

**PREA AUDIT REPORT**     Interim     Final

**ADULT PRISONS & JAILS**

**Date of report:** 12/20/15

<b>Auditor Information</b>			
<b>Auditor name:</b> Juanita Thornton			
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<b>Telephone number:</b> 813-956-2794			
<b>Date of facility visit:</b> November 19-20, 2015			
<b>Facility Information</b>			
<b>Facility name:</b> Hernando County Detention Facility			
<b>Facility physical address:</b> 16425 Spring Hill Drive, Brooksville, Florida 34604			
<b>Facility mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Facility telephone number:</b> 352-797-3440			
<b>The facility is:</b>	<input type="checkbox"/> Federal	<input type="checkbox"/> State	<input checked="" type="checkbox"/> County
	<input type="checkbox"/> Military	<input type="checkbox"/> Municipal	<input type="checkbox"/> Private for profit
	<input type="checkbox"/> Private not for profit		
<b>Facility type:</b>	<input type="checkbox"/> Prison	<input checked="" type="checkbox"/> Jail	
<b>Name of facility's Chief Executive Officer:</b> Michael F. Page			
<b>Number of staff assigned to the facility in the last 12 months:</b> 141			
<b>Designed facility capacity:</b> 744			
<b>Current population of facility:</b> 502			
<b>Facility security levels/inmate custody levels:</b> Maximum, Medium, Minimum			
<b>Age range of the population:</b> 31-72			
<b>Name of PREA Compliance Manager:</b> N/A		<b>Title:</b> N/A	
<b>Email address:</b> <a href="#">Click here to enter text.</a>		<b>Telephone number:</b> <a href="#">Click here to enter text.</a>	
<b>Agency Information</b>			
<b>Name of agency:</b> <a href="#">Click here to enter text.</a>			
<b>Governing authority or parent agency:</b> <i>(if applicable)</i> Hernando County Sheriff's Office			
<b>Physical address:</b> 18900 Cortez Blvd, Brooksville, Florida 34601			
<b>Mailing address:</b> <i>(if different from above)</i> <a href="#">Click here to enter text.</a>			
<b>Telephone number:</b> 352-754-6830			
<b>Agency Chief Executive Officer</b>			
<b>Name:</b> Al Nienhuis		<b>Title:</b> Sheriff	
<b>Email address:</b> www.hernandosheriff.org		<b>Telephone number:</b> 352-754-6830	
<b>Agency-Wide PREA Coordinator</b>			
<b>Name:</b> Grace White		<b>Title:</b> Administrative Sergeant	
<b>Email address:</b> gwhite@hernandosheriff.org		<b>Telephone number:</b> 352-797-3408	

## **AUDIT FINDINGS**

### **NARRATIVE**

Juanita Thornton, Certified PREA Auditor, concluded the PREA audit of the Hernando county Sheriff's Office, Hernando County Detention facility on November 19 – 20, 2015. Prior to this inspection, the PREA Coordinator Grace White provided me with policies, procedures, all facility documentation related to each standard for review. There was continuous communication with Grace White during this review period in preparation for the on-site visit. On the first day of the audit, a meeting was held with Major Michael F. Page, Lieutenant Shaun Klucznik, PREA Coordinator Grace White and the command staff.

I toured the facility and conducted formal and informal staff interviews. PREA Compliance Manager James Aguiar for Marion County Sheriff's Office assisted by conducting inmate interviews throughout the facility. The inmate interviews consisted of 50 randomly selected inmates from different housing units. There were no transgender/inter-sex inmates in custody at the time of this audit. Additionally four (4) specialized staff (10 ) detention deputies (3) support staff to include volunteers and contractors, were interviewed and questioned regarding their PREA training on: how to report, who to report to, the filing of reports, available intervention, conducting interviews, evidence collection, follow up and monitoring retaliation. I was accompanied by Sergeant Grace White and Operations Lieutenant Shaun Klucznik.

The number of allegations received in the past 12 months of an inmate being sexually abused were (7) seven. All allegations were investigated by the Detention Inspector, none were referred for criminal investigation. While conducting these investigations the inspector followed all protocols policies/ guidelines for sexual abuse and sexual harassment accusations.

At the conclusion of this audit, an exit meeting was held to discuss the audit findings. The following people were present: Hernando County Sheriff Al Nienhuis, Major Michael F. Page, Captain Harold Hutchinson, Operation Lieutenant S. Klucznik, PREA Coordinator G. White, Medical Director K. Dekany, Detention Inspector Falkingham, Classification Sergeant Pabon, Booking Sergeant Stevens, Food Service Sergeant J. Johnston, Housing Sergeant Moffit and a host of Training, Kitchen and Housing staff members.

## **DESCRIPTION OF FACILITY CHARACTERISTICS**

Hernando County Sheriff's Office, Hernando County Detention Center, is located at 16425 Spring Hill Drive, Brooksville, FL. 34604. The Sheriff operates the Hernando County Detention Center which has an authorized capacity of 744 inmates. The facility houses males, females, and juveniles between the ages of 14 and 17 who have been adjudicated for treatment as adults charged or sentenced on misdemeanor and felony crimes. At the time of this audit there were no juveniles housed in the facility. There is one sally port with roll away doors that have the capacity to hold 4 vehicles at any one time and one visitor entrance.

The facility was constructed in 1987 and officially opened in 1988, operated by Correction Corporation of America with the capacity of 504. Since its original construction in 1988 the facility has expanded to 155,323 square feet with the now capacity of 744.

In 2010 the facility was taken over by the then-Sheriff Nugent, with a serious amount of maintenance repairs needed. Presently Sheriff Al Nienhuis has been the elected official maintaining the facility under the authority of the Board of Commissioners. The facility has been completely restored of every area within the confined settings of the facility.

In 2013 the Hernando County Sheriff's Office opened a new medical wing, which can now house up to 36 inmates, allowing a better layout by separating male and female population, visibility and protecting inmates from harming themselves or spreading illnesses to each other. This opening of the medical wing allowed the old wing to be renovated and restored to solely house juvenile offenders if the need arises.

Hernando County had recently added additional cameras throughout the facility shared/common areas. Cameras are viewed and/or monitored by Control room personnel, 24 hours a day, the shift commander's office and the Operations Lieutenant office.

## **SUMMARY OF AUDIT FINDINGS**

On November 20, 2015, at the close of the initial Hernando County Detention Center staff has done a tremendous overhaul and renovation to prepare for this audit. The agency had exceeded a number of the standards by maximizing the staff to ensure safety and building knowledge daily, training and meeting weekly for incident reviews, increasing visibility to detect and deter the possibility of sexual abuse or sexual harassment. Hernando County has met all the standards and is in compliance with 42 standards and 1 which was not applicable.

Number of standards exceeded: 11

Number of standards met: 31

Number of standards not met: 0

Number of standards not applicable: 1

### **Standard 115.11 Zero tolerance of sexual abuse and sexual harassment; PREA Coordinator**

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County has a written policy (G.O. 7040.25) mandating zero tolerance toward all forms of sexual abuse and sexual harassment and outlines Hernando County approach to preventing, detecting, and responding to such conduct.

Hernando County has a designated PREA Coordinator who has sufficient time and authority to develop, implement, and oversee agency efforts to comply with the PREA standards. The coordinator supplies more than efficient amounts of materials for staff (all staff member received and maintain a PREA reference card on their person at all times) to ensure compliance and training.

### **Standard 115.12 Contracting with other entities for the 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)

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Hernando County does not contract for the confinement of inmates with private agencies or entities.

### **Standard 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)

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Based on Hernando County policies, daily activity reports, staff rosters, documents provided by the PREA coordinator and interviews with staff/inmates.

**Standard 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)

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Based on Hernando County policy and procedure, interviews with security and program staff. At the time of this audit, there were no juveniles in custody.

Hernando County provides a separate floor solely for juveniles that maintains sight and sound separation between youthful inmates and adult inmates.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County does not conduct cross-gender strip searches or cross-gender visual body cavity searches; medical practitioners provides this service. If a search becomes necessary it is documented.

Hernando County does not search or physically examine a transgender or intersex inmates for the sole purpose of determining the inmate's genital status. If unknown it is obtained through verbal interaction with the inmate, review of medical records or through a medical exam conducted in private by a medical practitioner. Policy mandates that staff entering into any inmate housing of the opposite gender are to announce their presence.

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

- 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)

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Hernando county provides posters, and random inmate interviews with limited English speaking inmates. A language line and a TDD is also available at all times. In addition, the housing units are equipped with information stations which distributes up to date information in the two primary languages spoken in the community.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Interviews conducted with Operations Lieutenant Klucznik and Captain Hutchinson, who confirmed that the review of criminal backgrounds, as required under section (7040.25 (E) of this standard, are up to date, as well as volunteers and contractors who may have contact with inmates.

**Standard 115.18 Upgrades to facilities and technologies**

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Hernando County policy 7040.25 (9) Hernando county has increased their electronic surveillance system. This update and installation of over 220 cameras has proven to enhance the ability to protect inmates as well as staff from sexual abuse. The installation of new larger capacity servers captures and maintain video, replacing the analog to digital. The strategically placed cameras have allowed the best surveillance of the inmate population.

**Standard 115.21 Evidence protocol and forensic medical examinations**

- 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County Sheriff's Office is responsible for investigating allegations of sexual abuse. There is a Detention inspector assigned solely to conduct investigation once an allegation has been initiated. The protocol for the Sexual Assault Medical Forensic Examinations are followed.

**Standard 115.22 Policies to ensure 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance**



**determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County Sheriff's Office conducts all criminal investigations for Hernando County Detention. Notification of such allegation is initiated by an on duty staff member (first one on the scene) or the Detention Inspector. All initial information is forwarded to the detention inspector as soon as possible for inclusion with this fact finding. All complaints are investigated as criminal events until such time as they are deemed not to have prosecutorial merit. The event is then investigated as an administrative inquiry. The investigation determines the action to be taken.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Training curriculum, training verification sign in sheets, and interview with specialized staff such as the training sergeant and deputy were interviewed, as well as other random staff members to confirm compliance.

### **Standard 115.32 Volunteer and contractor 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County ensures that all volunteers and contractors who have contact with inmates have been trained on their responsibilities under the agency sexual abuse and sexual harassment prevention, detection, and response policies and procedures. During the audit volunteers and contractors were interviewed and documentation confirming (training staff), such lesson plans and sign in sheets were reviewed.

### Standard 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)

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Based on orientation material, inmate handbook, interviews with Intake Sergeant Stevens and random inmates. There are approximately five opportunities by the Intake staff to explain the agency's zero tolerance policy regarding sexual abuse and sexual harassment, how to report incidents or suspicion of sexual abuse or sexual harassment. Upon arrival in intake signage is in place, inmate is required to read and sign a form acknowledging that they understand the information provided. Staff is required to sign that information has been received by inmate, and medical staff again reiterates the policy. In addition there are continuous information stations that are displayed daily to ensure that the policy is compliant.

### Standard 115.34 Specialized training: 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Policy 7045.25 (17A, 17B) mandates that Hernando County has a Detention Inspector (Deputy Falkingham) assigned from the Hernando County Sheriff's Office who conducts all investigations. Deputy Falkingham has demonstrated along with training staff the Miranda, Garrity, and evidence collection. In addition during the weekly re-class meeting PREA is discussed to ensure that if any allegations are made are immediately addressed, and to ensure there is not any retaliation against any inmate (watch list).

### Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

If there are to be any forensic examinations, Hernando County contacts the Dawn Center (Shannon Sokolowski, MNM) of Hernando County who will deploy a Sexual Assault Nurse Examiner to the Brooksville Hospital or designated secure medical area to conduct a private examination. Hernando County ensures that all medical and mental health practitioners who work regularly in the facility have been trained in how to: detect, assess signs of sexual abuse and sexual harassment; preserve physical evidence of sexual abuse; responding effectively and professionally to victims of sexual abuse and sexual harassment.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on (20.A), interviews with random inmates, the PREA Coordinator, the screening staff and the medical staff has demonstrated that upon entry into the facility that all inmates are screened for risk of victimization, That all inmates are informed verbally and literally by signing and acknowledging that they (the inmate) have been notified and understand. Additionally the inmates that are screened are informed at least five times of the zero tolerance of sexual abuse and sexual harassment at Hernando County and reassured daily while in custody. The screening is tailored to both male and female.

**Standard 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)

relevant review period)

- Does Not Meet Standard (requires corrective action)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per Hernando County policy 7045.2 (20 A-D) Staff is aware that during the screening process that individual determines and can dictate thus, ensuring the safety of each inmate. Staff discussion, uses the information gathered to determine if an inmate is at high risk of being sexually victimized. When conducting interviews, staff and inmates will indicate that input from other inmates is considered when making housing/program assignments

### **Standard 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)

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PREA Coordinator, and Intake staff were interviewed based on the policy. During the past 12 months, one inmate was placed in involuntary segregated housing that was at risk for sexual victimization. That inmate placed in segregated housing still had access to programs, privileges, education and work opportunities. That one inmate was afforded a review within 30 days to determine whether there is a continuous need for separation, nor was there a need to remain longer than 30 days in the past 12 months.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These**

**recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County has numerous ways for the inmates to report abuse of harassment to a public and or private entity or office that is not a part of the Hernando County. Inmates reports of sexual harassment and sexual abuse can be directly forwarded to agency officials. Information is displayed daily on the information television line in each pod, and the sexual violence toll free hotline.

#### **Standard 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)

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Hernando County has established procedures for the filing of an emergency grievance when an inmate is subject to a substantial risk of imminent sexual abuse. Within 12 months the agency has had zero emergency grievances and zero grievances alleging sexual abuse.

#### **Standard 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)

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Hernando County has a MOU with Dawn Center to provide outside counseling and support services to inmates. Interview conducted with Shannon Sokoloski, MNM, the executive Director for Dawn Center explaining the policy and procedure of the interaction with Hernando County.

### Standard 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)

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Interview of random inmates, staff members, and public posting throughout the facility, in each pod, and television daily display, it is confirmed that inmates are aware of third party reporting.

### Standard 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)

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Random medical personnel, staff members were interviewed as well as random inmates to display compliance. Staff were also issued a PREA awareness information card as part of the daily work equipment.

### Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion**

**must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Compliance was based on interviews with Major Page, Captain Hutchinson, PREA Coordinator Grace White, and random Staff. If an inmate is determined to be in substantial risk of imminent sexual abuse the command staff is notified, It is monitored and housing assignment is modified to maintain their safety

#### **Standard 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)

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During the past 12 months, Hernando County received zero allegations of sexual abuse from another agency. Documentation reviewed and Hernando County displayed compliance.

#### **Standard 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)

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Based on random staff interviews, specialized staff member (training) and PREA Coordinator. As a first responder staff who may be the first on the scene will notify immediately all command staff including the Lieutenant, Inspector, Captain, and Major. The Major will make notification to the Sheriff of any open investigations during the command staff review daily. If warranted, notification is made immediately to the Sheriff via the chain of command.

### **Standard 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)

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Based on the interviews conducted with the mental/medical practitioners, PREA Coordinator, Detention Inspector and agency policy the agency is in compliant.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on the interview with PREA Coordinator and random staff members the agency has a policy in place to protect inmates and to respond to any incident of sexual abuse.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion**



**must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on the interview with Major Page; Classifications and Inspector Falkingham discuss any concerns during the weekly incident review team meeting and appropriately changes housing assignment, requests mental health review and offers assistance through the services offered through the Dawn Center. Other actions are in compliance with policy regarding no retaliation for lodging a complaint or providing witness testimony.

#### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on review of documents, policy and random staff members, those assigned to segregated housing are monitored and if necessary housing location modifications are made to assure that any housing assignment will maintain the inmate's safety.

#### **Standard 115.71 Criminal and administrative agency 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Compliance based on interviews with the Inspector and staff. During the past 12 months, Hernando County had zero allegations of conduct that appears to be criminal. Additionally during the weekly incident review team meeting, all issues referring to PREA that may developed are discussed proactively, as to negate reactionary responses to incident. Per Hernando County policy 7040.25(26 -27).

### **Standard 115.72 Evidentiary standard for administrative 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Compliance based on interview of investigative staff and policy review 7040.25 (26 - 27). Inspector Falkingham determines after complete investigation whether to impose the standard of a preponderance of the evidence or to lower when it is determined the allegations of sexual abuse or sexual harassment are substantiated. The Detention Inspector has the authority to file charges at the time or refer to the Sheriff's office for further investigation, if deemed necessary.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor's analysis and reasoning, and the auditor's conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on the Inspector and staff interviews the policy indicated that whenever sexual misconduct by staff is substantiated, unsubstantiated, and unfounded the inmate involved is notified of the result. During the past 12 months there were 14 notifications made to inmates and documented.

### **Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on Hernando County policy 7045.25 there is an indication that disciplinary sanctions for staff are applied for any violation of the agency's zero tolerance for sexual abuse and sexual harassment. Documentation reviewed also indicates that no staff member has violated the agency's policies in the past 12 months.

**Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on interviews with PREA Coordinator, Operations Lieutenant Klucznik, there were no contractors and/or volunteers that have been accused of engaging in sexual abuse. Both volunteers and contractors understand the policy and ramification for engaging in sexual abuse or sexual harassment of an inmate or staff member.

**Standard 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 discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on interviews and confirmed policy and procedure. During the past 12 months, there has been zero administrative finding of inmate to inmate sexual abuse.

**Standard 115.81 Medical and mental health screenings; 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on PREA screening form, classification review records, medical log as well as interviews with intake staff.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Review of policy, as well as interviews with medical and mental staff. Dawn Center is providing the service invoice as proof

**Standard 115.83 Ongoing medical and mental health care for sexual abuse victims and 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Per General Order 7040.25, Hernando county offers medical and mental evaluations to all inmates that have been victimized by sexual abuse, as well as follow up services, and referrals for continuous care after the release from Hernando county..

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Based on interviews with Operations Lieutenant, Captain Hutchinson, PREA Coordinator, and Detention Inspector.

The Detention Inspector considers whether the allegation or investigation indicates a need to change policy or practice to better prevent detect, respond to sexual abuse. The daily review of the PREA policy by the weekly incident review team can assess whether physical barriers in the area may enable abuse, assess the adequacy of staffing levels in that area during different shifts; assess whether monitoring technology should be deployed or enhanced to supplement supervision by staff.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County maintains, reviews and collects data as needed from incident-based, reports, investigation files, and sexual abuse incident reviews.

**Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County assures based on the PREA Coordinator that data that is submitted is reviewed as required by standard.

### **Standard 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)

**Auditor discussion, including the evidence relied upon in making the compliance or non-compliance determination, the auditor’s analysis and reasoning, and the auditor’s conclusions. This discussion must also include corrective action recommendations where the facility does not meet standard. These recommendations must be included in the Final Report, accompanied by information on specific corrective actions taken by the facility.**

Hernando County ensures that the data that is collected is secured and retained for at least 10 years after the initial collection. Additionally, per standard 115.87 any data collected can be maintained longer if required by federal, state, or local law. Prior to publishing aggregated sexual abuse data, Hernando County removes all personal identifiers.

### **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.

Juanita Thornton

12/20/15

Auditor Signature

Date