# Prison Rape Elimination Act (PREA) Audit Report

## Adult Prisons & Jails

- **☐ Interim**
- **☒ Final**

### Date of Report
November 30, 2017

## Auditor Information

<table>
<thead>
<tr>
<th>Name: James Curington</th>
<th>Email:</th>
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</thead>
<tbody>
<tr>
<td>Company Name:</td>
<td></td>
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<tr>
<td>Mailing Address: PO Box 2231</td>
<td>City, State, Zip: Alachua, FL 32616</td>
</tr>
<tr>
<td>Telephone:</td>
<td>Date of Facility Visit: 10/17-18/2017</td>
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## Agency Information

<table>
<thead>
<tr>
<th>Name of Agency: Bradford County Sheriff Office (BCSO)</th>
<th>Governing Authority or Parent Agency (If Applicable): Bradford County Sheriff Office</th>
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<tbody>
<tr>
<td>Physical Address: 945 A. North Temple Ave.</td>
<td>City, State, Zip: Starke, FL 32091</td>
</tr>
<tr>
<td>Mailing Address: PO Box 310</td>
<td>City, State, Zip: Starke, FL 32091</td>
</tr>
<tr>
<td>Telephone: 904-966-6380</td>
<td>Is Agency accredited by any organization? ☒ Yes ☐ No</td>
</tr>
</tbody>
</table>

- ☐ Military
- ☒ County
- ☐ State
- ☐ Federal

**Agency mission:** BCSO "To provide quality law enforcement services to the citizens of Bradford County, serving our community through crime prevention, drug enforcement, aggressive patrols, and education."

**Agency Website with PREA Information:** http://www.bradfordsheriff.org/

## Agency Chief Executive Officer

<table>
<thead>
<tr>
<th>Name: Gordon Smith</th>
<th>Title: Sheriff</th>
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</thead>
<tbody>
<tr>
<td>Email: <a href="mailto:Gordon_smith@bradfordsheriff.org">Gordon_smith@bradfordsheriff.org</a></td>
<td>Telephone: 904-966-6380</td>
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## Agency-Wide PREA Coordinator

<table>
<thead>
<tr>
<th>Name: Richard Walmsley</th>
<th>Title: Lieutenant</th>
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</table>
**PREA Coordinator Reports to:**
Captain Dawn McKinley, Jail Administrator

**Number of Compliance Managers who report to the PREA Coordinator:** One

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## Facility Information

**Name of Facility:** Department of the Jail, Bradford County Jail (BCJ)

**Physical Address:** 945 A. North Temple Avenue Starke, Florida, 32091

**Mailing Address (if different than above):** PO Box 310 Starke, FL 32091

**Telephone Number:** 904-966-6250

**The Facility Is:**
- ☑ Municipal
- ☐ County
- ☐ State
- ☐ Federal
- ☐ Military
- ☐ Private for profit
- ☐ Private not for profit
- ☐ County
- ☐ State
- ☐ Federal

**Facility Mission:** Mission statement for the BCJ: “to protect the community by incarcerating arrestees and offenders in a secure, safe, orderly facility that preserves human dignity, operates according to professional standards and utilizes resources in a cost-effective manner.”

**Facility Website with PREA Information:** [http://www.bradfordsheriff.org/](http://www.bradfordsheriff.org/)

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### Warden/Superintendent

**Name:** Dawn McKinley  
**Title:** Captain  
**Telephone:** 904-966-6359

**Email:** dawn_mckinley@bradfordsheriff.org

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### Facility PREA Compliance Manager

**Name:** Beth Griffin  
**Title:** Sergeant  
**Telephone:** 904-966-6346

**Email:** beth_griffin@bradfordsheriff.org

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### Facility Health Service Administrator

**Name:** Pete Gianas  
**Title:** Bradford County Executive Medical Director  
**Telephone:** 904-966-3999

**Email:** peter_gianas@bradfordsheriff.org

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### Facility Characteristics

**Designated Facility Capacity:** 240  
**Current Population of Facility:** 151  
**Number of inmates admitted to facility during the past 12 months:** 1534
Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 30 days or more: 230

Number of inmates admitted to facility during the past 12 months whose length of stay in the facility was for 72 hours or more: 613

Number of inmates on date of audit who were admitted to facility prior to August 20, 2012: none

Age Range of Population:  
- Youthful Inmates Under 18: none
- Adults: 18-86

Are youthful inmates housed separately from the adult population? ☒ NA

Number of youthful inmates housed at this facility during the past 12 months: none

Average length of stay or time under supervision: 29 days

Facility security level/inmate custody levels: Min. to Max.

Number of staff currently employed by the facility who may have contact with inmates: 54

Number of staff hired by the facility during the past 12 months who may have contact with inmates: 9

Number of contracts in the past 12 months for services with contractors who may have contact with inmates: n/a

Physical Plant

Number of Buildings: One  
Number of Single Cell Housing Units: 8 confinement, 4 multi-purpose

Number of Multiple Occupancy Cell Housing Units: 5

Number of Open Bay/Dorm Housing Units: 4

Number of Segregation Cells (Administrative and Disciplinary): 8 – male; 2 - female

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

Monitored video in work, housing, and entrance/exit areas with 30 day retention of video.

Medical

Type of Medical Facility: Nurse's office with clinic/exam areas supplemented by local hospital and EMS

Forensic sexual assault medical exams are conducted at: Shands Hospital at the University of Florida

Other

Number of volunteers and individual contractors, who may have contact with inmates, currently authorized to enter the facility: 49

Number of investigators the agency currently employs to investigate allegations of sexual abuse: 2
Audit Findings

Audit Narrative

The Prison Rape Elimination Act (PREA) Audit for the Bradford County Sheriff's Office (BCSO), Department of the Jail - Bradford County Jail (BCJ) was initiated in July 2017 with a verbal agreement between Capt. Dawn McKinley, Jail Administrator, and James Curington, certified PREA auditor with a tentative scheduled site visit for October 2017 (actual site visit scheduled October 17-18, 2017).

Several conversations were held between the auditor and the BCJ outlining procedures, and the step-by-step process. There was a scheduling of information and materials that were to be exchanged. This was the second time that James Curington audited the facility and obtained the assistance of R.M. Whidden to help with the review of materials, information, the on-site visit and tour, and the completion of the report. (James Curington and R.M. Whidden referred to as "auditors").

The methodology of the PREA auditors was to use a process that included the following:

1) Sending the Pre-Audit Reporting Form to the PREA Resource Center (PRC), scheduling the audit tour and on-site visit October 17 and 18, 2017.
2) Making contacts with the agency/facility, the posting of notices, and the submission of an agenda.
3) Obtaining files/information from the facility on each of the PREA standards and the facility Pre-Audit Questionnaire (PAQ).
4) Making the on-site visit and touring all areas of the facility.
5) Making an assessment of compliance/noncompliance during and after this site visit with follow-up review of documents and materials.
6) Completing the auditor's, Audit Report for Adult Prisons and Jails.
7) Notifying the facility of the Summary Report.
8) Sending a Post-Audit Reporting Form with the Final Audit Summary to the PREA Resource Center.

The evaluation instrument used for the assessment of PREA compliance was the Audit Instrument, Adult Prisons and Jails supplied by the PRC, through its website. The seven sections of the audit instrument is detailed as follows: A) the Pre-Audit Questionnaire (used throughout the report as documentation), B) the Auditor's Compliance Tool (used during the on-site visit and the summary review), C) Instructions for the PREA Audit Tour, D) the Interview Protocols, E) the Auditor's Summary, F) the Process Map, and G) the Checklist of Documentation. Again, this information, training, and direction given by the PREA Resource Center assisted, guided, and directed the auditors in the assessment of the Bradford County Jail for PREA compliance.

After notifications, contact information, the posting of notices, the completion of the Pre-Audit Reporting Form, and the receipt of individual files for each of the 43 PREA standards, with supporting documentation, the auditors submitted an agenda for this sight visit to the Jail Administrator. The auditors then began a review of the Pre-Audit Questionnaire and documentation/information files submitted by the BCJ.
The site visit and tour began on October 17 with the Jail Administrator and key staff. Areas visited included all areas of the building, including the Control Room and booking areas, the intake and holding cells, the Security Control Room, the laundry/clothing room, the clinic/medical area, food service, recreation, holding/confine/ment cells, male and female housing units (including all male and female pods), visitation areas, the outside areas of the jail and the adjacent Sheriff’s Office. The auditors were impressed with the cleanliness and sanitation of the jail and while touring talked to many staff, inmates and visitors concerning safety and security of the facility. The discussions revealed a professionalism of the staff, a sense of safety and security at the facility, and good communications between staff and inmates, visitors and staff, and jail employees, the general public, and Sheriff Office employees. The tour was conducted using the PRC outline “Instructions for the PREA Audit Tour”.

Following the initial tour, the auditors began formal interviews with staff and inmates, using the Interview Protocols provided by the PRC. Interviews were held on both shifts (12 hour shifts at the BCJ) with staff. Inmates and staff interviews were in a private and comfortable setting. Twenty-two inmates and 28 staff were formally interviewed (there were 12 random staff interviews and 16 specialized staff interviews). Interviews were continued October 18. There was also a revisiting of all areas of the facility, which was accomplished the second day.

Bradford County Sheriff's Office, Department of the Jail, i.e. Bradford County Jail (BCJ) is audited annually for compliance with the Florida Model Jail Standards - Annual Facility Inspection Report. The latest regional peer review inspection team reviewed BCJ on September 20, 2017 pursuant the requirements of Florida Model Jail Standards and Applicable Florida Statute Section 951.23. The report indicated, “no violations were found during the inspection.” The auditors acknowledge and appreciate the information and materials supplied by BCJ, including 43 individual files, one for each of the 43 PREA standards, which helped document standard compliance. It was obvious that the BCJ staff worked hard to accomplish this second PREA audit.

Facility Characteristics

The characteristics of the facility have not changed or been altered since a PREA audit was conducted on October 27 – 28, 2014. There has not been any new construction, renovations or additions to the physical plant nor any up-grades or down-grades to monitoring technology. The facility is a 240-bed county jail housing male and female adults and federal inmates for the U. S. Marshall’s service. No juveniles or youthful offenders are housed at the facility. The facility is in downtown Starke, Florida a block west of route US 301 about 50 miles southwest of Jacksonville, Florida. Part of the facility which houses the administrative offices, central control station, visiting, medical, food service, maintenance and laundry is a single story connected to a two-story round section that is known as the “doughnut” which contains ten inmate housing pods, the indoor recreation area and an officer manned observation tower. The inmate housing pods are camera monitored and the tower officer has 360-degree visual observation. Six pods have cells with wash basins and toilets in the cells and showers located between the cells. Two of these pods are used to house female inmates. The shower fronts on the second level are shielded with a metal strip, knee-high from the floor to just below the shoulders and showers on the bottom level are shielded with concrete block walls below shoulder height in front of the shower vestibule and a shower curtain in front of the shower entrance. The other four pods are open bay style with basins, toilets and showers located in the rear of the pod shielded from direct view of the tower officer and cameras and provided with shower curtains. No food is prepared in the food service area.
Food is prepared off-site and delivered to the facility, in bulk, by vehicle. Trays are prepared by a small inmate workforce and are delivered to the pods. The jail is surrounded by a twelve-foot-high fence with a single roll of razor wire at the top. All activities occur inside the building except some work assignments in the motor pool and janitorial duties in the courthouse performed by “trustees”. The facility is staffed with 54 Positions (35 full-time positions, 17 part time positions plus two Animal Control positions). The full-time positions are allocated as follows: 1-Captain, 1-Lieutenant, 5-Sergeants, 4-Corporals, 18-Correctional Deputies, 1-Food Service, 2-Health Care, 2-Jail Records and 1-Maintenance.

The mission of the Bradford County jail is "to protect the community by incarcerating the arrestees and offenders in a secure, safe, orderly facility that preserves human dignity, operates according to professional standards and utilizes resources in a cost-effective manner."

The facility was recently inspected by a Regional Peer Review Inspection Team, on September 20, 2017 pursuant the requirements of the Florida Model Jail Standards (FMJS) and applicable Florida Statute Section 951.23. The Sheriff, Gordon Smith received the Annual Inspection Report for Bradford County Jail that indicated "no violations were found during the inspection. Therefore, no corrective action is needed. Your staff has made tremendous strides toward perfection."

Please see the following schematic of the BCJ.
Summary of Audit Findings

The Bradford County Jail is assessed as compliant with the PREA standards as documented and outlined in this auditor's Summary Final Report. As listed below, of the 43 PREA standards, 40 are assessed as meeting substantial compliance in all material ways, with the standard for the relevant review period. Also, please note that three standards were assessed as substantially exceeding the requirement of the standard, those standards were:

115.17 Hiring and Promotion Decisions, (including background checks)
115.53 Inmate Access to Outside Confidential Support Services
115.86 Sexual Abuse Incident Review

Number of Standards Exceeded: 3
Number of Standards Met: 40
Number of Standards Not Met: 0
Summary of Corrective Action (if any) None

PREVENTION PLANNING

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

115.11 (a)

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

115.11 (b)

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

- If this agency operates more than one facility, has each facility designated a PREA compliance manager? (N/A if agency operates only one facility.) ☐ Yes ☐ No ☒ NA

- Does the PREA compliance manager have sufficient time and authority to coordinate the facility’s efforts to comply with the PREA standards? (N/A if agency operates only one facility.) ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard (*Requires Corrective Action*)

The Zero Tolerance policy for the Bradford County Jail is found in the Sheriff’s Office Policy and Procedures document 40.11 (PREA). Upon review of this policy, it was found to contain the jail’s approach to preventing, detecting and responding to sexual abuse and sexual harassment. By separate memo signed by the Sheriff, the Operational Lieutenant has been designated as the Agency-Wide PREA Coordinator. The Operational Lieutenant is the second highest command position in the jail organization. Interview with the Operational Lieutenant confirmed that he performs the duties of PREA Coordinator as necessary and has ample time and authority to carry out these duties. The Bradford County Sheriff Department only operates one jail but has appointed a Correctional Sergeant as PREA Compliance Manager who reports to and supports the PREA Coordinator efforts to comply with the PREA standards.

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

115.12 (a)

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

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

Auditor Overall Compliance Determination

☐ Exceeds Standard \textit{(Substantially exceeds requirement of standards)}

☒ Meets Standard \textit{(Substantial compliance; complies in all material ways with the standard for the relevant review period)}

☐ Does Not Meet Standard \textit{(Requires Corrective Action)}

The Bradford County Jail does not contract with any other entities for the confinement of inmates, therefore the facility complies with this standard.

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Standard 115.13: Supervision and monitoring

115.13 (a)

- Does the agency ensure that each facility has developed a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility has documented a staffing plan that provides for adequate levels of staffing and, where applicable, video monitoring, to protect inmates against sexual abuse? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration the generally accepted detention and correctional practices in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any judicial findings of inadequacy in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes ☐ No

- Does the agency ensure that each facility's staffing plan takes into consideration any findings of
inadequacy from Federal investigative agencies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration any findings of inadequacy from internal or external oversight bodies in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration all components of the facility’s physical plant (including “blind-spots” or areas where staff or inmates may be isolated) in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration the composition of the inmate population in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration the number and placement of supervisory staff in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration the institution programs occurring on a particular shift in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No □ NA

- Does the agency ensure that each facility’s staffing plan takes into consideration any applicable State or local laws, regulations, or standards in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration the prevalence of substantiated and unsubstantiated incidents of sexual abuse in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

- Does the agency ensure that each facility’s staffing plan takes into consideration any other relevant factors in calculating adequate staffing levels and determining the need for video monitoring? ☒ Yes □ No

115.13 (b)

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

115.13 (c)

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

In the past 12 months, has the facility, in consultation with the agency PREA Coordinator, assessed, determined, and documented whether adjustments are needed to: The resources the facility has available to commit to ensure adherence to the staffing plan? ☒ Yes  ☐ No

115.13 (d)

- Has the facility/agency implemented a policy and practice of having intermediate-level or higher-level supervisors conduct and document unannounced rounds to identify and deter staff sexual abuse and sexual harassment? ☒ Yes  ☐ No

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

- Does the facility/agency have a policy prohibiting staff from alerting other staff members that these supervisory rounds are occurring, unless such announcement is related to the legitimate operational functions of the facility? ☒ Yes  ☐ No

Auditor Overall Compliance Determination

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

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

☐  Does Not Meet Standard *(Requires Corrective Action)*

Sheriff’s Office Policy and Procedures 40.06, Staffing and Supervision outlines the staffing plan that insures compliance with this standard. This policy establishes the master roster that shows all posts and staff assignments, authorized staffing which takes into consideration the staffing formula, jail population, workload, any special needs and the use of part-time Correctional Deputies, routine posts, minimum staffing which is four Correctional Deputies and the requirement that at least one Correctional Deputy of each gender are on duty. Any deviation from the requirements for minimum staffing or the gender requirement is documented via incident report. Video monitoring is used throughout the facility mindful of the PREA privacy requirement. High level staff reviews via announced and unannounced rounds are conducted and documented. On-going staffing and video monitoring assessment have not determined that adjustments are needed. The best evidence that the developed staffing plan and monitoring for the protection of inmates is adequate, is the fact that there was only one PREA incident in the past three years when an inmate alleged that he had been sexually assaulted in his sleep, but he did not wake up during the assault. The investigation of this allegation resulted in a finding of “Unfounded”. Inmate interviews confirm that they feel safe and staff did not indicate any concerns about their safety due to not enough staff.
Standard 115.14: Youthful inmates

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

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

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The Bradford County Jail does not house Youthful Inmates, therefore the facility complies with this standard.
### Standard 115.15: Limits to cross-gender viewing and searches

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

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

- Does the facility always refrain from restricting female inmates’ access to regularly available programming or other out-of-cell opportunities in order to comply with this provision? (N/A here for facilities with less than 50 inmates before August 20, 2017.)  
  - Yes ☒  No ☐  ☐ NA

**115.15 (c)**
- Does the facility document all cross-gender strip searches and cross-gender visual body cavity searches?  
  - Yes ☒  No ☐

- Does the facility document all cross-gender pat-down searches of female inmates?  
  - Yes ☒  No ☐

**115.15 (d)**
- Does the facility implement a policy and practice that enables inmates to shower, perform bodily functions, and change clothing without nonmedical staff of the opposite gender viewing their breasts, buttocks, or genitalia, except in exigent circumstances or when such viewing is incidental to routine cell checks?  
  - Yes ☒  No ☐

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

**115.15 (e)**
- Does the facility always refrain from searching or physically examining transgender or intersex inmates for the sole purpose of determining the inmate’s genital status?  
  - Yes ☒  No ☐

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

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

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Pursuant to Sheriff’s Office Policy and Procedures 110.12, Searches, all inmate searches must be conducted by a Correctional Deputy of the same gender as the inmate. Body cavity searches shall be conducted by medical staff in the presence of a Correctional Deputy of the same gender as the inmate and an incident report containing the reason for the search, the results and who conducted the search is required. The staffing policy requires a Correctional Deputy of each gender on duty each shift therefore female inmates are never restricted from programing or other out-of-cell activities to comply with this provision. Observation of the inmate living areas and the video monitoring screens reveals that inmates can shower and perform bodily functions and change clothing without non-medical staff of the opposite gender viewing their breasts, buttocks or genitalia. Staff have been trained on how to conduct all searches including cross gender searches. Interviews with staff confirm that staff have received training and inmates confirm that staff of each gender are always available.

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

115.16 (a)

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are deaf or hard of hearing? ☒ Yes ☐ No
- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who are blind or have low vision? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have intellectual disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have psychiatric disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: inmates who have speech disabilities? ☒ Yes ☐ No

- Does the agency take appropriate steps to ensure that inmates with disabilities have an equal opportunity to participate in or benefit from all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment, including: Other (if “other,” please explain in overall determination notes)? ☒ Yes ☐ No

- Do such steps include, when necessary, ensuring effective communication with inmates who are deaf or hard of hearing? ☒ Yes ☐ No

- Do such steps include, when necessary, providing access to interpreters who can interpret effectively, accurately, and impartially, both receptively and expressively, using any necessary specialized vocabulary? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have intellectual disabilities? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Have limited reading skills? ☒ Yes ☐ No

- Does the agency ensure that written materials are provided in formats or through methods that ensure effective communication with inmates with disabilities including inmates who: Are blind or have low vision? ☒ Yes ☐ No
115.16 (b)

- Does the agency take reasonable steps to ensure meaningful access to all aspects of the agency’s efforts to prevent, detect, and respond to sexual abuse and sexual harassment to inmates who are limited English proficient? ☒ Yes ☐ No

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

115.16 (c)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

The Bradford County jail has taken appropriate steps to ensure that inmates with disabilities and limited English proficiency have an equal opportunity to participate in or benefit from the facility’s efforts to prevent, detect, and respond to sexual abuse and harassment including deaf, blind, inmates with intellectual disabilities, psychiatric disabilities and speech disabilities. The facility shall ensure that written materials are provided in formats or through methods that ensures effective communication for inmates who are blind, deaf, have intellectual disabilities, limited reading skills and a psychiatric disability. Inmates received with any disability is identified at booking and a notation is made in the booking system with a Special Requirement. The notification is forwarded to the Classification Officer and the PREA Coordinator to determine the steps to communicate with the inmate to provide them the PREA education information. The facility does not rely on inmate interpreters or readers except in circumstances when an extended delay in obtaining an interpreter could compromise and inmate’s safety or the performance of first responder duties. There were no inmates in custody at the time of the audit to interview with any disabilities, even a non-English speaking inmate.
# Standard 115.17: Hiring and promotion decisions

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

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

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

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

115.17 (e)

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

115.17 (f)

- Does the agency ask all applicants and employees who may have contact with inmates directly about previous misconduct described in paragraph (a) of this section in written applications or interviews for hiring or promotions? ☒ Yes ☐ No

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

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

115.17 (g)

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

115.17 (h)

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

Auditor Overall Compliance Determination

- ☒ Exceeds Standard (Substantially exceeds requirement of standards)
- ☐ Meets Standard (Substantial compliance; complies in all material ways with the standard for the relevant review period)
- ☐ Does Not Meet Standard (Requires Corrective Action)
The Sheriff’s Office Policy 40.03, Employee Rules prohibits the employment and promotion of anyone supervising jail inmates who has ever committed or been arrested and convicted or civilly/administratively adjudicated for any act defined by Florida Statute that constitutes sexual harassment or sexual abuse anywhere in public or within a jail, prison, confinement facility or juvenile facility. This prohibition includes making unwelcome sexual advances, requesting sexual favors, engaging in sexually motivated physical contact, behavior in a lewd manner or other verbal/physical conduct or communication of a sexual nature. The facility’s and Bradford County Government hiring and promotion policies require a thorough and intensive examination, a background check, an interview and an overall commitment to hiring and promoting no one who has engaged, been convicted of or been engaged in sexual abuse in a correctional setting or who has been civilly or administratively adjudicated to have engaged in sexual abuse or harassment. Employees are required by policy to disclose such conduct or any arrest immediately. Recurring background reviews and criminal history checks through the Florida Department of Law enforcement are conducted periodically. Failure to report any arrest or an omission of any criminal behavior can result in dismissal. Florida law does not prohibit providing information on substantiated allegations of sexual abuse or harassment involving a former employee upon receiving a request from an institutional employer. Interview with the Human Resource (HR) Manager confirms the facility is very diligent when hiring new staff or promoting current staff in determining that the candidate is fully qualified.

Standard 115.18: Upgrades to facilities and technologies

115.18 (a)

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

115.18 (b)

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

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

As stated in the Facility Characteristics section there has not been any new construction, renovations or deletions to the physical plant nor have there been any upgrades or downgrades to the video monitoring, electronic surveillance or other monitoring technology since the previous PREA audit.

RESPONSIVE PLANNING

Standard 115.21: Evidence protocol and forensic medical examinations

115.21 (a)

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

115.21 (b)

- Is this protocol developmentally appropriate for youth where applicable? (N/A if the agency/facility is not responsible for conducting any form of criminal OR administrative sexual abuse investigations.) ☒ Yes ☐ No ☐ NA

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

- Does the agency offer all victims of sexual abuse access to forensic medical examinations, whether on-site or at an outside facility, without financial cost, where evidence or medically appropriate? ☒ Yes ☐ No

- Are such examinations performed by Sexual Assault Forensic Examiners (SAFEs) or Sexual Assault Nurse Examiners (SANEs) where possible? ☒ Yes ☐ No

- If SAFEs or SANEs cannot be made available, is the examination performed by other qualified medical practitioners (they must have been specifically trained to conduct sexual assault forensic exams)? ☒ Yes ☐ No

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

115.21 (d)

- Does the agency attempt to make available to the victim a victim advocate from a rape crisis center? ☒ Yes ☐ No

- If a rape crisis center is not available to provide victim advocate services, does the agency make available to provide these services a qualified staff member from a community-based organization, or a qualified agency staff member? ☒ Yes ☐ No

- Has the agency documented its efforts to secure services from rape crisis centers? ☒ Yes ☐ No

115.21 (e)

- As requested by the victim, does the victim advocate, qualified agency staff member, or qualified community-based organization staff member accompany and support the victim through the forensic medical examination process and investigatory interviews? ☒ Yes ☐ No

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

115.21 (f)

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

115.21 (g)

- Auditor is not required to audit this provision.
115.21 (h)

- If the agency uses a qualified agency staff member or a qualified community-based staff member for the purposes of this section, has the individual been screened for appropriateness to serve in this role and received education concerning sexual assault and forensic examination issues in general? [N/A if agency attempts to make a victim advocate from a rape crisis center available to victims per 115.21(d) above.] ☐ Yes ☐ No ☒ NA

Auditor Overall Compliance Determination

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

The facility is responsible for investigating all allegations of sexual abuse and uses investigators who received special training in sexual abuse investigations. Evidence collection guidelines have been adapted from the Department of Justice’s (DOJ) Office on Violence Against Women, “A National Protocol for Sexual Assault Medical Forensic Examinations, Adults/Adolescents.” It is not appropriate for youth at this facility since youth are not housed at this facility. Any victim at this facility is offered access to a forensic medical exam off-site without financial cost to the victim. Exams are conducted by a Sane/Safe Nurse at Shands Teaching Hospital at the University of Florida. Through a Memorandum of Understanding (MOU) (reviewed by the auditor) between the Board of Commissioners, Victim Services & Rape Crisis Center; a victim advocate is available and, if requested, will support and accompany the victim through the forensic medical exam and interviews. Interviews with facility staff and staff from the Alachua County Community Support Services, Victim Services and Rape Crisis Center confirms the availability of victim advocates and the assistance they can provide. Contact information for the Rape Crisis Center is made available to each inmate in writing at booking.

Standard 115.22: Policies to ensure referrals of allegations for investigations

115.22 (a)

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

115.22 (b)

• Does the agency have a policy and practice in place to ensure that allegations of sexual abuse or sexual harassment are referred for investigation to an agency with the legal authority to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior? ☒ Yes □ No

• Has the agency published such policy on its website or, if it does not have one, made the policy available through other means? ☒ Yes □ No

• Does the agency document all such referrals? ☒ Yes □ No

115.22 (c)

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

115.22 (d)

• Auditor is not required to audit this provision.

115.22 (e)

• Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

□ Exceeds Standard (Substantially exceeds requirement of standards)

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

□ Does Not Meet Standard (Requires Corrective Action)

The facility ensures that all allegations of sexual abuse or harassment are referred for a completed administrative and/or criminal investigation pursuant to provisions included in the facility Zero Tolerance policy, Sheriff’s Office Policy and Procedure, 40.11 PREA. Any allegation of sexual abuse or harassment is documented by Incident Report which includes a notation that the allegation was referred for investigation. The BCSO web site provides information to obtain a copy of the Zero-Tolerance policy. Review of the Zero-Tolerance PREA policy and the Incident Report of the alleged sexual abuse incident that occurred during this audit period confirms that it was referred for investigation and this referral is documented.
Standard 115.31: Employee training

115.31 (a)

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

115.31 (b)

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

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

- Does the agency provide each employee with refresher training every two years to ensure that all employees know the agency's current sexual abuse and sexual harassment policies and procedures? ☒ Yes ☐ No

- In years in which an employee does not receive refresher training, does the agency provide refresher information on current sexual abuse and sexual harassment policies? ☒ Yes ☐ No

115.31 (d)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

By policy, all staff who have or may have inmate contact receive training on the facilities Zero Tolerance PREA policy. Upon review of the training curriculum, this training includes sections on how staff are to fulfill their responsibilities under facility sexual abuse or harassment prevention, detection, reporting and response policies, an inmate’s right to be free from sexual abuse or harassment, to be free from retaliation for reporting sexual abuse or harassment, the dynamics of sexual abuse or harassment in confinement, the common reactions of sexual abuse or harassment victims, how to detect and respond to signs of threatened and actual sexual abuse, how to avoid inappropriate relationships with inmates, how to communicate effectively and professionally with lesbian, gay, bisexual, transgender, intersex or gender nonconforming inmates and how to comply with relevant laws related to mandatory reporting of sexual abuse to outside authorities. Training is tailored to both male and female inmates and all staff with inmate contact receive the same training whether having previously worked in a male only or a female only facility. All staff receive PREA refresher training annually as part of the facilities annual training and policy and procedures review. Staff must sign off that they received training and for PREA they take a ten question True False exam that demonstrates their understanding of PREA. Review of training records, curriculum and staff interviews confirm compliance with this standard.
Standard 115.32: Volunteer and contractor training

115.32 (a)

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

115.32 (b)

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

115.32 (c)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

Sheriff’s Office Policy and Procedure, 40.11, Zero Tolerance policy states that the facility will ensure that all volunteers and contractors who will have inmate contact are trained in their responsibilities under the facility’s sexual abuse and harassment prevention, detection, response policy. All volunteers and contractors receive training on how to report sexual abuse and harassment based on the services they provide and the level of contact they have with inmates. The facility maintains training records of all volunteer and contractor training. Review of the volunteer and contractor curriculum, the signed training records and volunteer interviews confirmed volunteer and contractor PREA training is provided to all volunteers and contractors.
Standard 115.33: Inmate education

115.33 (a)
- During intake, do inmates receive information explaining the agency’s zero-tolerance policy regarding sexual abuse and sexual harassment? ☒ Yes  ☐ No
- During intake, do inmates receive information explaining how to report incidents or suspicions of sexual abuse or sexual harassment? ☒ Yes  ☐ No

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

115.33 (c)
- Have all inmates received such education? ☒ Yes  ☐ No
- Do inmates receive education upon transfer to a different facility to the extent that the policies and procedures of the inmate’s new facility differ from those of the previous facility? ☒ Yes  ☐ No

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

115.33 (e)

• Does the agency maintain documentation of inmate participation in these education sessions? ☒ Yes ☐ No

115.33 (f)

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Sheriff’s Office Policy and Procedure, 40.11, Zero Tolerance policy states that as part of the booking process, all inmates will be provided with an orientation that includes information regarding the facility’s sexual abuse and harassment prevention and intervention program which includes how to protect themselves from becoming victims of sexual abuse or harassment while incarcerated, treatment options available, methods of reporting sexual abuse or harassment including using the PREA hotline. The facility also will ensure that inmates with disabilities including: inmates who are blind, hearing impaired, intellectually, psychiatric or speech disabled can participate or benefit from the facility’s efforts to prevent, detect and respond to sexual abuse or harassment. Staff and inmate interviews confirm that all inmates, at booking, must watch an orientation video containing PREA education. The video was viewed by an auditor and found to contain ample information about PREA. Continuous and additional PREA information is available on bulletin boards, from the inmate housing control room, and direct contact with the Rape Crisis Center by phone.

Standard 115.34: Specialized training: Investigations

115.34 (a)

• In addition to the general training provided to all employees pursuant to §115.31, does the agency ensure that, to the extent the agency itself conducts sexual abuse investigations, its investigators have received training in conducting such investigations in confinement settings?
(N/A if the agency does not conduct any form of administrative or criminal sexual abuse investigations. See 115.21(a).) ☒ Yes ☐ No ☐ NA

115.34 (b)

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

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

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

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

115.34 (c)

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

115.34 (d)

- Auditor is not required to audit this provision.

**Auditor Overall Compliance Determination**

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

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

☐ **Does Not Meet Standard** *(Requires Corrective Action)*
The Sheriff’s Office Policy and Procedure, 40.11, Zero Tolerance policy states that when sexual abuse is alleged, Agency Investigators who have received specialized sexual abuse training will be used to conduct the investigation. Training records for four (4) Investigators receiving this special training were reviewed and one (1) Investigator was interviewed. This interview confirmed that the training covers techniques for interviewing sexual abuse victims, proper use of Miranda and Garrity warnings, collection of sexual abuse evidence in a confinement setting and the criteria and evidence required to substantiate a case for administrative action or prosecution referral. These Investigators also are assigned to investigate sexual abuse cases in the community as well as in the facility.

**Standard 115.35: Specialized training: Medical and mental health care**

**115.35 (a)**

- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to detect and assess signs of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to preserve physical evidence of sexual abuse? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how to respond effectively and professionally to victims of sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency ensure that all full- and part-time medical and mental health care practitioners who work regularly in its facilities have been trained in how and to whom to report allegations or suspicions of sexual abuse and sexual harassment? ☒ Yes ☐ No

**115.35 (b)**

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

**115.35 (c)**

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

**115.35 (d)**

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Sheriff's Office Policy and Procedure, 40.11, Zero Tolerance policy requires all full-time and part-time Medical and Mental Health staff, who work regularly in the facility, to be trained in how to detect signs of abuse, preserve physical evidence, respond to sexual abuse and who to report allegations of sexual abuse to If they become a First Responder using the “Specialized Training: PREA Medical and Mental Care Standards” curriculum. Medical and Mental Health staff who work regularly at the facility also receive the training regarding PREA that any new employee receives. Medical staff do not conduct forensic exams which are conducted at an outside facility. Training records documenting all training received by Medical and Mental Health staff are maintained by the facility including any special training. Medical contractors receive the contractor training. Mental Health Practitioners are provided (by a MOU between the Sheriff’s Office and the Bradford Board of Commissioners) if requested by an inmate from a pool of practitioners so training is not feasible. However, these practitioners are knowledgeable of the PREA law.

SCREENING FOR RISK OF SEXUAL VICTIMIZATION AND ABUSIVENESS

Standard 115.41: Screening for risk of victimization and abusiveness

115.41 (a)

- Are all inmates assessed during an intake screening for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No

- Are all inmates assessed upon transfer to another facility for their risk of being sexually abused by other inmates or sexually abusive toward other inmates? ☒ Yes ☐ No
115.41 (b)

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

115.41 (c)

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

115.41 (d)

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

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (2) The age of the inmate?  ☒ Yes  ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (3) The physical build of the inmate?  ☒ Yes  ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (4) Whether the inmate has previously been incarcerated?  ☒ Yes  ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (5) Whether the inmate’s criminal history is exclusively nonviolent?  ☒ Yes  ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (6) Whether the inmate has prior convictions for sex offenses against an adult or child?  ☒ Yes  ☐ No

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

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (8) Whether the inmate has previously experienced sexual victimization?  ☒ Yes  ☐ No
- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (9) The inmate’s own perception of vulnerability? ☒ Yes ☐ No

- Does the intake screening consider, at a minimum, the following criteria to assess inmates for risk of sexual victimization: (10) Whether the inmate is detained solely for civil immigration purposes? ☒ Yes ☐ No

**115.41 (e)**

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior acts of sexual abuse? ☒ Yes ☐ No

- In assessing inmates for risk of being sexually abusive, does the initial PREA risk screening consider, when known to the agency: prior convictions for violent offenses? ☒ Yes ☐ No

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

**115.41 (f)**

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

**115.41 (g)**

- Does the facility reassess an inmate’s risk level when warranted due to a: Referral? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to a: Request? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to a: Incident of sexual abuse? ☒ Yes ☐ No

- Does the facility reassess an inmate’s risk level when warranted due to a: Receipt of additional information that bears on the inmate’s risk of sexual victimization or abusiveness? ☒ Yes ☐ No

**115.41 (h)**

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

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Sheriff’s Office Policy and Procedure 40.11, requires all inmates entering the jail to be immediately screened and classified. Screening for risk is completed during the booking process and recommendations are reviewed by the first line supervisor for accuracy and completeness. PREA assessments are conducted using an objective screening tool. The screening tool considers if the inmate is disabled, their physical build, first incarceration, criminal history of violence, prior convictions for sex offenses, sexual orientation (perceived or declared), the inmate’s own perception of vulnerability, previously experienced sexual victimization and their age. The tool also screens inmates for being sexual abusive by ascertaining, if known, any history of sexual behavior while incarcerated, current or past rape convictions and prior convictions for violent offenses. Reassessments are conducted if the inmate has not been released on bond based on additional information, referral, due to an incident of sexual abuse or receipt of additional information that bears on the inmate’s risk assessment. Inmates are not disciplined for refusing to answer or disclose complete information during the screening process. Information obtained during the screening process is maintained in a confidential manner and only accessible to those staff who need to know. Review of the policies, booking documents, the screening tool, and interviews with the booking, classification and shift supervisors confirm compliance with this standard.

Standard 115.42: Use of screening information

115.42 (a)

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

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

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

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

115.42 (b)

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

115.42 (c)

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

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

115.42 (d)

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

115.42 (e)

- Are each transgender or intersex inmate’s own views with respect to his or her own safety given serious consideration when making facility and housing placement decisions and programming assignments? ☒ Yes ☐ No
115.42 (f)

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

115.42 (g)

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

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

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The facility uses the screening information to determine housing assignments, bed assignments, and work assignments. There is no education nor programs other than work and recreation. Each inmate housing and bed assignment is made on an individual basis by the shift supervisor to ensure the protection of each inmate. Inmates determined to be transgender or intersex during booking are referred to the PREA Review Committee for final recommendation for housing and bed assignment on a case by case basis. During this audit period, no transgender or intersex inmates have been received at this facility. The PREA Review Committee considers the inmates own views of his or her own safety. Transgender and intersex inmates would have the opportunity to shower separately from other inmates. There are no prohibitions to placing lesbian, gay, bisexual, transgender or intersex in any one of the ten pods used for inmate housing.
**Standard 115.43: Protective Custody**

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

**115.43 (b)**
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Programs to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Privileges to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Education to the extent possible? ☒ Yes ☐ No
- Do inmates who are placed in segregated housing because they are at high risk of sexual victimization have access to: Work opportunities to the extent possible? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The opportunities that have been limited? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The duration of the limitation? ☒ Yes ☐ No
- If the facility restricts access to programs, privileges, education, or work opportunities, does the facility document: The reasons for such limitations? ☒ Yes ☐ No

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

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The basis for the facility’s concern for the inmate’s safety? ☒ Yes ☐ No

- If an involuntary segregated housing assignment is made pursuant to paragraph (a) of this section, does the facility clearly document: The reason why no alternative means of separation can be arranged? ☒ Yes ☐ No

115.43 (e)

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Sheriff’s Office Policy and Procedure, 50.03, Admission, Classification and Release permits the placement of a high risk inmate for sexual victimization in an isolation cell until the PREA Review Committee can decide on a housing placement. Placement in an isolation cell is for no longer than 24 hours. Otherwise, the facility refrains from involuntary segregation of high risk inmates for sexual victimization. To the extent possible, inmates in isolation have access to programs, privileges, and work. The facility does document opportunities that have limits, the duration of limitation and the reason for such limitations. Involuntary isolation is only until separation from likely abusers can be arranged. Such assignment could exceed 30 days but has not during this audit period. Documentation of involuntary isolation pursuant to paragraph (a) the reason for the facility concern and why no alternative means can be arranged is clearly documented in the booking records and screening tool. Policy requires reviews every 30 days for all inmates placed in involuntary isolation for more 30 days. Interviews with the Captain, Operational Lieutenant, PREA Review Committee staff, and shift supervisors confirm that the practice of the facility conforms with policy and procedure 50.03.
Standard 115.51: Inmate reporting

115.51 (a)
- Does the agency provide multiple internal ways for inmates to privately report: Sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Retaliation by other inmates or staff for reporting sexual abuse and sexual harassment? ☒ Yes ☐ No
- Does the agency provide multiple internal ways for inmates to privately report: Staff neglect or violation of responsibilities that may have contributed to such incidents? ☒ Yes ☐ No

115.51 (b)
- Does the agency also provide at least one way for inmates to report sexual abuse or sexual harassment to a public or private entity or office that is not part of the agency? ☒ Yes ☐ No
- Is that private entity or office able to receive and immediately forward inmate reports of sexual abuse and sexual harassment to agency officials? ☒ Yes ☐ No
- Does that private entity or office allow the inmate to remain anonymous upon request? ☒ Yes ☐ No
- Are inmates detained solely for civil immigration purposes provided information on how to contact relevant consular officials and relevant officials at the Department of Homeland Security? ☒ Yes ☐ No

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

115.51 (d)
- Does the agency provide a method for staff to privately report sexual abuse and sexual harassment of inmates? ☒ Yes ☐ No
Bradford County Jail provides multiple internal ways for inmates to privately report sexual abuse, sexual harassment, and staff neglect or violation of responsibilities that may have contributed to such incidents. Reports may be made verbally, in writing, anonymously, or from third parties, or through the toll-free number. This information is posted for the inmates and is in the inmate information handouts.

Information is detailed in the Bradford County Sheriff's Office, Department of the Jail, Policy and Procedures. Reference is to PREA Standards and outlined in the Policy, Prison Rape Elimination Act (PREA) Zero Tolerance; Section Administration, Number 40.11. Effective date 10/01/2017 and a review date 10/01/2018.

Toll-free number is (866) 252-5439 Rape Crisis Ctr. to 18 SE. 24th St., Gainesville, FL 32641.

The auditors met and interviewed the staff and the Director of the Rape Crisis Center, who made a special trip to the Bradford County Jail to assist the auditors with information, materials, and formal/specialized interviews concerning inmate reporting, privacy, victim's assistance, and the Center's relationship with the jail. The Director was very positive and helpful, and based on the Director's interview and supplemental information, the auditors assess this standard as compliant.

**Standard 115.52: Exhaustion of administrative remedies**

**115.52 (a)**

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

**115.52 (b)**

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

115.52 (c)

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

115.52 (d)

- Does the agency issue a final agency decision on the merits of any portion of a grievance alleging sexual abuse within 90 days of the initial filing of the grievance? (Computation of the 90-day time period does not include time consumed by inmates in preparing any administrative appeal.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- If the agency claims the maximum allowable extension of time to respond of up to 70 days per 115.52(d)(3) when the normal time period for response is insufficient to make an appropriate decision, does the agency notify the inmate in writing of any such extension and provide a date by which a decision will be made? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- At any level of the administrative process, including the final level, if the inmate does not receive a response within the time allotted for reply, including any properly noticed extension, may an inmate consider the absence of a response to be a denial at that level? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (e)

- Are third parties, including fellow inmates, staff members, family members, attorneys, and outside advocates, permitted to assist inmates in filing requests for administrative remedies relating to allegations of sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Are those third parties also permitted to file such requests on behalf of inmates? (If a third-party files such a request on behalf of an inmate, the facility may require as a condition of processing the request that the alleged victim agree to have the request filed on his or her behalf, and may also require the alleged victim to personally pursue any subsequent steps in the administrative remedy process.) (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

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

- Has the agency established procedures for the filing of an emergency grievance alleging that an inmate is subject to a substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance alleging an inmate is subject to a substantial risk of imminent sexual abuse, does the agency immediately forward the grievance (or any portion thereof that alleges the substantial risk of imminent sexual abuse) to a level of review at which immediate corrective action may be taken? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency provide an initial response within 48 hours? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- After receiving an emergency grievance described above, does the agency issue a final agency decision within 5 calendar days? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response and final agency decision document the agency’s determination whether the inmate is in substantial risk of imminent sexual abuse? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the initial response document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

- Does the agency’s final decision document the agency’s action(s) taken in response to the emergency grievance? (N/A if agency is exempt from this standard.) ☒ Yes ☐ No ☐ NA

115.52 (g)

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*
The Florida Model Jail Standards reference Number 2.10 (f) and the agency, Bradford County Department of the Jail policy number 60.13 Inmate Programs and Privileges, Title - Inmate Requests & Grievances, outlines the following “The inmate may submit a grievance at any time, regardless of when the incident is alleged to have occurred. The inmate is allowed assistance from third parties (fellow inmates, staff, family member, attorney, outside advocates) in preparing the grievance request.” It also explicitly details the 90 days of response, it outlines, emergency grievances including timeframes that they'll be answered no longer than 48 hours or a final decision on the resolution of any issue within five days.

The Department of the Jail, Policy and Procedure, Prison Rape Elimination Act (PREA) Zero Tolerance reference Number 40.11 also addresses the grievance procedure and the above listed grievance issues.

Based on the interviews with staff and inmates and on the above policies, the auditors assess this standard as compliant.

**Standard 115.53: Inmate access to outside confidential support services**

115.53 (a)

- Does the facility provide inmates with access to outside victim advocates for emotional support services related to sexual abuse by giving inmates mailing addresses and telephone numbers, including toll-free hotline numbers where available, of local, State, or national victim advocacy or rape crisis organizations? ☒ Yes ☐ No

- Does the facility provide persons detained solely for civil immigration purposes mailing addresses and telephone numbers, including toll-free hotline numbers where available of local, State, or national immigrant services agencies? ☒ Yes ☐ No

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

115.53 (b)

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

115.53 (c)

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

- Does the agency maintain copies of agreements or documentation showing attempts to enter into such agreements? ☒ Yes ☐ No
Auditor Overall Compliance Determination

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

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

☐  **Does Not Meet Standard** (*Requires Corrective Action*)

The Bradford County Jail provides inmates with best access to outside victim advocates, through the Alachua Rape Crisis Center, by mail, inmate phones, or third parties. The mailing address and a toll-free 800 number to the Alachua Rape Crisis Center is: Alachua, Rape Crisis Center 218 SE. 24th St., Gainesville, FL 32641; phone (866) 252-5439.

The auditors were impressed with the services and assistance available to the male and female inmate population at Bradford County Jail. Counseling procedures, contact procedures, and personal involvement with the staff and inmates at Bradford County Jail exceeds the standard that one would normally expect for substantial compliance.

As previously commented, a Director from the Rape Crisis Center visited with staff of the jail and auditors while a site visit was being made at the facility. The specialized interview was held with the Director and updated policies reviewed. Simply based on the specialized interview of the Director, and interviews with the jail staff, and the inmate population, and the communications between the facility and the center, this standard is assessed as exceeds.

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**Standard 115.54: Third-party reporting**

115.54 (a)

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

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

Auditor Overall Compliance Determination

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

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

The method for third-party reporting is covered by the Bradford County Jail Policy 40.11, page 6, which outlines reporting. Third-party reporting can be made through the Bradford County Sheriff's Office Investigators, BCSO deputies, the Alachua Rape Crisis Center and, if the inmate is held for the Department of Homeland Security, to that agency. Reporting can be done anonymously. Reports can also be made by request or grievance as outlined in the Policy Request and Grievances which can be forwarded to the Sheriff's Office, Public Defender, or other.

Inmate interviews, and staff interviews confirm awareness and knowledge of third-party reporting.

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**OFFICIAL RESPONSE FOLLOWING AN INMATE REPORT**

**Standard 115.61: Staff and agency reporting duties**

**115.61 (a)**

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding an incident of sexual abuse or sexual harassment that occurred in a facility, whether or not it is part of the agency? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding retaliation against inmates or staff who reported an incident of sexual abuse or sexual harassment? ☒ Yes ☐ No

- Does the agency require all staff to report immediately and according to agency policy any knowledge, suspicion, or information regarding any staff neglect or violation of responsibilities that may have contributed to an incident of sexual abuse or sexual harassment or retaliation? ☒ Yes ☐ No

**115.61 (b)**

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

**115.61 (c)**

- Unless otherwise precluded by Federal, State, or local law, are medical and mental health practitioners required to report sexual abuse pursuant to paragraph (a) of this section? ☒ Yes ☐ No

- Are medical and mental health practitioners required to inform inmates of the practitioner's duty to report, and the limitations of confidentiality, at the initiation of services? ☒ Yes ☐ No
115.61 (d)

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

115.61 (e)

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

**Auditor Overall Compliance Determination**

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

It is the policy of the Bradford County Jail (BCJ). Policy number 40.11, Prison Rape Elimination Act (PREA) Zero Tolerance that all sexual assault and sexual harassment shall be reported promptly and thoroughly investigated by the appropriate authorities. Further, the policy indicates "The facility shall ensure that allegations of sexual abuse or sexual harassment are referred for investigation to the BCSO Investigative Division to conduct criminal investigations, unless the allegation does not involve potentially criminal behavior." This includes staff of the agency, contractors, volunteers, or other persons who have contact with inmate/detainees, (Policy 40.11, page 7, part H.)

Inmate and staff interviews; and the Policy and Procedures of BCJ confirm the agency's commitment to the provisions of PREA and the "prevention, intervention, treatment, investigation, tracking and reporting, of inmate/detainee sexual assault/battery and staff sexual misconduct/harassment."

**Standard 115.62: Agency protection duties**

115.62 (a)

- When the agency learns that an inmate is subject to a substantial risk of imminent sexual abuse, does it take immediate action to protect the inmate? ☒ Yes ☐ No
The Policy and Procedure Number 50.02 of the Bradford County Sheriff's Office, Department of the Jail states: "When staff is made aware that an inmate/detainee is subject to a substantial risk of imminent sexual abuse, immediate action shall be taken to protect that inmate/detainee."

This policy and staff interviews confirmed staff awareness of this required practice. The review of an incident report in the past, indicating that an inmate told staff he was at risk showed that the inmate was moved immediately and the issues were addressed, further confirming staff awareness of the staff and jail's duty to protect.

Standard 115.63: Reporting to other confinement facilities

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

115.63 (b)  
- Is such notification provided as soon as possible, but no later than 72 hours after receiving the allegation? ☒ Yes ☐ No

115.63 (c)  
- Does the agency document that it has provided such notification? ☒ Yes ☐ No

115.63 (d)  
- Does the facility head or agency office that receives such notification ensure that the allegation is investigated in accordance with these standards? ☒ Yes ☐ No
Auditor Overall Compliance Determination

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

Policies were reviewed by the auditors, specifically, BCJ policy 40.11 page 15, which requires the Jail Administrator to notify the head of another facility, upon receiving an allegation from an inmate who alleges that they were sexually abused while confined at that facility.

In the past 12 months there have been zero (0) number of allegations of sexual abuse the facility received from other facilities.

Based on interviews with the PREA Manager and the Jail Administrator, and the above policy, and information, this standard is assessed as compliant.

Standard 115.64: Staff first responder duties

115.64 (a)

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

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

Bradford County Jail Policy 40.11, outlines the steps taken by First Responders. It clearly states: 1) separate the alleged victim and abuser, 2) preserve and protect any crime scene, 3) if the abuse occurred within the time period that allows for the collection of physical evidence, request the alleged victim not take any actions that could destroy evidence, 4) if the abuse occurred within a time period that allows for collection of physical evidence, ensure that the alleged abuser does not take any actions that could destroy evidence. If the first staff responder is not a security staff member, the responder is required to request that the alleged victim not take any actions that could destroy physical evidence, then notify security staff.

Staff interviews and review of an incident report of an alleged incident concerning sexual abuse or sexual harassment, confirmed that staff has received ample training, and that they are aware of first responder duties. The incident report further indicates appropriate action that needs to be taken is documented and an investigation initiated.

In the past 12 months, there has been one (1) allegation that an inmate was sexually abused. Of the allegations that an inmate was sexually abused in the past 12 months, there were no (0) times the non-security staff member was the first responder. Appropriate actions have been documented and were part of the review of files by the auditors.

Standard 115.65: Coordinated response

115.65 (a)

- Has the facility developed a written institutional plan to coordinate actions among staff first responders, medical and mental health practitioners, investigators, and facility leadership taken in response to an incident of sexual abuse? ☒ Yes  ☐ No
Interviews with the Jail Administrator, the PREA Compliance Coordinator, and the PREA Compliance Manager; along with the Coordinated Response Team Checklist which calls for reviews to all incidents confirmed compliance with this standard. Staffing patterns, technology, and policy and guidelines were all examined by the auditors.

The Bradford County Jail has developed an institutional plan to coordinate actions taken in response to an incident of sexual abuse among its staff. First Responders, health care practitioners, and Sheriff Investigators.

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

115.66 (a)

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

115.66 (b)

- Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)
There is no collective bargaining agreement at the Bradford County Jail, and all staff serve at the pleasure of the Sheriff.

**Standard 115.67: Agency protection against retaliation**

**115.67 (a)**

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

**115.67 (b)**

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

**115.67 (c)**

- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of residents or staff who reported the sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor the conduct and treatment of inmates who were reported to have suffered sexual abuse to see if there are changes that may suggest possible retaliation by inmates or staff? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Act promptly to remedy any such retaliation? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor any inmate disciplinary reports? ☒ Yes ☐ No
- Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate housing changes? ☒ Yes ☐ No
Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor inmate program changes? ☒ Yes ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor negative performance reviews of staff? ☒ Yes ☐ No

Except in instances where the agency determines that a report of sexual abuse is unfounded, for at least 90 days following a report of sexual abuse, does the agency: Monitor reassignments of staff? ☒ Yes ☐ No

Does the agency continue such monitoring beyond 90 days if the initial monitoring indicates a continuing need? ☒ Yes ☐ No

115.67 (d)

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

115.67 (e)

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

115.67 (f)

Auditor is not required to audit this provision.

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Bradford County Jail stipulates in its policy, 40.11, Prison Rape Elimination Act (PREA) Zero Tolerance “the facility will protect all inmates and staff, who report sexual abuse/sexual harassment or cooperate with sexual abuse/sexual harassment and investigations, from intimidation or retaliation by other inmates/detainees or staff.” The policy further goes on to outline monitoring periods, monitoring options, measures to be taken, and treatment issues.

Retaliation is monitored by the Lieutenant/PREA Coordinator.
Based on the review of policy and procedure, and interviews with specialized staff, this standard is assessed as compliant.

**Standard 115.68: Post-allegation protective custody**

115.68 (a)

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

**Auditor Overall Compliance Determination**

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The auditors reviewed this standard with the Jail Administrator and the PREA Manager, as well as the policy 40.11 PREA. It was noted by the auditors that there was one inmate that was held in involuntary segregated housing in the past 12 months for one to 24 hours awaiting completion of an assessment. There were no inmates held in involuntary segregated housing in the past 12 months for longer than 30 days. This information taken from the PREA Audit: Pre-Audit Questionnaire.

Based on the above, the auditors find this standard compliant.

**INVESTIGATIONS**

**Standard 115.71: Criminal and administrative agency investigations**

115.71 (a)

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

115.71 (b)

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

115.71 (c)

▪ Do investigators gather and preserve direct and circumstantial evidence, including any available physical and DNA evidence and any available electronic monitoring data? ☒ Yes ☐ No

▪ Do investigators interview alleged victims, suspected perpetrators, and witnesses? ☒ Yes ☐ No

▪ Do investigators review prior reports and complaints of sexual abuse involving the suspected perpetrator? ☒ Yes ☐ No

115.71 (d)

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

115.71 (e)

▪ Do agency investigators assess the credibility of an alleged victim, suspect, or witness on an individual basis and not on the basis of that individual’s status as inmate or staff? ☒ Yes ☐ No

▪ Does the agency investigate allegations of sexual abuse without requiring an inmate who alleges sexual abuse to submit to a polygraph examination or other truth-telling device as a condition for proceeding? ☒ Yes ☐ No

115.71 (f)

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

▪ Are administrative investigations documented in written reports that include a description of the physical evidence and testimonial evidence, the reasoning behind credibility assessments, and investigative facts and findings? ☒ Yes ☐ No
115.71 (g) Are criminal investigations documented in a written report that contains a thorough description of the physical, testimonial, and documentary evidence and attaches copies of all documentary evidence where feasible? ☒ Yes ☐ No

115.71 (h) Are all substantiated allegations of conduct that appears to be criminal referred for prosecution? ☒ Yes ☐ No

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

115.71 (j) Does the agency ensure that the departure of an alleged abuser or victim from the employment or control of the agency does not provide a basis for terminating an investigation? ☒ Yes ☐ No

115.71 (k) Auditor is not required to audit this provision.

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The auditors reviewed the BCJ policy and procedure 40.11 and its attachments. Section VII Investigative Process. It is clear that the Sheriff's Office uses professional, specially trained investigators to handle criminal and administrative agency investigations. The policy itself addresses this standard completely, including subsections a-l, covering the specialized training, the allegation,
evidence, credibility, truth telling devices, reports (with timeframes), prosecution, presence/departure of victim or abuser, and outside agencies involved.

It is noted in the PAQ that there were no substantiated allegations of conduct that appear to be criminal that were referred for prosecution since the last PREA audit.

Based on interviews with BCSO Investigators, the PREA Manager, and the Jail Administrator, as well as the above information, this standard is assessed as compliant.

**Standard 115.72: Evidentiary standard for administrative investigations**

115.72 (a)

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

**Auditor Overall Compliance Determination**

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Based on interviews with the BCSO, the Jail Administrator, and the Policy 40.11, which states "The agency shall impose no standard higher than the preponderance of the evidence in determining whether allegations of sexual abuse or sexual harassment are substantiated." The auditors assess this standard as compliant.

**Standard 115.73: Reporting to inmates**

115.73 (a)

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

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

115.73 (c) 

- Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer posted within the inmate’s unit? ☒ Yes  ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The staff member is no longer employed at the facility? ☒ Yes  ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been indicted on a charge related to sexual abuse in the facility? ☒ Yes  ☐ No

- Following an inmate’s allegation that a staff member has committed sexual abuse against the resident, unless the agency has determined that the allegation is unfounded, or unless the resident has been released from custody, does the agency subsequently inform the resident whenever: The agency learns that the staff member has been convicted on a charge related to sexual abuse within the facility? ☒ Yes  ☐ No

115.73 (d) 

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

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

115.73 (e) 

- Does the agency document all such notifications or attempted notifications? ☒ Yes  ☐ No
### 115.73 (f)

- Auditor is not required to audit this provision.

#### Auditor Overall Compliance Determination

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

This standard is assessed as compliant, based on interviews with staff and inmates, the BCJ Policy 40.11, page 13, that indicates inmates who alleged sexual abuse will be informed whether the allegation was substantiated, unsubstantiated, or unfounded. It is noted by the auditors that inmates have been informed as substantiated and documented by the review of past allegations.

In the past 12 months, the number of notifications to inmates that were provided pursuant this standard was one (1) and of those notifications, the one was/is documented.

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### DISCIPLINE

#### Standard 115.76: Disciplinary sanctions for staff

**115.76 (a)**

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

**115.76 (b)**

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

**115.76 (c)**

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

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

- Are all terminations for violations of agency sexual abuse or sexual harassment policies, or resignations by staff who would have been terminated if not for their resignation, reported to: Relevant licensing bodies? ☒ Yes ☐ No

**Auditor Overall Compliance Determination**

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The BCJ policy 40.11, page 9, contains the provisions for staff disciplinary sanctions for violating agency sexual abuse or harassment policies. It outlines that staff will be subject to significant disciplinary sanctions for sustained violations of sexual abuse or harassment, up to and including dismissal and criminal charges. Staff interviews confirmed staff knowledge of these sanctions.

No staff have been disciplined for violation of sexual abuse or sexual harassment policies in the past 12 months, as detailed on the agency PAQ.

Based on interviews with staff, the PREA Compliance Manager, the Jail Administrator, and the above information, this standard is assessed as compliant.

**Standard 115.77: Corrective action for contractors and volunteers**

115.77 (a)

- Is any contractor or volunteer who engages in sexual abuse prohibited from contact with inmates? ☒ Yes ☐ No

- Is any contractor or volunteer who engages in sexual abuse reported to: Law enforcement agencies (unless the activity was clearly not criminal)? ☒ Yes ☐ No

- Is any contractor or volunteer who engages in sexual abuse reported to: Relevant licensing bodies? ☒ Yes ☐ No
115.77 (b)

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The BCJ policy 40.11 page 7, requires that any contractor or volunteer who engages in sexual abuse be reported to law enforcement and be prohibited from inmate contact.

In the past 12 months, there has not been an allegation of sexual abuse against a contractor or volunteer. Based on the above information, and interviews with volunteers, the PREA Manager, and Jail Administrator, this standard is assessed as compliant.

Standard 115.78: Disciplinary sanctions for inmates

115.78 (a)

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

115.78 (b)

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

115.78 (c)

- When determining what types of sanction, if any, should be imposed, does the disciplinary process consider whether an inmate’s mental disabilities or mental illness contributed to his or her behavior? ☒ Yes ☐ No
115.78 (d)  
- If the facility offers therapy, counseling, or other interventions designed to address and correct underlying reasons or motivations for the abuse, does the facility consider whether to require the offending inmate to participate in such interventions as a condition of access to programming and other benefits? ☒ Yes ☐ No

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

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

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

**Auditor Overall Compliance Determination**

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Inmates are subject to disciplinary sanctions in accordance with the formal disciplinary process for inmate-on-inmate sexual abuse as outlined in BCJ policy 40.11 page 14, and BCJ Discipline Procedures for Inmate Discipline 70.01 (also, Florida Model Jail Standards 13.01-13.14).

In the past 12 months there have been no (0) administrative findings of inmate-on-inmate sexual abuse that have occurred at the facility nor has there been any criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred at the facility. This information reported on the facility PAQ.

Based on inmate and staff interviews and the above information, the auditors assess this standard as compliant.
### MEDICAL AND MENTAL CARE

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

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

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

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

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

**115.81 (e)**
- Do medical and mental health practitioners obtain informed consent from inmates before reporting information about prior sexual victimization that did not occur in an institutional setting, unless the inmate is under the age of 18? ☒ Yes ☐ No
Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

Inmates who disclose prior sexual victimization during screening are offered follow-up with Healthcare at the Bradford County Jail. This follow-up Healthcare is directed by BCJ policy, 40.11, Policy, 100.01, Medical, and is documented in the inmate’s medical records. This information is accomplished within 14 days, also, as directed by policy. The offender information was obtained through interviews with specialized staff and review of policies, and documented by file folders, which includes a review by Dr. Pete Gianas, Medical Director Bradford County. (Note, this is not a prison, and follow up for abusers with a mental health practitioner is non-applicable.)

Information related to sexual victimization/abusiveness is strictly limited and based on a need to know. In the past 12 months, the percent of inmates who disclosed prior victimization during screening was less than 0.1%.

Based on the above information and specialized interviews, this standard is assessed as compliant.

**Standard 115.82: Access to emergency medical and mental health services**

115.82 (a)

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

115.82 (b)

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

- Do security staff first responders immediately notify the appropriate medical and mental health practitioners? ☒ Yes ☐ No
115.82 (c)

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

115.82 (d)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

BCSO, Department of the Jail, policy title-Medical Services Number 100.01, is quoted as: “Medical services are provided to inmates in accordance with the Florida Model Jail Standards and CDC guidelines.” CDC is the Center for Disease Control.

BCJ inmates/detainees victims of sexual abuse receive 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, staff documents, the timeliness of emergency medical treatment and crisis intervention.

The County Medical Director, through policy, standing orders, protocols, and an agreement with the Bradford County Jail extends this care. Treatment facilities which include Shands UF (University of Florida) Healthcare in Starke and Gainesville, Florida and Emergency Medical Services (EMS), which is located adjacent to the BCJ facility, are extended by Bradford County. Victim services are extended by the Alachua Rape Crisis Center. Treatment services are provided to every victim without financial cost.

Inmate and staff interviews confirm access to emergency medical and healthcare services. Based on this and the above information, this standard is assessed as compliant.
Standard 115.83: Ongoing medical and mental health care for sexual abuse victims and abusers

115.83 (a)

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

115.83 (b)

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

115.83 (c)

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

115.83 (d)

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

115.83 (e)

- If pregnancy results from the conduct described in paragraph § 115.83(d), do such victims receive timely and comprehensive information about and timely access to all lawful pregnancy-related medical services? (N/A if all-male facility.)  Yes  No  NA

115.83 (f)

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

115.83 (g)

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

115.83 (h)

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

Auditor Overall Compliance Determination

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

The BCJ offers medical and mental health evaluation/treatment, as appropriate, to all inmates who have been victimized by sexual abuse in any prison, jail, lockup, or juvenile facility. Policy 100.01, Medical Services also outlines this follow-up. Healthcare to inmates who disclose prior sexual victimization during screening requires documentation of such follow-up. (Note, upon release from the jail a three days’ supply of medication is extended to the inmate.)

Furthermore, the BCJ houses both male and female inmates and offers appropriate healthcare to female victims as outlined in this standard.

Inmate and staff interviews confirmed inmate awareness of services offered. Based on these interviews, and the policy above, the standard is assessed as compliant.

DATA COLLECTION AND REVIEW

Standard 115.86: Sexual abuse incident reviews

115.86 (a)

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

115.86 (b)

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

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

115.86 (d)

- Does the review team: Consider whether the allegation or investigation indicates a need to change policy or practice to better prevent, detect, or respond to sexual abuse? ☒ Yes ☐ No
- Does the review team: Consider whether the incident or allegation was motivated by race; ethnicity; gender identity; lesbian, gay, bisexual, transgender, or intersex identification, status, or perceived status; gang affiliation; or other group dynamics at the facility? ☒ Yes ☐ No
- Does the review team: Examine the area in the facility where the incident allegedly occurred to assess whether physical barriers in the area may enable abuse? ☒ Yes ☐ No
- Does the review team: Assess the adequacy of staffing levels in that area during different shifts? ☒ Yes ☐ No
- Does the review team: Assess whether monitoring technology should be deployed or augmented to supplement supervision by staff? ☒ Yes ☐ No
- Does the review team: Prepare a report of its findings, including but not necessarily limited to determinations made pursuant to §§ 115.86(d)(1) - (d)(5), and any recommendations for improvement and submit such report to the facility head and PREA compliance manager? ☒ Yes ☐ No

115.86 (e)

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

Auditor Overall Compliance Determination

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

The BCJ Policy 40.11 PREA Zero Tolerance, directs the following "sexual abuse incident reviews will be conducted at the conclusion of every sexual abuse investigation, including those where the allegation has not been substantiated, unless the allegation has been determined to be unfounded." This policy also covers changes to guidelines or practices, consideration of the motivation of the allegation, examining the area where it occurred, the adequacy of staffing levels, the adequacy of
monitoring technology, a final report of findings, and follow up with recommendations for improvement or documenting why such recommendations were not implemented.

The auditors reviewed the file folder for this standard, which contained policy and information regarding the Incident Review Team, the auditors also interviewed staff and review team members concerning coordinated efforts, motivations, assessments, and etc. all of which supported an exceeds compliance finding for this standard. The auditors assess this standard as exceeds.

### Standard 115.87: Data collection

<table>
<thead>
<tr>
<th>115.87 (a)</th>
<th>Does the agency collect accurate, uniform data for every allegation of sexual abuse at facilities under its direct control using a standardized instrument and set of definitions? ☒ Yes ☐ No</th>
</tr>
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<tbody>
<tr>
<td>115.87 (b)</td>
<td>Does the agency aggregate the incident-based sexual abuse data at least annually? ☒ Yes ☐ No</td>
</tr>
<tr>
<td>115.87 (c)</td>
<td>Does the incident-based data include, at a minimum, the data necessary to answer all questions from the most recent version of the Survey of Sexual Violence conducted by the Department of Justice? ☒ Yes ☐ No</td>
</tr>
<tr>
<td>115.87 (d)</td>
<td>Does the agency maintain, review, and collect data as needed from all available incident-based documents, including reports, investigation files, and sexual abuse incident reviews? ☒ Yes ☐ No</td>
</tr>
<tr>
<td>115.87 (e)</td>
<td>Does the agency also obtain incident-based and aggregated data from every private facility with which it contracts for the confinement of its inmates? (N/A if agency does not contract for the confinement of its inmates.) ☒ Yes ☐ No ☐ NA</td>
</tr>
<tr>
<td>115.87 (f)</td>
<td>Does the agency, upon request, provide all such data from the previous calendar year to the Department of Justice no later than June 30? (N/A if DOJ has not requested agency data.) ☒ Yes ☐ No ☐ NA</td>
</tr>
</tbody>
</table>
Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard (*Requires Corrective Action*)

Based on facility Policy 40.11 PREA, data collection, and the recent Survey of Sexual Victimization (SSV) Local Jail Jurisdictions Summary Form (forms for 2015 and 2016), and interviews with the Jail Administrator, PREA Coordinator, and PREA Manager, the auditors assess this standard as compliant.

The latest forms contained 18 questions, providing survey information to the US Department of Justice, Bureau of Justice Statistics.

### Standard 115.88: Data review for corrective action

115.88 (a)

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Identifying problem areas? ☒ Yes ☐ No

- Does the agency review data collected and aggregated pursuant to § 115.87 in order to assess and improve the effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training, including by: Taking corrective action on an ongoing basis? ☒ Yes ☐ No

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

115.88 (b)

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

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

115.88 (d)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

The agency policy BCSO, Department of the Jail directs the collection of sexual abuse information, "at least annually. In order to assess and improve effectiveness of its sexual abuse prevention, detection, and response policies, practices, and training by identifying problem areas; taking corrective action on an ongoing basis; and preparing an annual report of its findings and corrective actions."

Based on information from specialized interviews with the Jail Administrator, the PREA Coordinator, and the PREA Manager, information from the Incident Review Team, and the SSV reports, the auditors assess the standard as compliant.

Standard 115.89: Data storage, publication, and destruction

115.89 (a)

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

115.89 (b)

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

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

115.89 (d)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

The Bradford County Sheriff's Office ensures that data is collected and retained. "Sexual abuse data collected shall be maintained for at least 10 years after the date of initial collection unless required otherwise by federal, state, or local law." The BCJ redacts specific material from reports when publication would present a clear and specific threat to the safety and security of the facility. Additionally, the agency removes personal identifiers.

The data collected is approved by the Agency Head/Sheriff and made readily available to the public through the Bradford County Sheriff's Office website http://www.bradfordsheriff.org/. Based on this and the above policy, the auditors assess this standard as compliant.

AUDITING AND CORRECTIVE ACTION

Standard 115.401: Frequency and scope of audits

115.401 (a)

- During the three-year period starting on August 20, 2013, and during each three-year period thereafter, did the agency ensure that each facility operated by the agency, or by a private organization on behalf of the agency, was audited at least once? (N/A before August 20, 2016.) ☒ Yes ☐ No ☐ NA
115.401 (b)

- During each one-year period starting on August 20, 2013, did the agency ensure that at least one-third of each facility type operated by the agency, or by a private organization on behalf of the agency, was audited? ☒ Yes ☐ No

115.401 (h)

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

115.401 (i)

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

115.401 (m)

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

115.401 (n)

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

Auditor Overall Compliance Determination

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

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

☐ Does Not Meet Standard *(Requires Corrective Action)*

The auditors attest to the above statements based on the tour of the facility, the interviews with staff and inmates, and the review of documents and information submitted to the auditors.
Standard 115.403: Audit contents and findings

115.403 (f)

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

Auditor Overall Compliance Determination

☐ Exceeds Standard (Substantially exceeds requirement of standards)

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

☐ Does Not Meet Standard (Requires Corrective Action)

The audit is available through the website http://www.bradfordsheriff.org/ of the Bradford County Sheriff's Office.
AUDITOR CERTIFICATION

I certify that:

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

☒ No conflict of interest exists with respect to my ability to conduct an audit of the agency under review, and

☒ I have not included in the final report any personally identifiable information (PII) about any inmate or staff member, except where the names of administrative personnel are specifically requested in the report template.

James Curington 11/30/2017

Auditor Signature Date