<table>
<thead>
<tr>
<th>Name of facility</th>
<th>Santa Rosa County Sheriff’s Office – Detention Center</th>
</tr>
</thead>
<tbody>
<tr>
<td>Physical address:</td>
<td>5755 East Milton Road Milton, Florida 32583</td>
</tr>
<tr>
<td>Date report submitted:</td>
<td>June 30, 2017</td>
</tr>
<tr>
<td>Auditor Information</td>
<td>James Aguiar, Jr.</td>
</tr>
<tr>
<td>Address:</td>
<td>PO Box 772344, Ocala, Florida 34477</td>
</tr>
<tr>
<td>Email:</td>
<td><a href="mailto:jamesaguiajr@icloud.com">jamesaguiajr@icloud.com</a></td>
</tr>
<tr>
<td>Telephone number:</td>
<td>352-438-4246</td>
</tr>
<tr>
<td>Date of facility visit:</td>
<td>June 7-9, 2017</td>
</tr>
<tr>
<td>Facility Information</td>
<td>Santa Rosa Sheriff’s Office – Detention Facility</td>
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<tr>
<td>Facility mailing address: (if different from above)</td>
<td>P.O. Box 7129 Milton, Florida 32572</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>850-983-1100</td>
</tr>
<tr>
<td>The facility is:</td>
<td>□ Military</td>
</tr>
<tr>
<td></td>
<td>□ Private for profit</td>
</tr>
<tr>
<td></td>
<td>□ Private not for profit</td>
</tr>
<tr>
<td>Facility Type:</td>
<td>X Jail</td>
</tr>
<tr>
<td>Name of PREA Compliance Manager:</td>
<td>Barbara Stearns</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:bsteams@srso.net">bsteams@srso.net</a></td>
</tr>
<tr>
<td>Agency Information</td>
<td></td>
</tr>
<tr>
<td>Name of agency:</td>
<td>Santa Rosa County Sheriff’s Office – Detention Facility</td>
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<tr>
<td>Governing authority or parent agency: (if applicable)</td>
<td>Board of County Commissioners</td>
</tr>
<tr>
<td>Physical address:</td>
<td>6495 Caroline St Suite M, Milton, Florida 32570</td>
</tr>
<tr>
<td>Mailing address:</td>
<td>(if different from above) Same as above</td>
</tr>
<tr>
<td>Telephone number:</td>
<td>850-983-1100</td>
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<tr>
<td>Agency Chief Executive Officer</td>
<td></td>
</tr>
<tr>
<td>Name:</td>
<td>Bob Johnson</td>
</tr>
<tr>
<td>Email address:</td>
<td><a href="mailto:bjohnson@srso.net">bjohnson@srso.net</a></td>
</tr>
<tr>
<td>Agency-Wide PREA Coordinator</td>
<td></td>
</tr>
<tr>
<td>Name:</td>
<td>Wilda McWilliams</td>
</tr>
<tr>
<td>Email address:</td>
<td>wmcwilliams.net</td>
</tr>
</tbody>
</table>
AUDIT FINDINGS

NARRATIVE:

The audit of Santa Rosa Sheriff’s Office – Detention Facility was conducted on June 7-9, 2017, by James Aguiar, Jr., Certified PREA auditor. I was greeted by the Captain J. Cochran and Sgt. W. McWilliams, they escorted me to the training for introduction meeting. At this meeting I met and spoke with Sheriff Bob Johnson, Chief Deputy Jim Spencer, Major Randy Tifft and the rest of the staff members of the Sheriff's Office. After the introduction meeting, I toured the facility from 0830 – 1000. The areas toured were a total of 23 housing units. There are five pods; Pod One has three open bay dorms a Pre Class dorm, Close Management, Special needs and a male lockdown dorm. Pod Two has one open bay dorm, two 2 man cell dorms and one juvenile dorm. Pod three is currently closed and pod four has four open bay dorms one female lockdown and a FBOP female unit and pod five is a 128 bed in-direct supervision unit, plus the kitchen, laundry, programs area, and work areas. On the tour with me was Captain B. Stearns and Sgt. W. McWilliams.

The day of the audit I asked for an alpha listing of all inmates housed at the facility and randomly selected several inmates from each housing unit as well as any inmates who were limited English speaking or had hearing/vision impairment to be interviewed (which there were none present in the facility). There were no transgender inmates to interviewed. I also interviewed the one juvenile currently in custody. I conducted a total of 31 random inmate interviews.

I asked for a shift roster and randomly selected 22 line security and civilian staff to interview, 12 on Wednesday from A-Shift, 10 on Wednesday from B-Shift, and addition to the line staff, I interviewed 2 from food service (contracted), 1 from maintenance, 2 volunteers, 2 medical (contract), 4 from Criminal Investigation Unit, 2 First line supervisors, 2 from the commissary area (contracted). All specialized staff were interviewed except SANE/SAFE, all SANE/SAFE exams are performed at the hospital.

There were 2 sexual assault/harassment allegation cases during this PREA Audit cycle, however both cases were non-substantiated and further action was required.

DESCRIPTION OF FACILITY CHARACTERISTICS:

Santa Rosa County is located within the panhandle of Florida bordered by the state of Alabama. Santa Rosa County is 1174 square miles, of which 1,016 square miles are land and 156 square miles are water. The population is approximately 160,000. The city of Milton is the county seat and one of the oldest cities in Florida. The Board of County Commissioners serves as the legislative and policy setting body of Santa Rosa County as established under Section 125 of the Florida Statutes. The Board enacts all legislation and authorizes programs and expenditures within the County.
Sheriff Bob Johnson is a constitutional officer, serving his first term. The Santa Rosa County Sheriff’s Office has over 400 full time professionals and is divided into three major divisions – Law Enforcement, Administration and Detention. The Detention Division consists of 87 certified officers and 60 civilian staff. The Santa Rosa County Sheriff’s Office is accredited by the Commission for Florida Law Enforcement Accreditation, Inc. (CFA) and Florida Corrections Accreditation Commission Inc. (FCAC).

The main facility opened in 1997 and the new addition was opened in October of 2010. The facility has a rated capacity of 732 inmates. The facility is a podular style indirect supervision with 23 dorm style housing units, which houses all custody levels of pretrial and sentenced inmates, federal, and military inmates. Inmates are housed based on their custody level as determined by an Objective Jail Classification.

The Santa Rosa Detention Division contracts with Aramark Services to provide the following: commissary, food services, maintenance, control room operators, property and laundry. Armor Correctional Health Services, Inc. provides all medical services.

**SUMMARY OF AUDIT FINDINGS:**

On June 7,8,9, 2017, three site visits were completed at Santa Rosa County Sheriff’s Office in Milton, Florida for their recertification. The results indicate:

Number of standards exceeded: 3 (115.18, 115.33, and 115.64)

Number of standards met: 39

Number of standards not met: 0

Number of standards not applicable: 1 (115.63)
Standard number here 115.11 Zero Tolerance

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

Auditor comments, including corrective actions needed if does not meet standard

Based on General O-123 I. A 1-17; postings and interviews with PREA coordinator and compliance manager.

Standard number here 115.12 Contracting with other agencies for confinement of inmates

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

Auditor comments, including corrective actions needed if does not meet standard

Based on General O-123 I.B 1a, b; Santa Rosa Detention Center has contracts to house inmates/detainees with the United States Marshall Service, the Eglin Air Force Base Confinement, and the Air Force Corrections Program.

Standard number here 115.13 Supervision and monitoring

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

Auditor comments, including corrective actions needed if does not meet standard

Based GO 123 I. C 1-4; SOP 15.46 & 15.70 & 104 and interviews with Major, Lieutenant, Shift Commanders, PREA Coordinator, and staff members.
Standard number here 115.14 Youthful inmates

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO 123 I.D 1-5; and interviews with staff and observations. At the time of the audit there was only one juvenile housed in a unit by themself.

Standard number here 115.15 Limits to cross gender viewing and searches

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO 123 I. E 1-8; reviewed lesson plans and sign in sheets as well as interviews with inmates and random staff. There have been no body cavity searches performed.

Standard number here 115.16 inmates with disabilities and limited English speaking

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on review of GO O-123 I. F 1-2; SOP 15.77

Reviewed Contingency agreement for Sign language interpreter services effective 05/10/17.

Reviewed Contingency agreement for Spanish language interpreter services effective 05/03/17.

I actually observed pamphlets, documents, and a PREA video in Spanish.
Standard number here  115.17 Hiring and promotion decisions

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

** Auditor comments, including corrective actions needed if does not meet standard **

Based on GO O123 I. G 1-8; D-011, D-017 & 019 also based on interview with HR director and review of personnel files

Standard number here  115.18 Upgrades to facilities and technology

- X 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)

** Auditor comments, including corrective actions needed if does not meet standard **

Based on OD 123 I.H 1-2; review of camera location and interviews with Major. Since their last PREA Audit, they have installed 30 additional cameras. They also developed a PREA video (in English, Spanish, and Sign Language) that is played twice a day in all of the inmate housing units. In addition to these upgrades, they have upgraded their TTY/TDY machine to a video system for their inmates.

Standard number here  115.21 evidence protocol and forensic medical exams

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

** Auditor comments, including corrective actions needed if does not meet standard **

Based on Review of GO 123 II A 1-6, S-001 and MOU with Lakeview Centers Rape crisis dated 1/9/14. Also interview with random staff, detectives and PREA compliance manager.
Standard number here 115.22 referrals of allegations for investigations

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

**Auditor comments, including corrective actions needed if does not meet standard**

Reviewed GO 123 II.B. 1-3, M-020, Policy is on website. Interview with the Major, detectives, random staff members, and the PREA Coordinator.

---

Standard number here 115.31 Employee training

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

**Auditor comments, including corrective actions needed if does not meet standard**

Reviewed GO O-123 III. A and training curriculum, training bulletins and sign in sheets, as well as through interviews with random staff and contracted staff, they have developed test questions as they pertain to the PREA standard as well as their own policy and they hand out tests in muster. Great use of training resources.

---

Standard number here 115.32 Volunteer and contractors training

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 III. B; D-011 reviewed lesson plans and sign in sheets for volunteers and contractors. As well as through interviews with volunteers and contractors.
### 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)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 III. C 1-2 and Review of Orientation material and Inmate Handbook and interviews with intake staff and random inmates. Reviewed Orientation forms, pamphlets, and documents. Reviewed limited English speaking paperwork and interviewed inmate. No deaf or blind inmates as of 06/7-9/17 were interviewed, however the Santa Rosa Detention Center has replaced their existing TTY/TDY with a video system. They have also developed a PREA video that plays two times a day in English, Spanish, Sign Language, and closed-captioned.

### 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)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123, review of the Florida Sheriff's Institute training PowerPoint and certificates of investigators taking the course as well as through interviews. Investigators also has numerous years of experience as a Special Victims investigator specializing in women and children.

### 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)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 III. E. 1-2; Armor policy J-J-01 and review of Sign in Sheets. All forensic exams are performed at the hospital.
<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.41 Screening for risk of victimization and abusiveness</th>
</tr>
</thead>
<tbody>
<tr>
<td>□ Exceeds Standard (substantially exceeds requirement of standard)</td>
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<tr>
<td>X Meets Standard (substantial compliance; complies in all material ways with the standard for the relevant review period)</td>
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<tr>
<td>□ Does Not Meet Standard (requires corrective action)</td>
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</table>

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 IV.A 1-6; GO O-002 & 001; reviewed the various areas for screening of the new arrest enter into the facility, the 30 day re-classification meeting minutes. And interviews with random inmates, intake screening staff and medical staff,

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.42 Use of screening information</th>
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<tr>
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<tr>
<td>□ Does Not Meet Standard (requires corrective action)</td>
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**Auditor comments, including corrective actions needed if does not meet standard**

Based on General Order O-123 IV B 1 – 6 and interviews with PREA Coordinator, the Command Staff and the Intake staff.

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.43 Protective custody</th>
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<tr>
<td>□ Does Not Meet Standard (requires corrective action)</td>
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**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 IV C 1-5, O-002 & O-074 and interviews with the Major and PREA Coordinator.
Standard number here 115.51 Inmate reporting

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on GO O-123 V. A 1-10; there are numerous signage throughout the facility with this information, information is in the inmates' handbook, this information is also on the kiosks inside each housing unit, and MOU with Lakeview Center Crisis Center signed 1/9/14 to accept free phone calls from the jail. Several staff interviews with random staff and inmates and PREA Coordinator.

Standard number here 115.52 exhaustion of administrative remedies

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on GO O-123 IV.B 1, 4, 6, 9, 11, 16. They have not had any administrative remedies as a result of sexual abuse.

Standard number here 115.53 Inmate access to outside confidential support services

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard

Based on GO O-123 V. C 1-5 and Inmate Handbook page 2 and MOU Lakeview Rape Crisis Center signed 1/9/14.
<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.54 Third party reporting</th>
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</table>

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 V. D 1-3 and review of notice on website and posters in facility, as well as interviews with numerous inmates who confirmed they were aware of way to report sexual assault and / or sexual harassment.

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.61 Staff and agency reporting duties</th>
</tr>
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☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VI A 1-7 and interviews with random staff and contract staff, Major and Medical/mental health staff.

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.62 Agency protection duties</th>
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☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VI B 1 and interview with the Major and random staff. During this audit the Santa Rosa County Detention Center had no inmates deemed at substantial risk of imminent sexual abuse.
**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)

**X** Non Applicable

**Auditor comments, including corrective actions needed if does not meet standard**

During this PREA Audit cycle, the Santa Rosa County Detention Center does report to 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)

**X** Non Applicable

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VI.D 1-3. and interviews. The Santa Rosa County Detention Center issues every staff member (to include contractors) a PREA Quick Reference Card that is periodically check. Each Control Room in each housing area is issued a PREA Quick Reference Booklet that is accounted for each month. The PREA Coordinator conducts a monthly inspection throughout the entire facility of all facets relating to PREA.

---

**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)

**X** Non Applicable

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VI. E.1 and interview with Chief Deputy and the Major. Very well written plan.
Standard number here 115.66 Preservation of ability to protect inmates from contact with abusers

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 V.I F. and interviews with the Chief Deputy and the Major also reviewed the Paternal Order of Police contracts.

Standard number here 115.67 Agency protection against retaliation

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VI G 1-6 and interviews with Major and the PREA Coordinator who monitors any and all possible signs of retaliation. During this PREA Audit cycle, there has not been any retaliation issues.

Standard number here 115.68 Post allegation protective custody

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on review of GO 123 VI. H as well as review of segregation housing documents and interview with the Major and the PREA Coordinator. There were no inmates in segregation for risk of sexual victimization.
<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.71 Criminal and administrative agency investigation</th>
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<tbody>
<tr>
<td>□ Exceeds Standard (substantially exceeds requirement of standard)</td>
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<tr>
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<td></td>
</tr>
<tr>
<td>□ Does Not Meet Standard (requires corrective action)</td>
<td></td>
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</tbody>
</table>

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VII A 1-10 and interviews with investigator. The investigators has numerous years of experience as a Special Victims investigator specializing in women and children.

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.72 Evidentiary standard for administrative investigation</th>
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<tr>
<td>□ Does Not Meet Standard (requires corrective action)</td>
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**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VII B.1 and interviews with investigators.

<table>
<thead>
<tr>
<th>Standard number here</th>
<th>115.73 Reporting to inmates</th>
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**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VII C. 1-4. Reviewed sample notification to inmates dated 06/25/15.
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)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VIII A. 1-3. No staff have been accused of sexual abuse or harassment during this PREA Audit cycle.

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)

**Auditor comments, including corrective actions needed if does not meet standard**

GO O-123 VIII B.1-3 No contractor or volunteer has been accused of engaging in sexual abuse. Interviews with Major confirmed policy during this PREA Audit cycle.

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)

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 VIII. C 1-7 as well as confirmed procedure through interviews with Major, Shift Commanders, and the PREA Coordinator. There were no disciplinary sanctions on inmates during this PREA Audit cycle.
Standard number here 115.81 Medical and Mental health screening; history of sexual abuse

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

**Auditor comments, including corrective actions needed if does not meet standard**

Reviewed GO O-123 IX A. 1-3; PREA, Medical and Mental screening form and medical log as well as through interviews with intake staff, medical and mental health staff.

Standard number here 115.82 Access to emergency medical and mental health services

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

**Auditor comments, including corrective actions needed if does not meet standard**

Reviewed GO O-123 IX B. 1-2 and the Armor Policy J-J-01 as well as interviews with medical and mental health staff.

Standard number here 115.83 ongoing medical and mental health care for sexual abuse victims

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 IX C and the Armory Policy J-J-01 as well as interviews with medical and mental health staff.
Standard number here  115.86 Sexual abuse incident reviews

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

**Auditor comments, including corrective actions needed if does not meet standard**

Based on GO O-123 IX D and interview with Major, PREA Coordinator, and Medical / Mental Health staff.

Standard number here  115.87 Data collection

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

**Auditor comments, including corrective actions needed if does not meet standard**

GO O-123 IX. E. 1-5 plus review of the report and the data collected.

Standard number here  115.88 Data review for corrective action

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

**Auditor comments, including corrective actions needed if does not meet standard**

Standard number here  115.89 Data storage, publication and destruction

☐ Exceeds Standard (substantially exceeds requirement of standard)

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

☐ Does Not Meet Standard (requires corrective action)

Auditor comments, including corrective actions needed if does not meet standard


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.

James Aguiar, Jr. ______________________ 07/10/2017

Auditor Signature  Date