility, does the head of the facility that received the allegation notify the head of the facility or appropriate office of the agency where the alleged abuse occurred?	yes
115.63 (b)	Reporting to other confinement facilities	
	Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation?	yes

115.63 (c)	Reporting to other confinement facilities	
	Does the agency document that it has provided such notification?	yes
115.63 (d)	Reporting to other confinement facilities	
	Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards?	yes
115.64 (a)	Staff first responder duties	
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Separate the alleged victim and abuser?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Preserve and protect any crime scene until appropriate steps can be taken to collect any evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Request that the alleged victim not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
	Upon learning of an allegation that an inmate was sexually abused, is the first security staff member to respond to the report required to: Ensure that the alleged abuser does not take any actions that could destroy physical evidence, including, as appropriate, washing, brushing teeth, changing clothes, urinating, defecating, smoking, drinking, or eating, if the abuse occurred within a time period that still allows for the collection of physical evidence?	yes
115.64 (b)	Staff first responder duties	
	If the first staff responder is not a security staff member, is the responder required to request that the alleged victim not take any actions that could destroy physical evidence, and then notify security staff?	yes
115.65 (a)	Coordinated response	
	Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in	yes

	response to an incident of sexual abuse?	
115.66 (a)	Preservation of ability to protect inmates from contact with abusers	
	Are both the agency and any other governmental entities responsible for collective bargaining on the agency's behalf prohibited from entering into or renewing any collective bargaining agreement or other agreement that limit the agency's ability to remove alleged staff sexual abusers from contact with any inmates pending the outcome of an investigation or of a determination of whether and to what extent discipline is warranted?	yes
115.67 (a)	Agency protection against retaliation	
	Has the agency established a policy to protect all inmates and staff who report sexual abuse or sexual harassment or cooperate with sexual abuse or sexual harassment investigations from retaliation by other inmates or staff?	yes
	Has the agency designated which staff members or departments are charged with monitoring retaliation?	yes
115.67 (b)	Agency protection against retaliation	
	Does the agency employ multiple protection measures, such as housing changes or transfers for inmate victims or abusers, removal of alleged staff or inmate abusers from contact with victims, and emotional support services for inmates or staff who fear retaliation for reporting sexual abuse or sexual harassment or for cooperating with investigations?	yes
115.67 (c)	Agency protection against retaliation	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff?	yes
	Except in instances where the agency determines that a report of	yes

	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?	
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff?	yes
	Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff?	yes
	Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need?	yes
115.67 (d)	Agency protection against retaliation	
	In the case of inmates, does such monitoring also include periodic status checks?	yes
115.67 (e)	Agency protection against retaliation	
	If any other individual who cooperates with an investigation expresses a fear of retaliation, does the agency take appropriate measures to protect that individual against retaliation?	yes
115.68 (a)	Post-allegation protective custody	
	Is any and all use of segregated housing to protect an inmate who is alleged to have suffered sexual abuse subject to the requirements of § 115.43?	yes
115.71 (a)	Criminal and administrative agency investigations	
	When the agency conducts its own investigations into allegations	yes

	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).)	
	Does the agency conduct such investigations for all allegations, including third party and anonymous reports? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations. See 115.21(a).)	yes
115.71 (b)	Criminal and administrative agency investigations	
	Where sexual abuse is alleged, does the agency use investigators who have received specialized training in sexual abuse investigations as required by 115.34?	yes
115.71 (c)	Criminal and administrative agency investigations	
	Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data?	yes
	Do investigators interview alleged victims, suspected perpetrators, and witnesses?	yes
	Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator?	yes
115.71 (d)	Criminal and administrative agency investigations	
	When the quality of evidence appears to support criminal prosecution, does the agency conduct compelled interviews only after consulting with prosecutors as to whether compelled interviews may be an obstacle for subsequent criminal prosecution?	yes
115.71 (e)	Criminal and administrative agency investigations	
	Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual's status as inmate or staff?	yes
	Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding?	yes
115.71 (f)	Criminal and administrative agency investigations	
	Do administrative investigations include an effort to determine whether staff actions or failures to act contributed to the abuse?	yes

	Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings?	yes
115.71 (g)	Criminal and administrative agency investigations	
	Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible?	yes
115.71 (h)	Criminal and administrative agency investigations	
	Are all substantiated allegations of conduct that appears to be criminal referred for prosecution?	yes
115.71 (i)	Criminal and administrative agency investigations	
	Does the agency retain all written reports referenced in 115.71(f) and (g) for as long as the alleged abuser is incarcerated or employed by the agency, plus five years?	yes
115.71 (j)	Criminal and administrative agency investigations	
	Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation?	yes
115.71 (l)	Criminal and administrative agency investigations	
	When an outside entity investigates sexual abuse, does the facility cooperate with outside investigators and endeavor to remain informed about the progress of the investigation? (N/A if an outside agency does not conduct administrative or criminal sexual abuse investigations. See 115.21(a).)	yes
115.72 (a)	Evidentiary standard for administrative investigations	
	Is it true that the agency does not impose a standard higher than a preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated?	yes
115.73 (a)	Reporting to inmates	
	Following an investigation into an inmate's allegation that he or she suffered sexual abuse in an agency facility, does the agency inform the inmate as to whether the allegation has been determined to be substantiated, unsubstantiated, or unfounded?	yes

115.73 (b)	Reporting to inmates	
	If the agency did not conduct the investigation into an inmate's allegation of sexual abuse in an agency facility, does the agency request the relevant information from the investigative agency in order to inform the inmate? (N/A if the agency/facility is responsible for conducting administrative and criminal investigations.)	yes
115.73 (c)	Reporting to inmates	
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the inmate has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate's unit?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility?	yes
	Following an inmate's allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility?	yes
115.73 (d)	Reporting to inmates	
	Following an inmate's allegation that he or she has been sexually abused by another inmate, does the agency subsequently inform the alleged victim whenever: The agency learns that the alleged abuser has been indicted on a charge related to sexual abuse within the facility?	yes
	Following an inmate's allegation that he or she has been sexually	yes

	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?	
115.73 (e)	Reporting to inmates	
	Does the agency document all such notifications or attempted notifications?	yes
115.76 (a)	Disciplinary sanctions for staff	
	Are staff subject to disciplinary sanctions up to and including termination for violating agency sexual abuse or sexual harassment policies?	yes
115.76 (b)	Disciplinary sanctions for staff	
	Is termination the presumptive disciplinary sanction for staff who have engaged in sexual abuse?	yes
115.76 (c)	Disciplinary sanctions for staff	
	Are disciplinary sanctions for violations of agency policies relating to sexual abuse or sexual harassment (other than actually engaging in sexual abuse) commensurate with the nature and circumstances of the acts committed, the staff member's disciplinary history, and the sanctions imposed for comparable offenses by other staff with similar histories?	yes
115.76 (d)	Disciplinary sanctions for staff	
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes
	Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies?	yes
115.77 (a)	Corrective action for contractors and volunteers	
	Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates?	yes
	Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)?	yes

	Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies?	yes
115.77 (b)	Corrective action for contractors and volunteers	
	In the case of any other violation of agency sexual abuse or sexual harassment policies by a contractor or volunteer, does the facility take appropriate remedial measures, and consider whether to prohibit further contact with inmates?	yes
115.78 (a)	Disciplinary sanctions for inmates	
	Following an administrative finding that an inmate engaged in inmate-on-inmate sexual abuse, or following a criminal finding of guilt for inmate-on-inmate sexual abuse, are inmates subject to disciplinary sanctions pursuant to a formal disciplinary process?	yes
115.78 (b)	Disciplinary sanctions for inmates	
	Are sanctions commensurate with the nature and circumstances of the abuse committed, the inmate's disciplinary history, and the sanctions imposed for comparable offenses by other inmates with similar histories?	yes
115.78 (c)	Disciplinary sanctions for inmates	
	When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate's mental disabilities or mental illness contributed to his or her behavior?	yes
115.78 (d)	Disciplinary sanctions for inmates	
	If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits?	yes
115.78 (e)	Disciplinary sanctions for inmates	
	Does the agency discipline an inmate for sexual contact with staff only upon a finding that the staff member did not consent to such contact?	yes
115.78 (f)	Disciplinary sanctions for inmates	
	For the purpose of disciplinary action does a report of sexual abuse made in good faith based upon a reasonable belief that the alleged conduct occurred NOT constitute falsely reporting an incident or lying, even if an investigation does not establish	yes

	evidence sufficient to substantiate the allegation?	
115.78 (g)	Disciplinary sanctions for inmates	
	If the agency prohibits all sexual activity between inmates, does the agency always refrain from considering non-coercive sexual activity between inmates to be sexual abuse? (N/A if the agency does not prohibit all sexual activity between inmates.)	yes
115.81 (a)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison).	yes
115.81 (b)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a prison inmate has previously perpetrated sexual abuse, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a prison.)	yes
115.81 (c)	Medical and mental health screenings; history of sexual abuse	
	If the screening pursuant to § 115.41 indicates that a jail inmate has experienced prior sexual victimization, whether it occurred in an institutional setting or in the community, do staff ensure that the inmate is offered a follow-up meeting with a medical or mental health practitioner within 14 days of the intake screening? (N/A if the facility is not a jail).	yes
115.81 (d)	Medical and mental health screenings; history of sexual abuse	
	Is any information related to sexual victimization or abusiveness that occurred in an institutional setting strictly limited to medical and mental health practitioners and other staff as necessary to inform treatment plans and security management decisions, including housing, bed, work, education, and program assignments, or as otherwise required by Federal, State, or local law?	yes
115.81 (e)	Medical and mental health screenings; history of sexual abuse	
	Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior	yes

	sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18?	
115.82 (a)	Access to emergency medical and mental health services	
	Do inmate victims of sexual abuse receive timely, unimpeded access to emergency medical treatment and crisis intervention services, the nature and scope of which are determined by medical and mental health practitioners according to their professional judgment?	yes
115.82 (b)	Access to emergency medical and mental health services	
	If no qualified medical or mental health practitioners are on duty at the time a report of recent sexual abuse is made, do security staff first responders take preliminary steps to protect the victim pursuant to § 115.62?	yes
	Do security staff first responders immediately notify the appropriate medical and mental health practitioners?	yes
115.82 (c)	Access to emergency medical and mental health services	
	Are inmate victims of sexual abuse offered timely information about and timely access to emergency contraception and sexually transmitted infections prophylaxis, in accordance with professionally accepted standards of care, where medically appropriate?	yes
115.82 (d)	Access to emergency medical and mental health services	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (a)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the facility offer medical and mental health evaluation and, as appropriate, treatment to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility?	yes
115.83 (b)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Does the evaluation and treatment of such victims include, as appropriate, follow-up services, treatment plans, and, when necessary, referrals for continued care following their transfer to, or placement in, other facilities, or their release from custody?	yes
115.83 (c)	Ongoing medical and mental health care for sexual abuse	

	victims and abusers	
	Does the facility provide such victims with medical and mental health services consistent with the community level of care?	yes
115.83 (d)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexually abusive vaginal penetration while incarcerated offered pregnancy tests? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (e)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if "all male" facility. Note: in "all male" facilities there may be inmates who identify as transgender men who may have female genitalia. Auditors should be sure to know whether such individuals may be in the population and whether this provision may apply in specific circumstances.)	yes
115.83 (f)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are inmate victims of sexual abuse while incarcerated offered tests for sexually transmitted infections as medically appropriate?	yes
115.83 (g)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	Are treatment services provided to the victim without financial cost and regardless of whether the victim names the abuser or cooperates with any investigation arising out of the incident?	yes
115.83 (h)	Ongoing medical and mental health care for sexual abuse victims and abusers	
	If the facility is a prison, does it attempt to conduct a mental health evaluation of all known inmate-on-inmate abusers within 60 days of learning of such abuse history and offer treatment when deemed appropriate by mental health practitioners? (NA if the facility is a jail.)	na

115.86 (a)	Sexual abuse incident reviews	
	Does the facility conduct a sexual abuse incident review at the conclusion of every sexual abuse investigation, including where the allegation has not been substantiated, unless the allegation has been determined to be unfounded?	yes
115.86 (b)	Sexual abuse incident reviews	
	Does such review ordinarily occur within 30 days of the conclusion of the investigation?	yes
115.86 (c)	Sexual abuse incident reviews	
	Does the review team include upper-level management officials, with input from line supervisors, investigators, and medical or mental health practitioners?	yes
115.86 (d)	Sexual abuse incident reviews	
	Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse?	yes
	Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility?	yes
	Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse?	yes
	Does the review team: Assess the adequacy of staffing levels in that area during different shifts?	yes
	Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff?	yes
	Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1)-(d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager?	yes
115.86 (e)	Sexual abuse incident reviews	
	Does the facility implement the recommendations for improvement, or document its reasons for not doing so?	yes

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

	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?	
115.88 (b)	Data review for corrective action	
	Does the agency's annual report include a comparison of the current year's data and corrective actions with those from prior years and provide an assessment of the agency's progress in addressing sexual abuse?	yes
115.88 (c)	Data review for corrective action	
	Is the agency's annual report approved by the agency head and made readily available to the public through its website or, if it does not have one, through other means?	yes
115.88 (d)	Data review for corrective action	
	Does the agency indicate the nature of the material redacted where it redacts specific material from the reports when publication would present a clear and specific threat to the safety and security of a facility?	yes
115.89 (a)	Data storage, publication, and destruction	
	Does the agency ensure that data collected pursuant to § 115.87 are securely retained?	yes
115.89 (b)	Data storage, publication, and destruction	
	Does the agency make all aggregated sexual abuse data, from facilities under its direct control and private facilities with which it contracts, readily available to the public at least annually through its website or, if it does not have one, through other means?	yes
115.89 (c)	Data storage, publication, and destruction	
	Does the agency remove all personal identifiers before making aggregated sexual abuse data publicly available?	yes
115.89 (d)	Data storage, publication, and destruction	
	Does the agency maintain sexual abuse data collected pursuant to § 115.87 for at least 10 years after the date of the initial collection, unless Federal, State, or local law requires otherwise?	yes
115.401 (a)	Frequency and scope of audits	

	During the prior three-year audit period, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (Note: The response here is purely informational. A "no" response does not impact overall compliance with this standard.)	yes
115.401 (b)	Frequency and scope of audits	
	Is this the first year of the current audit cycle? (Note: a "no" response does not impact overall compliance with this standard.)	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.)	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
115.401 (h)	Frequency and scope of audits	
	Did the auditor have access to, and the ability to observe, all areas of the audited facility?	yes
115.401 (i)	Frequency and scope of audits	
	Was the auditor permitted to request and receive copies of any relevant documents (including electronically stored information)?	yes
115.401 (m)	Frequency and scope of audits	
	Was the auditor permitted to conduct private interviews with inmates, residents, and detainees?	yes
115.401 (n)	Frequency and scope of audits	
	Were inmates permitted to send confidential information or correspondence to the auditor in the same manner as if they were communicating with legal counsel?	yes
115.403	Audit contents and findings	

(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, there has never been a Final Audit Report issued.)	yes