

PREA AUDIT: AUDITOR'S SUMMARY REPORT

ADULT PRISONS & JAILS



Name of facility:		Baker County Sheriff's Office - Detention Center	
Physical address:		1 Sheriff Office Drive, Macclenny, FL. 32063	
Date report submitted:		August 18, 2014	
Auditor Information		Isaiah Dennard	
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Telephone number:		386-212-8449	
Date of facility visit:		July 21 – 24, 2014	
Facility Information		Baker County Sheriff's Office – Detention Center	
Facility mailing address: <i>(if different from above)</i>			
Telephone number:		904-259-2231	
The facility is:	<input type="checkbox"/> Military	<input checked="" type="checkbox"/> X County	<input type="checkbox"/> Federal
	<input type="checkbox"/> Private for profit	<input type="checkbox"/> Municipal	<input type="checkbox"/> State
	<input type="checkbox"/> Private not for profit		
Facility Type:	<input checked="" type="checkbox"/> X Jail	<input type="checkbox"/> Prison	
Name of PREA Compliance Manager:		Title:	Admin. Sgt.
Brad Harvey			
Email address: bharvey@bakerso.com		Telephone number:	904-259-0240
Agency Information			
Name of agency: Baker County Sheriff's Office			
Governing authority or parent agency: <i>(if applicable)</i>		Baker Correctional Development Corporation	
Physical address:		1 Sheriff Office Drive, Macclenny, FL. 32063	
Mailing address: <i>(if different from above)</i>			
Telephone number:			
Agency Chief Executive Officer			
Name: Joey B. Dobson		Title:	Sheriff
Email address: jdobson@bakerso.com		Telephone number:	904-653-6020

Agency-Wide PREA Coordinator		
Name: Brad Harvey	Title:	Admin. Sergeant
Email address:	bharvey@bakerso.com	Telephone number: 904-259-0240

AUDIT FINDINGS

NARRATIVE: The PREA Audit of the Baker County Sheriff’s Office – Detention Facility was conducted on July 21 – 24, 2014 by Isaiah Dennard, CEO of DCC & Associates, LLC, Post Office Box 391028, Deltona, FL. 32739, certified PREA Auditor (Adult Prisons & Jails). I was met by the agency PREA Coordinator, Sergeant Brad Harvey, shortly thereafter I was met by the Sheriff Joey Dobson, Major John Finley, Captain Danny Thomas, Lieutenant Evelyn, Lieutenant Mike Lagle, Lieutenant Jimmy Nickles, Cathy Wilson, Lynn Taylor. I began reviewing the agency supporting documentation which included the PREA Audit Questionnaire, the PREA Auditor Tool, Memos, Daily Headcounts, and other documentation furnished by the PREA Coordinator.

After an initial review of documentation a brief tour was made of the facility, I was accompanied by the PREA Coordinator Sergeant Brad Harvey: Intake, Medical Clinic, Classification, Youthful Offender Housing, Recreation Areas, Housing Unit, Administrative and Disciplinary Confinement, Isolation Cells and Controlrooms. During the facility tour random staff interviews with supervisors, line staff, contractors and vendors took place.

I asked for a staff roster and a housing roster, each was provided by Sergeant Harvey, I randomly selected staff to interview and inmates/detainees to interview. There were no inmate with physical disabilities noted, but during the interview there were some that were Limited English Proficient, but were aware of the language service that was available.

I interviewed at least 5–7 staff per shift over the course of the Audit, in addition, to line staff randomly selected during the tour. It was noted that the Baker County Sheriff’s Office – Detention Center staff works 12-hour shifts. I interviewed one (1) intake nurse, the Nursing Supervisor, the Nurse Educator, the Mental Health Staff, the Program Coordinator, one (1) Volunteer, three (3) Trinity Food Service Staff and all “specialized staff”.

There were no transgender inmates/detainees noted during this audit. I randomly interviewed 30 inmates/detainees taken from various housing units (e.g. US Marshal, ICE and Local inmates).

During the past 12 month there have been no reported allegations of sexual abuse and/or harassment.

DESCRIPTION OF FACILITY CHARACTERISTICS: The Baker County Sheriff's Office Complex is located at 1 Sheriff Drive, Macclenny, FL. The facility opened in 2009 with a rated capacity of 508 beds, it's a 1486,000 square foot facility, with 16 Dorms with 32 single cells in each contained on 90 acres. The sheriff's Complex contains the Baker County Detention Center and Corrections Bureau. While the Corrections Bureau is under the direction of the sheriff it is actually funded by the non-profit Baker Correctional Development Corporation. The Corrections Bureau, under a agreement with the United States Marshal Service (USMS) and Immigration & Custom Enforcement (ICE), is responsible for housing federal inmates, ICE detainees, as well as county inmates.

The Corrections Bureau of the Sheriff's Office is comprised of four (4) separate Division: Security Division , Administration Division, Court Security and Facilities Management. Using a combination of modern technology and employee skills, the entire Corrections Bureau team works in a collaborative effort to ensure the overall operation of the Corrections Bureau operates efficiently as possible.

Sheriff Joey Dobson is a constitutional elected officer, serving as sheriff since 1996. The Security Division is responsible for the 24 hour a day security of the Sheriff's Complex. Each security shift is supervised by one lieutenant who, in turn, supervises deputies and sergeants assigned to booking and housing. The Administration Division of the Corrections Bureau oversees all functions related to the effective operation of the detention center. These operations include: victim information, medical, inmate property, inmate programs (educational and religious), fire/sanitation, criminal registration, inmate commissary, classification, and outside work squads. The Court Security Division is supervised by one lieutenant and is responsible for overall security at the Baker County Courthouse. Additionally, the Court Security Division is responsible for civil process service, warrants, and inmate transportation.

The Baker County Sheriff's Office – Detention Center contracts with Trinity Food Services to provide food services. Property and Laundry is performed in-house by inmate workers. Commissary is provided by Keefe Commissary. Armor Correctional Health Services, Inc. provides all medical services.

SUMMARY OF AUDIT FINDINGS:

On July 21 - 24, 2014, six (6) number of site visits were completed at Baker County Sheriff's Office – Detention Center, 1 Sheriff Office Drive, in Macclenny, FL. 32063.

The results of the Prison Rape Elimination Act Audit of the Baker County Sheriff's Office – Detention Center indicates that 0 standards exceeded, 2 standards not applicable, 41 standards met.

The Baker County Sheriff's Office – Detention is 100% compliant with standards set forth by the Prison Rape Elimination Act.

Here is the breakdown:

Number of standards exceeded: **0**

Number of standards met: **41**

Number of standards not met: **0**

Number of standards not applicable: **2**

**Standard
number here**

115.11 Zero Tolerance

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

Based on Agency Policy CO-328, posters, interviews with Agency Leadership, staff and inmates. The Shift Lieutenant, Sergeants and Line Staff were interviewed; in addition, volunteers were interviewed to assess the Agency zero-tolerance.

Agency Leadership was interviewed as to their "zero-tolerance" policy and intent.

When line staff was asked about the agency "zero-tolerance" stance, they were able to articulate that stance. Several inmates/detainees were interviewed during this PREA Audit, they was asked about the agency PREA zero-tolerance, they were able to articulate their interpretation of zero-tolerance.

Throughout the facility and in each housing unit, visitation area, program areas, and common areas are posters stating the Agency Zero-Tolerance policy.

Inmates/Detainees are also provided a handbook and sexual assault insert emphasizing the right to be free from sexual abuse and/or harassment, and how to report incidents. In addition, a PREA Hotline is provided to inmates/detainees for confidential reporting of sexual abuse and/or harassment.

During the random interviews of inmates/detainees they were asked if the felt safe? All said that they did, they were asked "do you feel comfortable reporting an incident to a Correctional Officer, Supervisor, Contractor and/or Volunteer? All said "Yes".

The Agency designated PREA Coordinator indicated that he has sufficient time and access to Agency Leadership in order to accomplish his duties and responsibilities.

**Standard
number here**

115.12 Contracting with other agencies for confinement of inmates

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

X Non-Applicable

Standard number here 115.13 Supervision and monitoring

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

Based on Agency Policy - PO 006, in addition the Agency "Staffing Plan" details each staff position, supervisory staff, line staff and support staff. Random samples of shift rosters were reviewed to note deviations from staffing plan (e.g. Military Leave, Training, FMLA, Vacations, etc.).

Supervisory rounds and logbook documentation were noted to view frequency of rounds, unannounced rounds by an upper level management team member were noted, the frequency of rounds were checked and logbook documentation.

Several line staff were asked about the unannounced rounds by upper level management and the frequency of the rounds, all confirmed that they were taking place. Inmates/detainees were interviewed as to the viewing of supervisors making rounds, they confirmed so.

Standard number here 115.14 Youthful inmates

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

Based on Policy CO-324 and interview with Intake and Supervisory Staff. At the time of this PREA Audit there was one female Youthful Inmate in custody. No male Youthful inmates were in custody during this audit.

An interview was also conducted with the Program Manager that's responsible for continuing education for the Youthful Offender. The supervisory staff was able to articulate how the Youthful Offender was able to participate in additional programs and recreational activities.

The one female Youthful Inmate was kept out of sight and sound of adult inmates/detainees.

**Standard
number here**

115.15 Limits to cross gender viewing and searches

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

Based on Agency Policy 333, Agency Policy 328, Upper Level Management Staff, Supervisory Staff, Line Staff and Inmates/Detainees were interviewed.

When asked about training staff was able to articulate that when inmates/detainees are performing certain bodily functions what level of privacy if afforded to them, with the excepting of exigent circumstances.

Staff were able to articulate the training they received by the Agency Training Staff as to "cross-gender pat-down searches", searches of transgender and intersex inmates/detainees, when to search, when not to search, and to document each type of search, and how to maintain a professional demeanor.

Those staff charged with the responsibility of training the Agency staff provided documentation as to the training curriculum used to train staff.

Supervisory and Line Staff, and inmates/detainees were asked about opposite gender entering housing units, all said that an announcement is made at all times. During this Audit opposite gender entering housing units is also announced over the Agency Public Address System.

Inmates/Detainees are provided private showers and toilet in their single cell.

**Standard
number here**

115.16 inmates with disabilities and limited English speaking

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

Based on Agency Policy CO 328, the Agency provides an identification process for those inmates/detainees that are LEP. The Agency conducts an inmate/detainee PREA Orientation for each new inmates/detainees, on the orientation form is asked (if able to) to notate the preferred language. At the time of their Physical Assessment (within 14 days) and during the inmate/detainee education presentation the inmates/detainees are asked again their language of preference. Documentation is noted in the Agency Jail Management System, PREA Orientation Form and the Inmate PREA Education Acknowledgment Form, and included in the Agency Policy.

Several inmates/detainees identified as LEP were interviewed, most were able to understand some English, but most preferred their language of origin, they were familiar with the Agency Language Line services. Staff was interviewed as to the procedures an inmate/detainee needs to follow to access the language line, staff was able to articulate the process and the locations of the language line designated telephones.

Standard number here 115.17 Hiring and promotion decisions

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

Based on Agency Policy AD 204, the Agency Human Resource Manager was interviewed as to the hiring process and promotions. A random sampling of new hires that would have been hired within the last 12 months were reviewed and a sampling of current employees. The Human Resource Manager said during the interview phase of this assessment that due to their ICE Contract "background investigations" must be completed every 3 years.

The Agency Investigator charged with Background Investigations was interviewed as to his experience and process of conducting background investigations. The Agency Investigator has over 30 years' experience in Law Enforcement, with 20 years' experience in Administrative and Criminal Investigations.

During the past 12 months there has been no incident with hiring and/or promotions at the Baker County Sheriff's Office – Detention Center.

Standard number here 115.18 Upgrades to facilities and technology

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

Based on CO 326, no new Upgrades to facilities and technology, video monitoring expansions and/or modifications been made since August 20, 2012.

Standard number here

115.21 evidence protocol and forensic medical exams

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

Based on Agency Policy CO 328 and SOB MB 148, interviewed the Agency Investigator as to evidence protocol. Random interviews with Line Staff as to their responsibility of First Responders to allegations of sexual abuse and/or harassment, how to secure a crime scene, the agency protocol as to victims and perpetrators. Random interviews with Civilian staff as to their responsibility to allegations of sexual abuse and/or harassment.

The Baker County Sheriff's Office – Detention Center has a Memorandum of Understanding (MOU) with the Women's Center of Jacksonville (WCJ) for providing "victim advocates services to victims of sexual abuse. A representative of the WCJ was interviewed as to their purpose and the training given to each victim advocate.

Standard number here

115.22 referrals of allegations for investigations

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

Based on Agency Policy CO 328, the Agency Investigator was interviewed as to their protocol for investigating allegations of sexual abuse and/or harassment. The Agency Investigator has over 30 years' experience in Law Enforcement, with 20 years conducting Administrative and Criminal Investigations. The Agency Investigator training curriculum (Specialized Training: Investigation Sexual Abuse in Confinement Setting) was reviewed.

During this past 12 months there have been no allegations of sexual abuse and/or harassment by inmates/detainees.

They were two allegations made by inmates/detainees that took place at two other institutions prior to their incarceration at the Baker County Sheriff's Office – Detention Center. Those institutions were notified in accordance with Agency Policy and PREA Standards by the PREA Coordinator and Agency Investigator. Both institutions had investigated each allegation.

PREA Standards 115.22 (c), (d) and (e) are non-applicable to the Baker County Sheriff's Office – Detention Center.

Standard number here

115.31 Employee training

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

Based on CO 328, the Agency PREA training curriculum for certified staff, contractors, vendors and volunteers. The training curriculum is reviewed and updated annually as needed. A random sampling of training records was reviewed.

Random staff interviews were conducted, random interviews with contracted staff were conducted as to their training, both were able to articulate what their training consist of, the goals of the training, and the agency zero-tolerance policy.

The Training Staff and the PREA Coordinator was interviewed as to the development of the staff/volunteer training

The Women's Center of Jacksonville training curriculum was reviewed.

Standard number here

115.32 Volunteer and contractors training

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

Based on CO 328, the Agency contracts with Trinity Food Service and Armor Correctional Health Care for services. Their training records and training curriculum was reviewed.

Random staff interviews with contractors from Trinity, the staff were able to articulate their role and responsibility when allegations of sexual abuse and/or harassment, the signs of sexual abuse from inmates/detainees, and to be aware of inmate manipulation. Their training curriculum documentation was reviewed.

Random interviews of the medical and mental health staff as to their initial and follow-up "Risk Assessments", services offered, and follow-up treatment provided.

Random interviews were conducted with volunteers as to their role and responsibility of allegations of sexual abuse and/or harassment. A random sampling of volunteer PREA Orientation Contracts and Acknowledgment were reviewed.

In addition to their individualized contractor training, they (the contractors) also attend the Agency PREA Training.

**Standard
number here**

115.33 Inmate education

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

Based on Agency Policy MB 119, Inmates/Detainees are given a handbook during the admission process, and shown an orientation video during their physical assessment, and they acknowledge each in writing by signature.

Each portion of the inmate/detainees education informs them of their rights to be free from sexual abuse and/or harassment, how to report incidents, and how to access educational, medical and/or mental health services.

**Standard
number here**

115.34 Specialized training: Investigators

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

The Agency Investigator was interviewed as to his experience, investigative protocol, how investigations (Administrative and Criminal) are processed.

The Agency Investigator has over 30 years' experience in Law Enforcement, with 20 years conducting Administrative and Criminal Investigations.

The Agency Investigator training curriculum (Specialized Training: Investigation Sexual Abuse in Confinement Setting) was reviewed.

During the past 12 months there have been no incidents reported of allegations of sexual abuse and/or harassment at the Baker County Sheriff's Office – Detention Center.

PREA Standards 115.34 (d) "non-applicable" to the Baker County Sheriff's Office – Detention Center.

Standard number here 115.35 Specialized training: Medical and mental health care

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

Medical and Mental Services are provided by Armor Health Care Services. Random staff interviews with the Medical Intake Staff were conducted, their questionnaire and initial "risk assessment" was reviewed.

Armor Mental Health Staff was interviewed as to her initial assessment of inmates/detainees, follow-up treatment, emergency treatment, and post treatment of victims of sexual abuse and/or harassment.

Armor Medical and Mental Health Training Curriculum was reviewed.

PREA Standard 115.35 (b) "non-applicable to the Baker County Sheriff's Office – Detention Center.

Standard number here 115.41 Screening for risk of victimization and abusiveness

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

Based on CO 312 and a random sampling of the agency "risk assessment tool" for victimization and abusiveness were reviewed. The tool includes an instructional guide for the end user, supervisory and classification staff PREA acknowledgement, and an inmate/detainee signature block.

Supervisory, Medical, Mental Health and Line staff were interviewed as to their "risk assessment, their reassessment process for victimization, and the development of a validated tool.

Random inmate/detainee interviews were conducted, they were asked to recall being questioned by staff if "they had been a victim of sexual abuse and/or harassment? All recalled that they had been asked, and that services were offered.

A representative of the WCJ was asked about telephonic notifications received by their staff and their level of training.

Standard number here

115.42 Use of screening information

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

Based on CO 312 and CO 316, the Agency policy indicates their commitment to protect inmate/detainees; the policy provides a guideline for staff, contractors, vendors and volunteers.

The use of screening information provides relevant information for appropriate housing assignments, custody levels, treatment option (if warranted). Only factual and reliable information will be used to determine housing assignments.

The Classification Officer was interviewed as to their role and responsibility of the "Use of Screening Information" and their reassessment process.

Standard number here

115.43 Protective custody

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

Based on Agency Policy CO 334, random interviews with supervisory staff, line staff and the Agency Investigator "Protective Custody" and its use is only done when other alternatives are not readily available, such as a reassessment and review of an inmate/detainee classification custody level.

For the past 12 months no inmate/detainee had been placed into "involuntary isolation" for less than 24 hours. Within the past 12 months there was one female inmate/detainee placed in "Protective Custody" for the purpose of "risk of victimization or abusiveness". The inmate/detainee was unable to name her perpetrator; the Agency Investigator conducted an investigation in accordance with protocol. The inmate/detainee was moved from "involuntary isolation" to an "administrative confinement status" with all education, recreational, etc. services afforded the general population.

During the PREA Audit one female Youthful Offender had been placed in "involuntary isolation" due to no other female Youthful Offenders in custody and she been charged as an adult and placed into the County Jail. This Youthful Offender was housed in the Intake/Booking Area, with all education, recreation and access to services afforded the general population.

Standard number here 115.51 Inmate reporting

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

Based on Agency Policy 328, random interviews with inmates/detainees were conducted; inmates/detainees said that they felt comfortable in reporting allegations of sexual abuse and/or harassment to staff if they felt the need.

Line staff was interviewed as to the role and responsibilities as First Responders When reports of sexual abuse and/or harassments are received, how to separate victims from perpetrators, how to secure the scene, how to seek medical attention for both (victim & perpetrator), what specific instructions needs to be given to each as to the preservation of forensic evidence.

Supervisory staff was interviewed as to their role and responsibilities, along with the Agency Investigator and PREA Coordinator. The Agency Chief of Security was interviewed as to the Agency Administrator responsibility to ensure a proper investigation is conducted for all allegations.

A review of the MOU between the Women’s Center of Jacksonville and reports received from the Baker County Sheriff’s Office – Detention Center for advocacy services and reporting.

Located throughout the facility are posters indicating a process for reporting sexual abuse, in addition, the inmate/detainee handbook has information on how to report allegation. There is a Telephonic Hotline Services available for inmate/detainees to report allegations.

Standard number here 115.52 exhaustion of administrative remedies

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

Based on Agency Policy CO 328 and CO 386, random interviews with inmates as to their ability to exhaust administrative remedies.

Random interviews with the Agency Chief of Security (Jail Administrator), PREA Coordinator, Investigator, Supervisory and Line staff as the process of an inmate filing a grievance in relation to sexual abuse.

**Standard
number here**

115.53 Inmate access to outside confidential support services

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

Based on CO 326 and a MOU with the Women's Center of Jacksonville a confidential "telephonic hotline" is made available.

An interview with a representative of the WCJ was able to articulate their purpose and scope of services by providing victim services.

The Facility Chief of Security (Jail Administrator), PREA Coordinator was interviewed as to inmates/detainees access to outside and confidential support services.

The medical and mental health staff were also interviewed as to outside confidential support services for inmates/detainees.

**Standard
number here**

115.54 Third party reporting

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

Based on Agency Policy CO 328 and random interviews with line staff, supervisory staff and agency leadership. Line staff, Supervisory staff and Agency Leadership were able to articulate how their "third party" process works in accordance with PREA.

Random interviews with inmates/detainees as to their knowledge of how to use "third party reporting". The inmate/detainee handbook and brochure contains details of the "third party reporting" process

MOU from the Women's Center of Jacksonville was reviewed, they provides the "third party reporting", in addition, there are posters within every housing units with the "hotline" number to the Rape Crisis Center.

Standard number here 115.61 Staff and agency reporting duties

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

Based on Agency Policy CO 328, random interviews with line staff, supervisory staff, medical and mental health, Agency Investigator, PREA Coordinator, Agency Chief of Security (Jail Administrator) and Contract personnel. Line staff as First Responders was able to explain their roles and responsibilities; in addition, Supervisory staff was able to articulate the roles and responsibilities.

Armor Medical and Mental Health Staff were able to explain the reporting procedures and training they receive, inmates/detainees access to services and follow-up treatment.

Standard number here 115.62 Agency protection duties

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

Based on Agency Policy 316, an interview with the Classification Officer as to their "Objective Classification" system that is in place to assess an inmate/detainee custody level and housing assignment.

Random interviews were also conducted with the Intake staff that conducts an "initial classification" on each new inmate/detainee admission, what sign to look for, what questions to ask for potential victimization and abusiveness.

Standard number here 115.63 Reporting to other confinement facilities

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

Based on Agency Policy 328, during the past 12 months there were two allegations made while the inmates/detainees were housed in another confinement facilities.

In accordance with PREA Standards both allegations were reported to the respective confinement facilities with eight hours of the Baker County Sheriff's Office – Detention Center receiving the information.

Upon notification being received by the two separate confinement facilities it was noted that both allegations had been investigated, and that they were either closed, unfounded or ongoing.

The Agency Investigator and PREA Coordinator were interviewed as to their protocol once receiving allegations that potentially occurred at other confinement facilities.

Standard number here 115.64 Staff first responder duties

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

Based on Agency Policy CO 328, random interviews were conducted with Line staff, Supervisory staff. Line staff as First Responders was able to articulate as to what action they take they receive a report of sexual abuse and/or harassment: secure the scene, seek medical attention for the victim and perpetrator, separate the two, notify supervisory staff, and document the incident.

Supervisory staff were able to articulate their roles and responsibility, from arranging for a forensic exam (if applicable), notifying appropriate Law Enforcement, the arrangement of Victim Advocate, etc.

Standard number here 115.65 Coordinated response

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

Based on Agency Policy CO 328 and interview with the Facility Chief of Security (Jail Administrator) as to their agency coordinator response to allegation of sexual abuse and harassment, between security, investigator, medical/mental health, forensic examiners and Law Enforcement.

The Agency Investigator was also interviewed as to his coordinated responses with the Security Staff and Law enforcement (when warranted).

Standard number here

115.66 Preservation of ability to protect inmates from contact with abusers

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

Standard number here

115.67 Agency protection against retaliation

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

Based on CO 328, the Classification Office for the Baker County Sheriff's Office – Detention Center monitor "retaliation" against inmates/detainees. A system exists at the Baker County Sheriff's Office – Detention Center that will identify all inmates/detainees who have been a victim of sexual abuse and harassment. Once identified the inmate/detainee is placed on a review list for the classification officer to monitor.

An interview with the Classification Officer took place as she was able to explain the agency system of monitoring potential retaliation of inmate/detainees. An increase of requests for housing changes from particular, and an increase of disciplinary reports as a potential "red flag" for monitoring. The classification officer may conduct a follow-up "risk assessment" is warranted.

The Agency Leadership was interviewed as to their protocol and process to guard against retaliation and how the inmates/detainees are protected from such actions.

Standard number here

115.68 Post allegation protective custody

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

Based on Agency Policy 334, one female inmate was placed into "Protective Custody" due to allegations of sexual abuse, but she was unable to name her assailant, but placed into Protective custody for her on protection.

The Agency Investigator conducted an investigation and determined the allegation were "unfounded". The Agency Investigator was interviewed as to his determination of an "unfounded" finding in this case, he was able to explain (based on his training and experience) his findings.

Standard number here 115.71 Criminal and administrative agency investigation

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

Based on Agency Policy CO 328 and SOB MB 124, and interview with the Agency Investigator who conducts both "Criminal and Administrative Investigations"?

Also interviewed the Chief of Security (Jail Administrator) and the PREA Coordinator.

PREA Standard 115.71 (k) and (l) "non-applicable to Baker County Sheriff's Office - Detention Center.

Standard number here 115.72 Evidentiary standard for administrative investigation

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

Based on CO 328 and interviews with the Agency Investigator as to the Agency "evidentiary standard for administrative investigations.

Standard number here 115.73 Reporting to inmates

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

Based on Agency Policy 328, and interviews with the Agency Investigators as to reporting to inmates/detainees protocol and procedures.

Interviews with the Agency Chief of Security and PREA Coordinator as to the agency reporting protocol and procedures.

Standard number here 115.76 Disciplinary sanctions for staff

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

Based on Agency Policy SOG MB 119, during the past 12 months no staff has been no incidents between inmates/detainees.

Agency Leadership, PREA Coordinator were interviewed as to the agency policy of discipline of agency staff in the event of an incident between inmates/detainees, both were able to explain the agency process.

Standard number here 115.77 Corrective action for contractors and volunteers

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

Based on SOG MB 171, during the past 12 months there have been no reports of sexual abuse and/or harassment against any contractor, vendor and/or volunteer.

Standard number here 115.78 Disciplinary sanctions for inmates

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

Based on CO 328 and CO 330, within the inmate/detainee handbook are prohibited acts and the possible sanctions. In addition, counseling and therapy is offered each inmate/detainee.

During the past 12 months there have been no administrative or criminal findings of guilt for inmate-on-inmate sexual abuse that have occurred within the Baker County Sheriff's Office – Detention Center.

The PREA Coordinator and Administrative Lieutenant explain the inmate/detainee disciplinary process, from line staff and supervisory role and responsibility to the hearing officer and/or disciplinary board review and the leveling of sanctions (if warranted).

Standard number here

115.81 Medical and Mental health screening; history of sexual abuse

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

Based on Agency Policy CO 312, random interviews with Armor Medical and Mental Health Staff, from Intake to the Physical Assessment.

A random sampling of "risk assessments" questionnaires was reviewed.

Random interviews of inmates/detainees as to being questioned at intake by medical personnel, and during their health physical as to being a victim of sexual abuse.

During questioning by medical staff at either intake and/or during their health physical certain "red flag" are noted and sent to mental health for a possible initial and follow-up evaluation.

Standard number here

115.82 Access to emergency medical and mental health services

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

Based on Agency Policy CO 328, all access to emergency medical and mental health services is provided by Armor Correctional Health Care Services.

PREA 115.82 (b) "non-applicable", Baker County Sheriff's Office – Detention Center has 24-hour, 7-days a week medical coverage. Armor also provided inmate/detainee ongoing "health education" and timely access to medical care, access to emergency contraception and sexually transmitted infectious prophylaxis.

Random interviews with medical and mental health staff as to how access to emergency medical and mental health services is communicated to inmates/detainees, when? And how often? Information is ongoing communicated through "sick call" and through a "request form system".

Random interviews with line staff who maybe "first responders" and their role and responsibilities when accessing emergency medical and mental health services for victims of sexual abuse.

Standard number here

115.83 ongoing medical and mental health care for sexual abuse victims

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

A review of Armor Correctional Health Care Services "Procedure In the event of a Sexual Assault/PREA" Policy.

Interviews with Armor Medical and Mental Health Personnel as to their policy, protocol, training and follow-up treatment for inmates/detainees and "ongoing medical and mental health care for sexual abuse victims".

Standard number here

115.86 Sexual abuse incident reviews

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

Based on CO 328, the agency has an "incident review" protocol establish to review each incident which has a stated "purpose", who is assigned to the team (security staff, medical/mental health, agency investigator, PREA Coordinator and Agency Leadership).

At the conclusion of each incident review recommendation and suggestions are part of the protocol.

The PREA Coordinator was interviewed as to "Incident Reviews" and documentation of incidents and who that report is forward to?

During the past 12 months there have been no Incident Reviews" conducted by the Baker County Sheriff's Office – Detention Center "Review Team".

**Standard
number here**

115.87 Data collection

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

Based on Agency Policy CO 328, interview with the PREA Coordinator explained the data collection process.

PREA 115.87 (e) "non-applicable".

Data collect worksheet for 2013, (2) incidents were found "unfounded", titled "Detainee Nonconsensual Sexual Act noted (11/06/13 and 11/14/13). On the data worksheet are a set of definition as to "Inmate/Detainee on Inmate/Detainee Sexual Violence and Staff Sexual Misconduct and Harassment".

**Standard
number here**

115.88 Data review for corrective action

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

Based on agency Policy 328 and interview with the PREA Coordinator as to the use of data for corrective action. PREA Coordinator explained his collection of pertinent information (e.g. incidents report) to aggregate his data, and how that data is used; upgrades in technology, staffing, increased training and staff awareness.

The Chief of Security (Jail Administrator) was interviewed and he explained how data assist the agency moving forward.

A review of 2013 Survey Report of Sexual Violence to the US Department of Justice was reviewed, two (2) incidents reported, two (2) incidents "unfounded".

**Standard
number here**

115.89 Data storage, publication and destruction

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

Based on Agency Policy 328 and interviews with the PREA Coordinator as to data storage, publication and the redacting of specific materials that presents a clear and present danger, the removal of personal identifies collection of previous year's data, destruction of data.

The data collected is secured by the PREA Coordinator; information is readily made available to the general public upon request.

AUDITOR CERTIFICATION:

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



Auditor Signature

August 18, 2014

Date